Minutes
USA Triathlon Board of Directors
Teleconference
October 1, 2012

Board Members Present:
Brian Harrington
Dave Kuendig
John Lines
Melissa Merson, ITU Ex Officio
Vince O'Brien
Victor Plata
Barry Siff
Steven Sexton
Kevin Smeltzer
Kevin Sullivan
Bob Wendling, President
Jack Weiss

Absent: Charles Baker

Staff:
Rob Urbach, CEO

Roll Call and Opening Remarks – Bob Wendling
Point of Order (Plata**) -** USAT is incorporated in the State of California. Under CA law, all directors of nonprofit boards are entitled to a vote, therefore the ex officio member of USAT is entitled to attend the meeting as a full voting member.
Ruling: point of order was not well taken. USAT may not be incorporated in California. The source of the information regarding the rights of the ex offio was an unfamiliar internet site and the board
Motion to appeal the decision of the chair (Plata/Seconded).
Discussion: whether or not USAT is incorporated in California.
Roll call vote
Brian Harrington n
Dave Kuendig a
John Lines y
Vince O'Brien n
Victor Plata y
Barry Siff n
Steven Sexton y
Kevin Smeltzer n
Kevin Sullivan n
Jack Weiss n
y-3 n-6 a-1
Motion to appeal the decision of the chair failed

Motion to select four delegates to represent USAT at the ITU Congress as Rob Urbach, Elizabeth Farnan, Joyce Donaldson, and Bob Wendling (Weiss/Seconded).
Point of Information (Plata) - Who did the the International Relations Committee recommend?
Answer: Candy Cheatham Rob Urbach, Joyce Donaldson, and Bob Wendling.

Point of Order (Sexton**)** The motion was not included on the agenda.
Ruling: Point of Order was not well taken. Item is appropriate under housekeeping duties.
Motion to appeal the decision of the Chair (Sexton/Seconded).
Brian Harrington n
Dave Kuendig n
John Lines y
Vince O'Brien n
Victor Plata n
Barry Siff n
Steven Sexton y
Kevin Smeltzer n
Kevin Sullivan n
Jack Weiss n
y-2 n-8

<u>**Motion** to divide the Question to consider each candidate separately (Sexton/Seconded)</u>
Brian Harrington n
Dave Kuendig y
John Lines y
Vince O'Brien n
Victor Plata y
Barry Siff n
Steven Sexton y
Kevin Smeltzer n
Kevin Sullivan n
Jack Weiss n
y-4 n-6

<u>Roll call vote on Main Motion</u> to select four delegates to represent USAT at the ITU Congress as Rob Urbach, Elizabeth Farnan, Joyce Donaldson, and Bob Wendling.
Brian Harrington y
Dave Kuendig n
John Lines n
Vince O'Brien y
Victor Plata n
Barry Siff y
Steven Sexton n
Kevin Smeltzer y

Kevin Sullivan y
Jack Weiss y
y-6 n-4
Motion passed

Approval of Minutes – Victor Plata (1 attachment)
The September 10th minutes as amended were accepted by unanimous consent.

Treasurer's Report – Jack Weiss (2 attachments)
Treasurer made his report and responded to questions by Board members.

Office Update – Rob Urbach
Recent Section 9 arbitration hearing ruling in favor of USAT.
Discussion of blackout shades meeting between ITU, USAT, and Aaron Sheidies.
Discussion of Lance Armstrong competing in the Ulman Cancer Fund event. It created a conflict with the sanctioning for Collegiate Nationals Qualifier at the same event. Solution was to create separate events to retain sanctioning for the collegiate event. The non-sanctioned Lance Armstrong event is a long distance event, the collegiate event is Olympic distance. Non-sanctioned event insurance policy was reviewed for compatible coverage with a USAT event.
1. Separate insurance coverage to allow stand-alone event for Olympic Event from the long distance event that Lance Armstrong will compete in.
2. Long distance event is unsanctioned, no ranking points; athletes have a right to refund of registration and 1-day license fee, or right to switch into the sanctioned event.
3. Separate liability waiver to take USAT out of the waiver.
4. Consistent message from USAT and Race Director.

Milwaukee was nominated to host 2013 Age-Group Nationals.
Motion to accept Milwaukee as Age-Group National Championship host city for 2013, and USAT may accept it for a second year (Lines/Seconded).
Motion approved by unanimous voice vote.

Strategic Planning Committee Update – Barry Siff (1 attachment)
Discussion on the draft strategic plan.
Friendly amendment accepted to add language in red in Section IV(C):
"Provide high-level training and recognition for volunteers and officials".
Motion to accept USAT Strategic Plan as amended (Lines/Seconded)
Motion approved by unanimous voice vote

Finance & Audit Committee (Form 990) – Jack Weiss (1 attachment)
Motion to approve the Form 990 as submitted by the Treasurer (Lines/Seconded)
Point of information (Plata- Secretary General**):** what states are we (USAT) incorporated in?

Answer: We are incorporated in the state of Colorado. Chair does not have documentation that USAT is incorporated in California.
CEO reported that USAT had two corporations, one in California, and one in Colorado. Filings were made in California, but he did not know what that meant.

Motion to table (Lines).
Approved by unanimous voice vote

<u>**New Business**</u>
2013 USOC IR Grants Program – Bob Wendling (2 attachments)
Grants must be submitted by the middle of December. Submit grant requests to International Relations (IR) Committee (Merson) or Rob Urbach.

Motion that USAT Board of Directors endorse the candidacies of Marisol Casado (President) and Loreen Barnett (Secretary General) in recognition of their considerable accomplishments in leading the sport over the past quadrennium. In particular their shepherding of the growth of the sport, enhancing the prominence of the sport in the Olympic Games, inclusion of Paratriathlon in the Paralympic Games, and increasing the medal opportunities in the Olympic Games (Sexton/Seconded).

Discussion: The motion would not obligate the delegates to the ITU Congress to vote for Casado. It is a secret ballot. Mr. Yu from Korea is running against Casado for President of ITU and supports the candidacy of Elizabeth Farnan on his board if he is elected. Neither Casado nor Barnett have contacted USAT's President or CEO about supporting Elizabeth Farnan's candidacy for the ITU Executive Board. There was a discussion of the travel expenses of Marisol Casado as the President of the ITU. The issue was addressed by Secretary General Barnett in the letter to National Federations. The USAT IR Committee unanimously approved a recommendation to endorse Casado and Barnett for re-election.

In support of the motion (Sexton): Casado is an IOC member and has been a good friend of USAT.
Proposed friendly amendment (Wendling) that the endorsement of USAT is contingent on Casado's support of Farnan for the ITU Executive Board.
Friendly amendment rejected.
Point of information (Sexton**)**: did President receive letter addressed to the Board from Doug Hillier?
Answer: Yes. Doug is the USAT candidate to serve on the ITU Medical Committee. Doug was in Yokohama over the weekend and spent time with Marisol Casado and stated that it would be a mistake for the Board not to support Casado.
<u>Roll Call Vote</u>
Brian Harrington n

Dave Kuendig y
John Lines y
Vince O'Brien n
Victor Plata y
Barry Siff n
Steven Sexton y
Kevin Smeltzer n
Kevin Sullivan n
Jack Weiss n
y-4 n-6
Motion Failed

Sanctioning Requirements for National Championship Qualifiers – Victor Plata
Issue was addressed by Rob Urbach regarding the Collegiate National Qualifier.

Championship Events Committee – Bob Wendling
Staff Liaison - Tim Yount
Board Liaison - Vince O'Brien
Committee composition: Chairs of the AGC, Regional Council, Race Director Committee, Duathlon Committee, and 2 AGC members and 2 Elite Athletes appointed by the AAC.
Motion to accept the charter and composition of the Championship Events Committee, but in the future for the Board Liaison compete in the events under consideration (Lines/Seconded).
Motion passed by unanimous voice vote.

Unfinished Business
Social Media Policy (Lines). USAT does not have a social media policy.
Action Item: The Board will investigate a social media policy (Lines).

Executive Session
Motion to go into Executive Session
Point of Order (Plata) - the ex officio member has the right to attend executive session per California Law.

During the call, the Secretary General emailed a Business Entity Detail concerning USA Triathlon from the California Secretary of State to the entire Board.
Ruling: Point of Order was not accepted because the meeting should be consistent in excluding the ex officio member.
Motion to go into Executive Session passed by unanimous voice vote.

Motion to adjourn (Weiss)
Unanimous voice vote.

USAT Treasurer's Report for BOD Meeting Oct 1, 2012

Federation's Financial Status:
--Membership is up overall
-Youth Annual: -27.76% **
**Actual purchases 2011 v 2012 -33% (45,375 youth v 33,007 youth)
-Youth One Day: 16,921
-2012 Youth 1 Day + Annuals: 49,928 v 45,375 for 2011(August 31)
---Actual Youth participation 2012 v 2011): +10.03%
-Adult: +5.98 %
-Overall: -2.68%
-Sanctions: +5.79%

--Membership in $$
--Youth Annuals: 2012 v Budget: + 32.4% (199.8K v 150.9K)
--Adult Annuals: 2012 v Budget: +10.63 % (2,940.5K v 2,657.8K)
--Elites Annuals: 2012 v Budget: -44.4%
--Youth 1 Day: $169,210 Non-Budget item
--Adult 1 Day: 2012 v Budget: -11.4%

--Youth Sanctioned Events:
--2012 v 2011: +7.37% (801 v 746)

USAT Treasurer's Report for BOD Meeting Aug 17, 2012

Federation's Financial Status:
--Membership is up overall
    -Youth: 9.5% **
    **Actual purchases 2011 v 2012 -33% (16,382 youth v 10,752 youth)
    -Youth One Day: 7565
    -2012 Youth 1 Day + Annuals: 18,318 v 16,382 for 2011(June 30)
        ---Actual Youth participation 2012 v 2011): +11.8%
    -Adult: +4.5 %
    -Overall: +3.31%
    -Sanctions: +6.3%

--Membership in $$
    --Youth Annuals: 2012 v Budget: + 24.3% (144.6K v 116.3K)
    --Adult Annuals: 2012 v Budget: +9.0 % (2,163.2K v 1,948.0K)
    --Elites Annuals: 2012 v Budget: -44.2%
    --Youth 1 Day: $75,665 Non-Budget item
    --Adult 1 Day: 2012 v Budget: -55.4%

USA Triathlon Strategic Plan 2013—2016

Draft as of 9/14/12

Draft Mission [1]

The mission of USAT is to grow and inspire the triathlon community.

Draft Vision 2012 – 2016 [2]

Our vision is to provide the resources required for all in the triathlon community to reach their full potential.

Draft Goals and Objectives [3]

I. Grow membership.[4]

A. Broaden USAT's reach.
   1. Deploy resources to engage under-represented communities.
      a. Increase impact of grants to under-served socio-economic communities by 50%.
      b. Increase non-Caucasian participation by 50%.
      c. Increase per-capita membership in three lowest regions by 30%.
   1. Expand event offering.
      a. Increase number of Aquabike races by 100%.
      b. Increase number of Duathlon races by 25%.
      c. Increase number of Aquathlon races by 100%.
   2. Broaden media exposure.
      a. Increase website and social media metrics by 100%.
      b. Increase race webcast distribution by 100%.
      c. Increase mainstream media exposure by 100%.

B. Engage youth.
   1. Increase total youth participation by 50%.
      a. Build Splash & Dash series to 60 events.
   2. Build USAT national youth program and/or seek national-level partnerships with youth organizations that will create awareness and directly drive participation.
   3. Grow youth teams by 50%.

C. Improve the accessibility of triathlon.
   1. Create community event sanctioning program to reduce physical, financial and psychological barriers.
   2. Develop club series racing programs.

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[1] The business you are in; the reason for your existence; overarching purpose
[2] A picture of the organization's achievement by the end of the strategic plan life span
[3] Goals express outcomes to reach the vision. For each goal, a set of objectives expresses how the goals are achieved.
[4] Baseline numbers to be provided on objectives that have specific percentage goals.

D. Increase retention.
   1. Improve the membership retention rate by 20%.

E. Understand consumer segments and leverage passion drivers.
   1. Identify and segment database into distinct psychographic categories.
   2. Provide insights on each of these segments to partners.
   3. Provide more relevant offerings to each of these segments.

F. Amplify the USAT value proposition to members.
   1. Create more awareness for member benefits.
   2. Broaden member recognition programs.
   3. Develop more robust membership portal to increase the value exchange.

II. Maximize revenue and resources.

A. Increase marketing revenue by 50%.
   1. Systematically prospect non-endemic categories.
   2. Reach full capacity on endemics.
   3. Monetize digital assets.

B. Develop fundraising capacity.
   1. Roll out Foundation, reach $500,000 in donations.

C. Increase royalty revenues by 100%.
   1. Fully leverage brand attributes.

III. Inspire and deliver value to our constituencies.

A. Provide timesaving and experience-enhancing resources to constituencies.
   1. Leverage registration (point of emotional commitment) to provide value to participants, race directors and sponsors/partners.

B. Enable each constituency to operate more professionally by providing tools and supports.
   1. Provide real-time results reporting for race directors.
   2. Develop and manage coach referral program.
   3. Provide appropriate funding for US and international officials.

C. Engage constituents more deeply by providing services and information relevant to them.
   1. Create and manage industry-leading race calendar.
   2. Create and manage industry-leading results database.
   3. Create and manage industry-leading money list at no cost to USAT.

D. Communicate with and across constituencies in a clear and transparent way.

1. Deepen the "socialization" culture.
2. Develop systematic communication protocols with regions and committees to ensure feedback channels are open and constituencies are informed.

IV. Cultivate a high performance culture.

A. Create objective and measurable goals for athletic performance.
   1. Support athletes in the Olympic pipeline and strive for podium spots in the Olympics, PanAm Games and Elite ITU races, and other objectives consistent with annual high performance plan.
   2. Provide support for age group racers designed to increase performance at high-level competitions at all distances.
   3. Provide support to enable US paratriathletes to win Paralympic and world championship medals.

B. Benchmark, set measurable goals, evaluate performance, and practice continuous improvement in the areas of products, services, and operational performance.

C. Provide high-level training and recognition for volunteers.

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning and ending

B Check if applicable:
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization: USA TRIATHLON

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address): 5825 DELMONICO DRIVE, SUITE 200 | Room/suite

City or town, state or country, and ZIP + 4: COLORADO SPRINGS, CO 80919

D Employer identification number: 68-0047940

E Telephone number: 719-597-9090

G Gross receipts $ 13,046,766.

F Name and address of principal officer: ROB URBACH
SAME AS C ABOVE

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) Are all affiliates included? [ ] Yes [ ] No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

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

J Website: ▶ WWW.USATRIATHLON.ORG

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1984 **M** State of legal domicile: CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: TO ENCOURAGE, SUPPORT AND ENHANCE THE MULTISPORT LIFESTYLE IN THE UNITED STATES.

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	12
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	12
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	78
6	Total number of volunteers (estimate if necessary)	6	132
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	255,117.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-40,335.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,616,645.	1,877,822.
	9	Program service revenue (Part VIII, line 2g)	8,751,570.	9,647,417.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	225,915.	394,594.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	299,930.	347,743.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,894,060.	12,267,576.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	540,607.	975,442.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,909,988.	3,201,992.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 897,880.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	7,079,967.	7,542,752.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,530,562.	11,720,186.
	19	Revenue less expenses. Subtract line 18 from line 12	363,498.	547,390.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	8,043,981.	8,213,996.
	21	Total liabilities (Part X, line 26)	2,887,482.	2,963,169.
	22	Net assets or fund balances. Subtract line 21 from line 20	5,156,499.	5,250,827.

Part II Signature Block

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

Sign Here

▶ Signature of officer | Date

▶ ROB URBACH, CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
JILL J. GOODWIN				P00450838

Firm's name ▶ WAUGH & GOODWIN, LLP | Firm's EIN ▶ 20-1766527

Firm's address ▶ 1365 GARDEN OF THE GODS, SUITE 150
COLORADO SPRINGS, CO 80907 | Phone no. (719) 590-9777

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission:
USA TRIATHLON IS THE NATIONAL GOVERNING BODY FOR THE MULTI-SPORT DISCIPLINES OF TRIATHLON, DUATHLON, AQUATHLON, AQUABIKE & WINTER TRIATHLON IN THE UNITED STATES. USA TRIATHLON IS A MEMBER FEDERATION OF THE US OLYMPIC COMMITTEE AND THE INTERNATIONAL TRIATHLON UNION.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 5,715,757. including grants of $) (Revenue $ 1,716,716.)
COMPETITIONS & TRAINING - THE ORGANIZATION PROVIDED SUPPORT FOR GRASS-ROOTS ATHLETE DEVELOPMENT AND TRAINING, JUNIOR DEVELOPMENTAL TEAMS, AGE-GROUP COMPETITIONS (BOTH NATIONAL AND WORLD CHAMPIONSHIPS), ELITE-LEVEL ATHLETES, COACHING EDUCATION, RACE OFFICIALS AND AGE-GROUP TRAINING PROGRAMS.

4b (Code:) (Expenses $ 1,805,945. including grants of $) (Revenue $ 7,448,442.)
MEMBERSHIP - PROVIDES LIABILITY AND MEDICAL INSURANCE TO MEMBERS WHILE PARTICIPATING, 4 MAGAZINES, NATIONAL RANKING SERVICE, STICKER, AND MEMBER DISCOUNT BENEFITS TO OVER 150,000 MEMBERS.

4c (Code:) (Expenses $ 1,936,716. including grants of $) (Revenue $ 482,259.)
EVENT SANCTIONING - THE ORGANIZATION PROVIDES LIABILITY AND EVENT INSURANCE, RISK MANAGEMENT, SAFETY REVIEWS AND EVENT DEVELOPMENT SUPPORT TO OVER 3,400 AGE GROUP, ELITE AND YOUTH EVENTS/RACES.

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

4e **Total program service expenses ▶** 9,458,418.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	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, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, 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; 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, VII, VIII, IX, or X as applicable.			
a	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		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *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
e	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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	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, XII, and XIII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
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		X
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		

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Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States 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 and other assistance to individuals in the United States 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 through 24d and complete Schedule K. If "No", go to line 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
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) and 501(c)(4) 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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *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, 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):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	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, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *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 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	274		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		X	
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	2a	78		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a		X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b		X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country: ▶				
	See instructions for filing requirements for Form TD F 90-22.1, 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			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	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 organization solicit any contributions that were not tax deductible?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**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 and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	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			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	14b			

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

Check if Schedule O contains a response to any question in this Part VI .... [X]

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	1a	12		
	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.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	12		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		9		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶CA

18 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.

[X] Own website [ ] Another's website [X] Upon request

19 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.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶

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

Check if Schedule O contains a response to any question in this Part VII ☐

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) VINCE O'BRIEN DIRECTOR	5.00	X						0.	0.	0.
(2) BOB WENDLING DIRECTOR & PRESIDENT	5.00	X		X				0.	0.	0.
(3) JOHN LINES DIRECTOR	5.00	X						0.	0.	0.
(4) CELESTE CALLAHAN DIRECTOR	5.00	X						0.	0.	0.
(5) VICTOR PLATA DIRECTOR	5.00	X						0.	0.	0.
(6) BRIAN HARRINGTON DIRECTOR	5.00	X						0.	0.	0.
(7) ERIC AVERILL DIRECTOR & VICE PRES.	5.00	X		X				0.	0.	0.
(8) CANDY CHEATHAM DIRECTOR & SECRETARY	5.00	X		X				0.	0.	0.
(9) DAVE KUENDIG DIRECTOR	5.00	X						0.	0.	0.
(10) KEVIN SMELTZER DIRECTOR	5.00	X						0.	0.	0.
(11) STEVEN SEXTON DIRECTOR & TREASURER	5.00	X		X				0.	0.	0.
(12) MELISSA MERSON DIRECTOR	5.00	X						0.	0.	0.
(13) CHUCK BAKER DIRECTOR	5.00	X						0.	0.	0.
(14) ROB URBACH CHIEF EXECUTIVE OFFICER	65.00				X			166,667.	0.	10,742.
(15) TIM S. YOUNT CHIEF OPERATING OFFICER	60.00				X			163,477.	0.	30,958.
(16) CHUCK MENKE DIRECTOR OF MARKETING	60.00					X		106,952.	0.	10,751.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Sub-total ▶								437,096.	0.	52,451.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								437,096.	0.	52,451.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 3

			Yes	No
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*	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

Contributions, Gifts, Grants and Other Similar Amounts

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1 a	Federated campaigns	1a				
b	Membership dues	1b				
c	Fundraising events	1c				
d	Related organizations	1d 524,607.				
e	Government grants (contributions)	1e				
f	All other contributions, gifts, grants, and similar amounts not included above	1f 1,353,215.				
g	Noncash contributions included in lines 1a-1f: $ 938,700.					
h	**Total.** Add lines 1a-1f ▶		1,877,822.			

Program Service Revenue

		Business Code	(A)	(B)	(C)	(D)
2 a	MEMBERSHIP DUES	711300	7,448,442.	7,448,442.		
b	CHAMPIONSHIPS	711300	854,585.	854,585.		
c	COACHING CAMPS & CLINI	711300	569,890.	569,890.		
d	SANCTIONING EVENTS	711300	482,259.	482,259.		
e	COACHING CERTIFICATION	711300	123,615.	123,615.		
f	All other program service revenue	711300	168,626.	168,626.		
g	**Total.** Add lines 2a-2f ▶		9,647,417.			

Other Revenue

				(A)	(B)	(C)	(D)
3	Investment income (including dividends, interest, and other similar amounts) ▶			163,491.			163,491.
4	Income from investment of tax-exempt bond proceeds ▶						
5	Royalties ▶			92,626.			92,626.
		(i) Real	(ii) Personal				
6 a	Gross rents						
b	Less: rental expenses						
c	Rental income or (loss)						
d	Net rental income or (loss) ▶						
		(i) Securities	(ii) Other				
7 a	Gross amount from sales of assets other than inventory	1010293.					
b	Less: cost or other basis and sales expenses	779,190.					
c	Gain or (loss)	231,103.					
d	Net gain or (loss) ▶			231,103.			231,103.
8 a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c). See Part IV, line 18 ... a						
b	Less: direct expenses ... b						
c	Net income or (loss) from fundraising events ▶						
9 a	Gross income from gaming activities. See Part IV, line 19 ... a						
b	Less: direct expenses ... b						
c	Net income or (loss) from gaming activities ▶						
10 a	Gross sales of inventory, less returns and allowances ... a						
b	Less: cost of goods sold ... b						
c	Net income or (loss) from sales of inventory ▶						

	Miscellaneous Revenue	Business Code	(A)	(B)	(C)	(D)
11 a	ADVERTISING	541800	255,117.		255,117.	
b						
c						
d	All other revenue					
e	**Total.** Add lines 11a-11d ▶		255,117.			
12	**Total revenue.** See instructions. ▶		12267576.	9,647,417.	255,117.	487,220.

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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) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	363,060.	363,060.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	612,382.	612,382.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	371,844.	136,105.	235,739.	
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	2,254,064.	1,589,560.	231,446.	433,058.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	70,946.	50,314.	6,475.	14,157.
9 Other employee benefits	277,294.	181,729.	38,458.	57,107.
10 Payroll taxes	227,844.	133,588.	57,724.	36,532.
11 Fees for services (non-employees):				
a Management				
b Legal	34,067.		34,067.	
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	853,761.	662,365.	111,054.	80,342.
12 Advertising and promotion	20,975.	9,050.		11,925.
13 Office expenses	1,144,345.	1,053,506.	56,146.	34,693.
14 Information technology	93,305.	70,363.	15,939.	7,003.
15 Royalties				
16 Occupancy	456,515.	311,598.	88,659.	56,258.
17 Travel	1,517,782.	1,278,066.	161,459.	78,257.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	231,584.		231,584.	
23 Insurance	1,180,036.	1,180,036.		
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.)				
a VALUE IN KIND	889,533.	859,795.	12,149.	17,589.
b ENTRY FEES	252,435.	252,435.		
c AWARDS	243,683.	232,432.	4,903.	6,348.
d HOSPITALITY	183,651.	168,154.	7,616.	7,881.
e All other expenses	441,080.	313,880.	70,470.	56,730.
25 **Total functional expenses.** Add lines 1 through 24e	11,720,186.	9,458,418.	1,363,888.	897,880.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	882,140.	1	847,742.
	2	Savings and temporary cash investments	525,000.	2	532,390.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	37,211.	4	161,614.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	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)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	8,370.	8	
	9	Prepaid expenses and deferred charges	496,931.	9	613,399.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,632,923.			
	b	Less: accumulated depreciation 10b 467,305.	1,092,128.	10c	1,165,618.
	11	Investments - publicly traded securities	5,002,201.	11	4,893,233.
	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)	8,043,981.	16	8,213,996.
Liabilities	17	Accounts payable and accrued expenses	780,448.	17	754,401.
	18	Grants payable		18	
	19	Deferred revenue	2,107,034.	19	2,208,768.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	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	
	26	**Total liabilities.** Add lines 17 through 25	2,887,482.	26	2,963,169.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	5,156,499.	27	5,250,827.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	5,156,499.	33	5,250,827.
	34	Total liabilities and net assets/fund balances	8,043,981.	34	8,213,996.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	12,267,576.
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,720,186.
3	Revenue less expenses. Subtract line 2 from line 1	3	547,390.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,156,499.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-453,062.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	5,250,827.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII [X]

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] 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		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
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?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: [X] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
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?	3a		X
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		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047
2011
Open to Public Inspection

Name of the organization USA TRIATHLON
Employer identification number 68-0047940

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☒ An 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.)
10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
11 ☐ 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 that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2010 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test - 2011.** 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 ▶ ☐

b **33 1/3% support test - 2010.** 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 ▶ ☐

17a **10% -facts-and-circumstances test - 2011.** 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2010.** 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

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 organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7949555.	7811010.	8304234.	8772166.	9326264.	42163229.
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	1269246.	1368745.	1787035.	1655711.	2291601.	8372338.
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	9218801.	9179755.	10091269.	10427877.	11617865.	50535567.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
8 **Public support** (Subtract line 7c from line 6.)						50535567.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	9218801.	9179755.	10091269.	10427877.	11617865.	50535567.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	155,149.	-203,120.	251,896.	225,915.	394,594.	824,434.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	155,149.	-203,120.	251,896.	225,915.	394,594.	824,434.
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 IV.)	148,130.	279,555.	218,590.	240,268.	255,117.	1141660.
13 **Total support** (Add lines 9, 10c, 11, and 12.)	9522080.	9256190.	10561755.	10894060.	12267576.	52501661.

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	96.26	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	96.36	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2011** (line 10c, column (f) divided by line 13, column (f))	17	1.57	%
18 Investment income percentage from **2010** Schedule A, Part III, line 17	18	1.34	%

19a **33 1/3% support tests - 2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support tests - 2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**

OMB No. 1545-0047

2011

Name of the organization	**Employer identification number**
USA TRIATHLON	68-0047940

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

[ ] For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

[ ] For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year. .... ▶ $ ____________

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization: USA TRIATHLON

Employer identification number: 68-0047940

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BLUE COMPETITION CYCLES 6161 ATLANTIC BLVD NORCROSS, GA 30071	$ 19,230.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
2	BODYGLIDE INC. 12443 BEL RED ROAD, SUITE 380 BELLEVUE, WA 98005	$ 13,625.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
3	COMPETITOR GROUP 977 WAPLES ST, #150 SAN DIEGO, CA 92121	$ 5,000.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
4	COMPUTRAINER 3016 NE BLAKELY STREET SEATTLE, WA 98105	$ 13,978.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
5	DEFEET 647 SUNRISE DR EAST VISTA, CA 92084	$ 5,000.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
6	DOWRAP/SWEATVAC 1747 W GRACE ST CHICAGO, IL 60613	$ 24,500.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
USA TRIATHLON	68-0047940

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	GARMIN 1200 E. 151ST STREET OLATHE, KS 66062	$ 11,875.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
8	GATORADE 225 N MICHIGAN AVE CHICAGO, IL 60601	$ 166,000.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
9	GLOBAL SPORTS TECH 4745 SIGNAL ROCK RD COLORADO SPRINGS, CO 80922	$ 13,600.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
10	GREENLAYER 4888 NW BETHAN BLVD, #210 PORTLAND, OR 97229	$ 9,200.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
11	HEATHER LEACH 7434 WINONA AVE N SEATTLE, WA 98103	$ 8,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
12	INNOVATIVE COMPANIES 3525 DEL MAR HEIGHTS ROAD, STE 732 SAN DIEGO, CA 92130-2122	$ 8,046.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
USA TRIATHLON	68-0047940

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	JAYBIRD AUDIO 2825 EAST COTTONWOOD PARKWAY, #500 SALT LAKE CITY, UT 84121	$ 10,000.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
14	LAJOLLA WETSUIT 7875 CONVOY COURT SAN DIEGO, CA 92111	$ 135,600.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
15	RUDY PROJECT 3300 E 17TH AVE DENVER, CO 80206	$ 63,649.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
16	SELLE ITALIA ZI MOTTINELLO PRIMA STRADA 15 ROSSANO, V. TO, ITALY	$ 22,095.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
17	SILICONCOACH 286 PRINCESS STREET DUNEDIN, NEW ZEALAND	$ 20,955.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
18	TRI TAT PO BOX 26222 OVERLAND PARK, KS 66213	$ 11,235.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
USA TRIATHLON	68-0047940

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	TYR SPORT, INC. 15391 SPRINGDALE ST HUNTINGTON BEACH, CA 92649	$ 124,708.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
20	UNITED STATES OLYMPIC COMMITTEE 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	$ 49,167.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
21	UNITED STATES OLYMPIC COMMITTEE 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	$ 475,440.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
22	YANKZ! 750 VA CR NE ATLANTA, GA 30306	$ 18,000.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
23	ZIPP SPEED WEAPONRY 1180 N MAIN STREET, STE A SPEEDWAY, IN 46224	$ 72,950.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
24	GU ADVANCE FOOD CONCEPTS 1204 TENTH ST BERKELEY, CA 94710	$ 49,690.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)

Name of organization	Employer identification number
USA TRIATHLON	68-0047940

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	HALO LANE GAINER SPORTS PO BOX 130462 ANN ARBOR, MI 48113	$ 6,868.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
26	MINERVA HEALTH TECHNOLOGIES 172 BROADWAY WOODCLIFF LAKE, NJ 07677	$ 5,750.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
27	ZUM 807 JUDSON AVE EVANSTON, IL 60202	$ 26,000.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization: USA TRIATHLON

Employer identification number: 68-0047940

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 19,230.	07/01/11
2	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 13,625.	07/01/11
3	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 5,000.	07/01/11
4	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 13,978.	07/01/11
5	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 5,000.	07/01/11
6	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 24,500.	07/01/11

Name of organization	Employer identification number
USA TRIATHLON	68-0047940

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 11,875.	07/01/11
8	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 166,000.	07/01/11
9	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 13,600.	07/01/11
10	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 9,200.	07/01/11
12	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 8,046.	07/01/11
13	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 10,000.	07/01/11

Name of organization: USA TRIATHLON

Employer identification number: 68-0047940

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
14	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 135,600.	07/01/11
15	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 63,649.	07/01/11
16	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 22,095.	07/01/11
17	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 20,955.	07/01/11
18	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 11,235.	07/01/11
19	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 124,708.	07/01/11

Name of organization: USA TRIATHLON

Employer identification number: 68-0047940

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
20	AIRLINE TICKETS	$ 49,167.	07/01/11
22	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 18,000.	07/01/11
23	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 72,950.	07/01/11
24	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 49,690.	07/01/11
25	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 6,868.	07/01/11
26	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 5,750.	07/01/11

Name of organization	Employer identification number
USA TRIATHLON	68-0047940

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
27	EQUIPMENT/PRODUCT/SUPPLIES/SERVICES	$ 26,000.	07/01/11

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

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

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

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

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

Name of organization	Employer identification number
USA TRIATHLON	68-0047940

Part III *Exclusively* **religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than $1,000 for the year.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047
2011
Open to Public Inspection

Name of the organization USA TRIATHLON

Employer identification number 68-0047940

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

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

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

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ______

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" to 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 XIV, the text of the footnote to its financial statements that describes these items.

b 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) Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

(ii) Assets included in Form 990, Part X ▶ $ ______

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

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

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

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ ______ %

b Permanent endowment ▶ ______ %

c Temporarily restricted endowment ▶ ______ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		81,803.	12,252.	69,551.
d Equipment		1,551,120.	455,053.	1,096,067.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				1,165,618.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	12,267,576.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	11,720,186.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	547,390.
4	Net unrealized gains (losses) on investments	4	-453,062.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	-453,062.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	94,328.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	11,814,514.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	-453,062.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines **2a** through **2d**			2e	-453,062.
3	Subtract line **2e** from line **1**			3	12,267,576.
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	12,267,576.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	11,720,186.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d			
e	Add lines **2a** through **2d**			2e	0.
3	Subtract line **2e** from line **1**			3	11,720,186.
4	Amounts included on Form 990, Part IX, line 25, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	11,720,186.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2: NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE ACCOMPANYING FINANCIAL STATEMENTS BECAUSE THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986.

THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ISSUED FASB ASC 740, "INCOME TAXES", WHICH CLARIFIES THE ACCOUNTING AND RECOGNITION FOR INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE ORGANIZATION'S INCOME

Part XIV **Supplemental Information** *(continued)*

TAX RETURNS.

THE ORGANIZATION'S INCOME TAX FILINGS ARE SUBJECT TO AUDIT BY VARIOUS TAXING AUTHORITIES. THE ORGANIZATION'S OPEN AUDIT PERIODS ARE 2008 TO 2011. THE ORGANIZATION BELIEVES THAT ITS OPERATIONS HAVE BEEN CONDUCTED IN ACCORDANCE WITH ITS TAX-EXEMPT STATUS.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization: USA TRIATHLON

Employer identification number: 68-0047940

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACHIEVE KIDS TRI, INC. 2000 M ST NW, STE 520 WASHINGTON, DC 20036	26-2073899	501(C)(3)	35,500.	0.			TO SUPPORT THE TRIATHLON SPORT AND LIFESTYLE
COLLEGIATE ELITE TRIATHLON ACADEMY 2135 CITYGATE LANE, SUITE 420 NAPERVILLE, IL 60563	45-2116821	501(C)(3)	100,000.	0.			TO SUPPORT THE TRIATHLON SPORT AND LIFESTYLE
CHALLENGED ATHLETES FOUNDATION 9591 WAPLES STREET SAN DIEGO, CA 92121	33-0739596	501(C)(3)	7,500.	0.			TO SUPPORT THE TRIATHLON SPORT AND LIFESTYLE
COLUMBIA TRIATHLON ACADEMY 9130G RED BRANCH ROAD COLUMBIA, MD 21045	52-1615083	501(C)(3)	5,000.	0.			TO SUPPORT THE TRIATHLON SPORT AND LIFESTYLE
ELITA EVENTS, LLC 120 SW 5TH STREET #602 DES MOINES, IA 50309	20-3333081		9,150.	0.			TO SUPPORT THE TRIATHLON SPORT AND LIFESTYLE
NORTH CAROLINA MULTISPORT EXPO 4211 UNIVERSITY STATION ROAD CHAPEL HILL, NC 27514	45-3179821		5,000.	0.			TO SUPPORT THE TRIATHLON SPORT AND LIFESTYLE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 5.

3 Enter total number of other organizations listed in the line 1 table ▶ 5.

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SUN MULTISPORT EVENTS 54 BEECHNUT ROAD WESTWOOD, ME 02090	16-1761455		12,000.	0.			TO SUPPORT THE TRIATHLON SPORT AND LIFESTYLE
SWIM FOR SMILES 210 OLD BARN LANE CHAPEL HILL, NC 27517	20-5186388	501(C)(3)	5,000.	0.			TO SUPPORT THE TRIATHLON SPORT AND LIFESTYLE
TAMPA BAY TRI SPORT 21754 WAVERLY SHORES LANE LAND O' LAKES, FL 34637	27-5486103		5,000.	0.			TO SUPPORT THE TRIATHLON SPORT AND LIFESTYLE
TRI-AND-FIT 3 PIKES HILL ROAD STERLING, MA 01564	10-4664071		7,000.	0.			TO SUPPORT THE TRIATHLON SPORT AND LIFESTYLE

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ATHLETE TRAINING STIPENDS, INCENTIVES AND GRANTS	40	527,269.	0.	FMV	

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization: USA TRIATHLON

Employer identification number: 68-0047940

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III. ☒ Compensation committee ☒ Written employment contract ☐ Independent compensation consultant ☒ Compensation survey or study ☒ Form 990 of other organizations ☒ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		X
b	Any related organization?	**5b**		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	**6a**		X
b	Any related organization?	**6b**		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	**8**		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 ROB URBACH	(i)	166,667.	0.	0.	5,833.	4,909.	177,409.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 TIM S. YOUNT	(i)	154,000.	0.	9,477.	7,700.	23,258.	194,435.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization: USA TRIATHLON

Employer identification number: 68-0047940

Part I **Types of Property**

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (SPORTS RELATE)	X	38	889,533.	EST. PURCHASE PRICE
26	Other ▶ (AIRLINE TICKE)	X	1	49,167.	EST. PURCHASE PRICE
27	Other ▶ ( )				
28	Other ▶ ( )				

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

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II.			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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01-23-12

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B): THE ORGANIZATION IS REPORTING THE ACTUAL NUMBER OF CONTRIBUTORS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047
2011
Open to Public Inspection

Name of the organization	Employer identification number
USA TRIATHLON	68-0047940

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

USA TRIATHLON COORDINATES AND SANCTIONS GRASS-ROOTS AND ELITE MULTI-SPORTS EVENTS ACROSS THE COUNTRY AND WORKS TO CREATE INTEREST AND PARTICIPATION IN THOSE PROGRAMS. USA TRIATHLON'S 150,000+ STRONG MEMBERSHIP IS COMPRISED OF ATHLETES OF ALL AGES, COACHES, OFFICIALS, PARENTS AND FANS STRIVING TOGETHER TO STRENGHTEN MULTI-SPORT. ON THE ELITE LEVEL, USA TRIATHLON IS RESPONSIBLE FOR THE SELECTION AND TRAINING OF TEAMS TO REPRESENT THE UNITED STATES IN INTERNATIONAL COMPETITION, INCLUDING THE WORLD CHAMPIONSHIPS, PAN AM GAMES AND OLYMPIC GAMES.IT CONDUCTS NATIONAL CAMPS AND CLINICS AND PROVIDES COACHING EDUCATION PROGRAMS. ON THE DEVELOPMENT LEVEL, USA TRIATHLON FOSTERS GRASS-ROOTS EXPANSION OF THE SPORT.

FORM 990, PART VI, SECTION A, LINE 6: USA TRIATHLON IS A MEMBERSHIP ORGANIZATION WITH OVER 150,000 MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS OF THE ORGANIZATION VOTE FOR INDIVIDUALS TO SERVE AS MEMBERS OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B: AT THE ANNUAL MEETING OF THE MEMBERSHIP, THE BOARD OF DIRECTORS PRESENTS CERTAIN ACTION ITEMS FOR MEMBERSHIP VOTE.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 WILL BE REVIEWED BY USAT'S SENIOR STAFF TEAM FIRST. THE BOARD WILL THEN REVIEW IT BEFORE IT IS FILED. THE 990 WILL BE POSTED ON USAT'S WEBSITE.

Name of the organization: USA TRIATHLON

Employer identification number: 68-0047940

FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD REVIEWS THE CONFLICT OF INTEREST POLICY EACH YEAR.

FORM 990, PART VI, SECTION B, LINE 15: THE CEO IS REVIEWED ANNUALLY THROUGH A 360-REVIEW PROCESS. ALL EMPLOYEES, BOARD MEMBERS AND SELECTED PEERS ARE ASKED TO PARTICIPATE. COMPENSATION IS COMPARED TO SURVEYS INCLUDING: NATIONAL GOVERNING BODY SALARY SURVEY, MSEC NON-PROFIT SURVEY, PAY SCALE REPORT, AND ERI SALARY ACCESSOR. THE CEO PERFORMANCE REVIEW IS COMPARED TO THE SURVEYS AND THE BOARD APPROVES THE FINAL LEVEL FOR THE YEAR. FOR KEY EMPLOYEES, THE CEO USES THE SAME SURVEYS TO DEVELOP A RANGE FOR EACH SALARIED POSITION AT USAT. THE CEO PROPOSES OVERALL PAYSCALE DURING EACH BUDGET REVIEW AND IN NOVEMBER, THE USAT BOARD APPROVES OR APPROVES WITH CHANGES THE FOLLOWING YEAR BUDGET.

FORM 990, PART VI, SECTION C, LINE 18: FORMS ARE AVAILABLE ON THE WEBSITE AND UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE OR BY REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS: -453,062.

FORM 990, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

SCHEDULE R (Form 990)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047
2011
Open to Public Inspection

Name of the organization: USA TRIATHLON

Employer identification number 68-0047940

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

DRAFT

Part II **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
UNITED STATES OLYMPIC COMMITTEE - 13-1548339 ONE OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	OLYMPIC ATHLETE DEVELOPMENT	COLORADO	501(C)(3)	170(B)(1)(A)			X

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

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

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

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V **Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

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

			Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	**1a**		X
b	Gift, grant, or capital contribution to related organization(s)	**1b**		X
c	Gift, grant, or capital contribution from related organization(s)	**1c**	X	
d	Loans or loan guarantees to or for related organization(s)	**1d**		X
e	Loans or loan guarantees by related organization(s)	**1e**		X
f	Sale of assets to related organization(s)	**1f**		X
g	Purchase of assets from related organization(s)	**1g**		X
h	Exchange of assets with related organization(s)	**1h**		X
i	Lease of facilities, equipment, or other assets to related organization(s)	**1i**		X
j	Lease of facilities, equipment, or other assets from related organization(s)	**1j**		X
k	Performance of services or membership or fundraising solicitations for related organization(s)	**1k**		X
l	Performance of services or membership or fundraising solicitations by related organization(s)	**1l**		X
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1m**		X
n	Sharing of paid employees with related organization(s)	**1n**		X
o	Reimbursement paid to related organization(s) for expenses	**1o**		X
p	Reimbursement paid by related organization(s) for expenses	**1p**		X
q	Other transfer of cash or property to related organization(s)	**1q**		X
r	Other transfer of cash or property from related organization(s)	**1r**		X

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

	(a) Name of other organization	**(b)** Transaction type (a-r)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1)	UNITED STATES OLYMPIC COMMITTEE	C	524,607.	FAIR MARKET VALUE
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor-tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

Form **990-T**

Department of the Treasury
Internal Revenue Service

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

For calendar year 2011 or other tax year beginning , and ending

OMB No. 1545-0687
2011
Open to Public Inspection for 501(c)(3) Organizations Only

A [ ] Check box if address changed	Name of organization ([ ] Check box if name changed and see instructions.) USA TRIATHLON	D Employer identification number (Employees' trust, see instructions.) 68-0047940
B Exempt under section [X] 501(C)(3) [ ] 408(e) [ ] 220(e) [ ] 408A [ ] 530(a) [ ] 529(a)	Print or Type: Number, street, and room or suite no. If a P.O. box, see instructions. 5825 DELMONICO DRIVE, SUITE 200	E Unrelated business activity codes (See instructions.)
	City or town, state, and ZIP code COLORADO SPRINGS, CO 80919	541800
C Book value of all assets at end of year 8,213,996.	F Group exemption number (See instructions.) ▶ G Check organization type ▶ [X] 501(c) corporation [ ] 501(c) trust [ ] 401(a) trust [ ] Other trust	

H Describe the organization's primary unrelated business activity. ▶ SALE OF MAGAZINE ADVERTISING

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ [ ] Yes [X] No

If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ USA TRIATHLON Telephone number ▶ (719) 597-9090

Part I Unrelated Trade or Business Income

		Line	(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c			
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
c	Capital loss deduction for trusts	4c			
5	Income (loss) from partnerships and S corporations (attach statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from controlled organizations (Sch. F)	8			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11	255,117.	295,452.	-40,335.
12	Other income (See instructions; attach schedule.)	12			
13	**Total.** Combine lines 3 through 12	13	255,117.	295,452.	-40,335.

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

				Line	Amount
14	Compensation of officers, directors, and trustees (Schedule K)			14	
15	Salaries and wages			15	
16	Repairs and maintenance			16	
17	Bad debts			17	
18	Interest (attach schedule)			18	
19	Taxes and licenses			19	
20	Charitable contributions (See instructions for limitation rules.)			20	
21	Depreciation (attach Form 4562)	21			
22	Less depreciation claimed on Schedule A and elsewhere on return	22a		22b	
23	Depletion			23	
24	Contributions to deferred compensation plans			24	
25	Employee benefit programs			25	
26	Excess exempt expenses (Schedule I)			26	
27	Excess readership costs (Schedule J)			27	
28	Other deductions (attach schedule)			28	
29	**Total deductions.** Add lines 14 through 28			29	0.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13			30	-40,335.
31	Net operating loss deduction (limited to the amount on line 30)			31	
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30			32	-40,335.
33	Specific deduction (Generally $1,000, but see instructions for exceptions.)			33	1,000.
34	**Unrelated business taxable income.** Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32			34	-40,335.

Part III Tax Computation

35	**Organizations Taxable as Corporations.** See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here ▶ ☐ **See instructions** and:		
a	Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order): (1) $ (2) $ (3) $		
b	Enter organization's share of: (1) Additional 5% tax (not more than $11,750) $ (2) Additional 3% tax (not more than $100,000) $		
c	Income tax on the amount on line 34 ▶	35c	0.
36	**Trusts Taxable at Trust Rates.** See instructions for tax computation. Income tax on the amount on line 34 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041) ▶	36	
37	**Proxy tax.** See instructions ▶	37	
38	Alternative minimum tax	38	
39	**Total.** Add lines 37 and 38 to line 35c or 36, whichever applies	39	0.

Part IV Tax and Payments

40a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	40a			
b	Other credits (see instructions)	40b			
c	General business credit. Attach Form 3800	40c			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	40d			
e	**Total credits.** Add lines 40a through 40d			40e	
41	Subtract line 40e from line 39			41	0.
42	Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule)			42	
43	**Total tax.** Add lines 41 and 42			43	0.
44a	Payments: A 2010 overpayment credited to 2011	44a			
b	2011 estimated tax payments	44b			
c	Tax deposited with Form 8868	44c			
d	Foreign organizations: Tax paid or withheld at source (see instructions)	44d			
e	Backup withholding (see instructions)	44e			
f	Credit for small employer health insurance premiums (Attach Form 8941)	44f			
g	Other credits and payments: ☐ Form 2439 ☐ Form 4136 ☐ Other Total ▶	44g			
45	**Total payments.** Add lines 44a through 44g			45	
46	Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ ☐			46	
47	**Tax due.** If line 45 is less than the total of lines 43 and 46, enter amount owed ▶			47	0.
48	**Overpayment.** If line 45 is larger than the total of lines 43 and 46, enter amount overpaid ▶			48	0.
49	Enter the amount of line 48 you want: **Credited to 2012 estimated tax** ▶	**Refunded** ▶		49	

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

		Yes	No
1	At any time during the 2011 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ▶		X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ $		

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

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

Sign Here

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

▶ Signature of officer | Date | ▶ CEO Title

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

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self- employed	PTIN
JILL J. GOODWIN				P00450838
Firm's name ▶ WAUGH & GOODWIN, LLP			Firm's EIN ▶	20-1766527
Firm's address ▶ 1365 GARDEN OF THE GODS, SUITE 150 COLORADO SPRINGS, CO 80907			Phone no.	(719) 590-9777

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

1. Description of property
(1)
(2)
(3)
(4)

2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total 0.	Total 0.	
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶	0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶ 0.

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

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property (a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)			
(2)			
(3)			
(4)			

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

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

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

Nonexempt Controlled Organizations

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

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

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

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

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals ▶	Enter here and on page 1, Part I, line 10, col. (A). 0.	Enter here and on page 1, Part I, line 10, col. (B). 0.				Enter here and on page 1, Part II, line 26. 0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

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

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

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) TRIATHLON LIFE	255,117.	295,452.	-40,335.			
(2)						
(3)						
(4)						
(5) Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5) ▶	Enter here and on page 1, Part I, line 11, col. (A). 255,117.	Enter here and on page 1, Part I, line 11, col. (B). 295,452.				Enter here and on page 1, Part II, line 27. 0.

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

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

123731
02-24-12

USOC International Relations
Grants for National Governing Bodies
2013 Program & Application Process

Overview

The USOC IR Grant Program is intended to help NGBs advance our collective international goals and objectives, with particular focus on strengthening our influence within international sport organizations. Grants are determined based on an application process which attempts to identify and prioritize common objectives, namely to engage and strengthen partnerships with International Federations (IFs), to secure meaningful leadership positions within the IFs and to host major IF events, meetings and conferences in the US. The IR Grant Program will be limited to no more than fifteen (15) NGBs which can help us achieve these strategic priorities.

Application Procedure

NGBs must submit proposals to the International Relations Division no later than November 01, 2012. It is anticipated that award allocations will be announced to the NGBs no later than December 15, 2012.

Submitted proposals should be 10 pages or less and should include the following:

1. NGB IR Grant Contact Details – relevant parties' name, phone, and email
2. Description of NGB's primary international objectives – short term and long term
3. Description of the proposed project and how it contributes to the achievement of stated objectives.
4. Project budget (preference will be given to projects that include matching funds from the NGB).
5. Total budget allocated to NGB's international relations efforts – not including national team support, competitions and other expenses in the ordinary course of athlete development.
6. Any other relevant details pertaining to the proposed project.

All grants will be subject to the execution of a written agreement with the USOC.

Questions

All questions regarding the application process should be directed to Dragomir Cioroslan, USOC Director, International Strategies and Development at 719-866-4234 / dragomir.cioroslan@usoc.org; Regina Hartman (719) 866-4691 / regina.hartman@usoc.org; or the Sport Partnerships Director in charge of the respective NGB.

UNITED STATES
OLYMPIC COMMITTEE
1 Olympic Plaza
Colorado Springs, CO
80909

Scott A. Blackmun
CEO • Secretary General

September 12, 2012

NGB Executive Directors / CEOs,

We are pleased to announce the 2013 International Relations Grant Program for NGBs. This program will play an important role in our long-term strategy to be active, constructive and committed partners in the Olympic Movement and is intended to help strengthen our collective influence within international sport organizations for the benefit of our athletes and teams.

The application procedure for the 2013 IR Grant Program is attached. As in the past, this program is being managed by our Director of International Strategies and Development, Dragomir Cioroslan, to whom all proposals should be addressed.

Sincerely,

Scott A. Blackmun