Form	aan
Form	330

Department of the Treasury Internal Revenue Service

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

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

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

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



Image: Colorado Springs, Colorado Springs, Colorado Sprincipal officer: Matthew Suggs H(a) Is this a group return Brane and address of principal officer: Matthew Suggs For an and address of principal officer: Matthew Suggs H(a) Is this a group return I make and address of principal officer: Matthew Suggs For an and address of principal officer: Matthew Suggs H(b) Are all subordinates? Yes No I make and address of principal officer: Matthew Suggs H(b) Are all subordinates? Yes No I make and address of principal officer: Matthew Suggs H(b) Are all subordinates? Yes No I make and address of principal officer: Matthew Suggs H(b) Are all subordinates? Yes No I make and address of principal officer: Matthew Suggs H(b) Are all subordinates? Yes No I make and address of principal officer: Matthew Suggs H(b) Are all subordinates? Yes No I make and address of principal officer: Matthew Suggs H(a) Is this a group return H(b) Are all subordinates? Yes No I make and address of principal officer: Matthew Suggs H(a) Is this a group return H(b) Are all subordinates? Yes No I mother of volume and subardinates induced? I make an address of principal of ore group an ano an addres and addres are acode an addre	application USA Shooting, Inc. 84-1263863 Doing business as Number and street (or P.0, box if mail is not delivered to street address) Room/suite E Telephone number (719)866-4670 City or town, state or province, country, and ZIP or foreign postal code Conservents 4 4,178,476. Application Province, country, and ZIP or foreign postal code Conservents 5 4,178,476. Application Fame as C above H(a) Is this a group return for subordinates? Yes No Application Same as C above H(b) Are al subordinates? Yes No J Website: WWW ·UB as Nooting , org K Form of organization; X Corporation Trust Association Other L year of tormation; 1994 M State of legal domicile; CO Particip describe the organization; mission or most significant activities: Empower American athletes for 01ympic and Paralympic success, grow the community and inspire 2 Check this box I the organization is operaning body (Part V, line 1a) 3 9 4 Number of indipendent voting members of the governing body (Part V, line 1a) 3 9 5 Total number of wolneses (term form Grom 990-T, Part I, line 11 7a 0. 7a 0. 7 a Total number of wolneses stable income from Grom 990-T, Part I, line 11 6, 2257.	AF	or th	e 2020 calendar year, or tax year beginning and	ending				
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9 Program service revenue (Part VIII, line 2g) 699,075.292,070. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 133,871.291,076. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 299,555.160,318. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6,428,758.4,154,250. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 63,688.12,094. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0.0.0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,621,166.1,402,275. 16a Professional fundraising fees (Part IX, column (D), line 25) 1,255,012. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,038,736.2,224,983. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 6,723,590.3,639,352.	9 Program service revenue (Part VIII, line 2g) 699,075. 292,070. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 133,871. 291,076. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 299,555. 160,318. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6,428,758. 4,154,250. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 63,688. 12,094. 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), line 5-10) 1,621,166. 1,402,275. 16a Professional fundraising fees (Part IX, column (A), line 25) 1,255,012. 0. 0. 17 Other expenses (Part IX, column (D), line 25) 1,255,012. 5,038,736. 2,224,983. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5,038,736. 2,224,983. 19 Revenue less expenses. Subtract line 18 from line 12 -294,832. 514,898.	•	8	Contributions and grants (Part VIII, line 1h)		5,296,257.			
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1, 621, 166. 1, 621, 166. 1, 255, 012. 5, 038, 736. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 5, 038, 736. 1, 224, 983. 1, 255, 012. 1, 255, 012. 5, 038, 736. 1, 224, 983. 1, 225, 590. <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and Tre)12Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)$6, 428, 758.$$4, 154, 250.$13Grants and similar amounts paid (Part IX, column (A), lines 1-3)$63, 688.$$12, 094.$14Benefits paid to or for members (Part IX, column (A), line 4)$0.$$0.$15Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)$1, 621, 166.$$1, 402, 275.$16aProfessional fundraising fees (Part IX, column (A), line 11e)$0.$$0.$$0.$17Other expenses (Part IX, column (D), line 25)$1, 255, 012.$$5, 038, 736.$$2, 224, 983.$18Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)$6, 723, 590.$$3, 639, 352.$19Revenue less expenses. Subtract line 18 from line 12$-294, 832.$$514, 898.$</td> <td>nu</td> <td>9</td> <td></td> <td></td> <td>699,075.</td> <td>292,070.</td>	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and Tre)12Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) $6, 428, 758.$ $4, 154, 250.$ 13Grants and similar amounts paid (Part IX, column (A), lines 1-3) $63, 688.$ $12, 094.$ 14Benefits paid to or for members (Part IX, column (A), line 4) $0.$ $0.$ 15Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $1, 621, 166.$ $1, 402, 275.$ 16aProfessional fundraising fees (Part IX, column (A), line 11e) $0.$ $0.$ $0.$ 17Other expenses (Part IX, column (D), line 25) $1, 255, 012.$ $5, 038, 736.$ $2, 224, 983.$ 18Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) $6, 723, 590.$ $3, 639, 352.$ 19Revenue less expenses. Subtract line 18 from line 12 $-294, 832.$ $514, 898.$	nu	9			699,075.	292,070.		
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1, 621, 166. 1, 621, 166. 1, 255, 012. 5, 038, 736. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 1, 255, 012. 5, 038, 736. 1, 224, 983. 1, 255, 012. 1, 255, 012. 5, 038, 736. 1, 224, 983. 1, 225, 590. <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and Tre)12Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)$6, 428, 758.$$4, 154, 250.$13Grants and similar amounts paid (Part IX, column (A), lines 1-3)$63, 688.$$12, 094.$14Benefits paid to or for members (Part IX, column (A), line 4)$0.$$0.$15Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)$1, 621, 166.$$1, 402, 275.$16aProfessional fundraising fees (Part IX, column (A), line 11e)$0.$$0.$$0.$17Other expenses (Part IX, column (D), line 25)$1, 255, 012.$$5, 038, 736.$$2, 224, 983.$18Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)$6, 723, 590.$$3, 639, 352.$19Revenue less expenses. Subtract line 18 from line 12$-294, 832.$$514, 898.$</td> <td>eve</td> <td>10</td> <td>Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td></td> <td>133,871.</td> <td>291,076.</td>	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and Tre)12Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) $6, 428, 758.$ $4, 154, 250.$ 13Grants and similar amounts paid (Part IX, column (A), lines 1-3) $63, 688.$ $12, 094.$ 14Benefits paid to or for members (Part IX, column (A), line 4) $0.$ $0.$ 15Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $1, 621, 166.$ $1, 402, 275.$ 16aProfessional fundraising fees (Part IX, column (A), line 11e) $0.$ $0.$ $0.$ 17Other expenses (Part IX, column (D), line 25) $1, 255, 012.$ $5, 038, 736.$ $2, 224, 983.$ 18Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) $6, 723, 590.$ $3, 639, 352.$ 19Revenue less expenses. Subtract line 18 from line 12 $-294, 832.$ $514, 898.$	eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		133,871.	291,076.		
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14 Benefits paid to or for members (Part IX, column (A), line 4) 0.00. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,621,166.1,402,275. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0.00. b Total fundraising expenses (Part IX, column (D), line 25) 1,255,012. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,038,736.2,224,983. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 6,723,590.3,639,352.	14 Benefits paid to or for members (Part IX, column (A), line 4) 0.00. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,621,166.1,402,275. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0.00. b Total fundraising expenses (Part IX, column (D), line 25) 1,255,012. 17 Other expenses. (Part IX, column (A), lines 11a-11d, 11f-24e) 5,038,736.2,224,983. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 6,723,590.3,639,352. 19 Revenue less expenses. Subtract line 18 from line 12 -294,832.514,898.		12						
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18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	17 Other expenses (Part X, column (A), lines 112-114, 903 t 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 54 Beginning of Current Year End of Year	ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,621,166.	1,402,275.		
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	17 Other expenses (Part X, column (A), lines 112-114, 903 t 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 54 Beginning of Current Year End of Year	nse	16a			0.	0.		
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	17 Other expenses (Part X, column (A), lines 112-114, 903 t 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 54 Beginning of Current Year End of Year	e de x	b	Total fundraising expenses (Part IX, column (D), line 25) 1,255,02	12.				
	19 Revenue less expenses. Subtract line 18 from line 12 -294,832. 514,898. 5 Beginning of Current Year End of Year	Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)					
19 Revenue less expenses. Subtract line 18 from line 12	ठथ Beginning of Current Year End of Year		18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)					
	Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 3,383,113. 4,471,329. 21 Total liabilities (Part X, line 26) 490,376. 958,418. 22 Net assets or fund balances. Subtract line 21 from line 20 2,892,737. 3,512,911.			Revenue less expenses. Subtract line 18 from line 12		-294,832.	514,898.		
Beginning of Current Year End of Year	Image: Section of the sector of the secto	s or			Be				
6 목 20 Total assets (Part X, line 16)	21 Total liabilities (Part X, line 26) 490,376. 958,418. 22 Net assets or fund balances. Subtract line 21 from line 20 2,892,737. 3,512,911.	sset	20	· · · · · · · · · · · · · · · · · · ·					
Ži Total liabilities (Part X, line 26) 958, 418.	₹ ∃ 22 Net assets or fund balances. Subtract line 21 from line 20	at As	21						
= $=$ 00 Net constant on fund helences. Culture time 01 from time 00 $=$ $=$ $2892737 =$ 3512011	Part II Signature Block	ž1	22			2,892,737.	3,512,911.		

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	Signature of officer		Date			
Here	Matthew Suggs, CEO					
	Type or print name and title					
	Print/Type preparer's name	Preparer's signature	Date Check	PTIN		
Paid	Bret Wichert, CPA	Bret Wichert, CPA		200294662		
Preparer	Firm's name 🕨 BiggsKofford, P.	С.	Firm's EIN ▶ 84 -	-0884124		
Use Only	Firm's address 🖕 630 Southpointe	Court, Suite 200				
	Colorado Springs	, CO 80906	Phone no. 719.5	579.9090		
May the IF	May the IRS discuss this return with the preparer shown above? See instructions					
032001 12-2	D32001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2020)					

See Schedule O for Organization Mission Statement Continuation

Form	990 (2020) USA Shooting, Inc. 84-1263863 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Empower American athletes for Olympic and Paralympic success, grow the
	community and inspire passion for the shooting sports.
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?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1,240,722. including grants of \$12,094.) (Revenue \$)
	Elite Athlete Programs - training athletes for competition, sending
	athletes to world cups, world championships, national championships,
	and selection matches.
4b	(Code:) (Expenses \$285,031. including grants of \$) (Revenue \$163,891.)
	Competitions - Running competitions - national championships, junior
	Olympic championships, selection matches, sanctioning state JO and PTO
	matches.
4c	(Code:) (Expenses \$83,833. including grants of \$) (Revenue \$)
	Shooter Development - developing programs to facilitate a pipeline of
	future Olympic athletes.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 67,064. including grants of \$) (Revenue \$ 128,179.)
4e	Total program service expenses ► 1,676,650.

 Form 990 (2020)
 USA Shooting, Inc.

 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	Х	
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		<u> </u>
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 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 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 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		<u>x</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			- v
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
~	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а		11a	Х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total		- 23	
D		11b	х	
c	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			<u> </u>
U	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			<u> </u>
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f				
	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 and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		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 other assistance to or for any			<u>-</u> -
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X 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? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			- v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X

Form 990 (2020)

Form	990	(2020)
	000	

Form 990 (2020) USA Shooting, Inc. Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? 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 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	00-		x
20	"Yes," complete Schedule L, Part IV	28c 29	Х	
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29	- 23	
30		30		x
31	contributions? If "Yes," complete Schedule M	31		X
32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	- 51		
52		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	52		
00	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, Part II, III, or IV, and			
	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 25	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

rga mpiy ng reportat e pay эp ١ŀ (gambling) winnings to prize winners?

Х 1c

Form	990 (2020) USA Shooting, Inc. 84-1263 tV Statements Regarding Other IRS Filings and Tax Compliance (continued)	863	P	age 5
			Yes	No
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 22		103	
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 <i>e-file</i> (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		37	
b	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	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 as charitable contributions?	<u>6a</u>		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).			
а	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
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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. Did a donor advised fund maintained by the	8		
0	sponsoring organization have excess business holdings at any time during the year?	•		
9	Sponsoring organizations maintaining donor advised funds.	9a		
a h	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
ь 10	Section 501(c)(7) organizations. Enter:	30		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	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			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
D	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	124		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			
с	Enter the amount of reserves on hand			
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 on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			

Form 990 (2020)
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Form 990	(2020)
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USA Shooting, Inc.

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

Check if Schedule O contains a re	sponse or note to an	v line in this Part VI	
	sponde of note to un	y 1110 111 110 1 111 110 1	

V	

Sec	tion 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		9			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with a	any other				
	officer, director, trustee, or key employee?				2		Х
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	supervision				
	of officers, directors, trustees, or key employees to a management company or other person?			. L	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was	s filed?	. L	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?		. L	5		X
6	Did the organization have members or stockholders?			L	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	opoint o	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, si	tockhol	ders, 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	ar by the	following:				
а	The governing body?			F	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 rea						
0	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)				
				Г		Yes	No
	Did the organization have local chapters, branches, or affiliates?			H	10a		<u> </u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch				101		
	· · · · · · · · ·		a filing the form?	· ⊢	10b	x	
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befor	e filing the form?		11a	~	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				10-	x	
12a					12a 12b	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			· ⊢	120		
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i>	,		.	12c	x	
13	in Schedule O how this was done Did the organization have a written whistleblower policy?			F	13	X	
14	Did the organization have a written document retention and destruction policy?			F	14	X	
15	Did the process for determining compensation of the following persons include a review and approva						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official			- F	15a	x	
	Other officers or key employees of the organization				15b	х	
	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 arranger	nent wi	ith a				
	taxable entity during the year?			ŀ	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nization	's				
_	exempt status with respect to such arrangements?			.	16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, C						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990	T (Section 501(c)	3)s c	only) a	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website Another's website X Upon request Other <i>(explain</i>						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	onflict o	f interest policy, a	nd fi	inanc	ial	
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's boo The Organization $-(719)866-4670$	oks and	records				
	The Organization - (719)866-4670						

One Olympic Plaza, Colorado Springs, CO 80909

Form 990 (2020) USA Shooting, Inc.	84-1263863	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highes	t Compensated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Comple	ete this table for all persons required to be listed. Report compensation for the calendar year en	ding with or within the organization'ទ	s tax year.
 List a 	all of the organization's current officers, directors, trustees (whether individuals or organizations	s), regardless of amount of compension	ation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do		Pos) than d	ane	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar		Irecto	r/trus	tee)	from	from related	other
	(list any hours for	Individual trustee or director						the	organizations (W-2/1099-MISC)	compensation from the
	related	e or d	tee			sated		organization (W-2/1099-MISC)	(00-2/1099-00150)	organization
	organizations	truste	al trus		yee	mper				and related
	below	idual	Institutional trustee	er	key employee	est co oyee	er			organizations
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Former			-
(1) Matt Suggs	40.00									
CEO				Х				83,333.	0.	0.
(2) Robert Gambardella	40.00									
Interim CEO				Х				73,970.	0.	9,181.
(3) Chad Whittenburg	8.00									
Chairman		Х		Х				0.	0.	0.
(4) Rick Marsh	6.00									
Vice Chairman		Х		Х				0.	0.	0.
(5) Richard Hawkins	1.00									
Coaches Representative		Х						0.	0.	0.
(6) Susan Abbott	2.00									
ISSF Representative		Х						0.	0.	0.
(7) Ana English	6.00									
Treasurer		Х		Х				0.	0.	0.
(8) David Meltzer	3.00									
Director		Х						0.	0.	0.
(9) Keith Sanderson	4.00									
USOPC Athletes Advisory Co		Х						0.	0.	0.
(10) James Henderson	2.00									
USAS Athletes Advisory Cou		Х						0.	0.	0.
(11) Penny Miller	40.00									_
Former CFO				X				0.	0.	0.
		1								
					<u> </u>	<u> </u>				
										000

	990 (2020) USA Shoot	ing, In	c.							84-12	2638	363	Pa	age 8
Par	t VII Section A. Officers, Directors, Trust		ploy	ees,			ghes	t C		, ,				
	(A) Name and title	(B) Average hours per week	box	not c , unles	ss per	ition more rson i	than o s both r/trus	an	(D) Reportable compensation from	(E) Reportable compensation from related		on amount o		
		(list any hours for to a to		the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	I	fr orga and	pensat om the anizati d relate nizatio	e on ed					
	Subtotal Total from continuation sheets to Part VII								157,303.		0.		9,18	0.
	Total (add lines 1b and 1c)								157,303.		0.		9,18	31.
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	9			0
3	Did the organization list any former officer,	director trust	oo k	ev e	mol	ove	e or	hio	ihest compensated empl	ovee on	ſ		Yes	No
Ū	line 1a? If "Yes," complete Schedule J for su	-		•	•	-		Ŭ	• • •	•		3		Х
4	For any individual listed on line 1a, is the su and related organizations greater than \$150									-		4		Х
5	Did any person listed on line 1a receive or a	ccrue compen	Isati	, on fr	om	any	unre	elate	ed organization or individ	lual for services				
Sec	rendered to the organization? If "Yes." comp tion B. Independent Contractors	plete Schedule	e J fo	or su	ıch r	bers	on .					5		X
1	Complete this table for your five highest cor the organization. Report compensation for t										pensat	ion fro	m	
	(A) Name and business			DNE	0				(B) Description of s		С	(C omper	;) nsatior	ı
2	Total number of independent contractors (in \$100,000 of compensation from the organiz	•	ot lin	nitec	to	thos (ted	above) who received mo	ore than				

Part	• • • •		VCIII						84-1263	863 Pa
		Chack it Schadula () c								
			conta	ins a respo	nse	or note to any lir	ne in this Part VIII (A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenue excl
							Total Tevende	function revenue	business revenue	from tax un
										sections 512
s.	1 a	Federated campaigns		1a						
Int							-			
10							-			
An		Fundraising events				000 584	-			
ar	d	Related organizations		1d		982,574.				
Ē	е	Government grants (contri	butic	ns) 1e		10,000.				
ŝ	f	All other contributions, gifts,	grants	s, and						
and Other Similar Amounts		similar amounts not included	-		2.	418,212.				
ö		Noncash contributions included in I				237,371.	-			
p	•						2 410 706			
a	h	Total. Add lines 1a-1f					3,410,786.			
						Business Code				
1	2 a	Competition F	ees	5		711300	163,891.	163,891.		l .
	b	Membership				711300	128,179.	128,179.		
ne										
/eu	C									
3e	d									
Revenue	е									ļ
	f	All other program service r	reven	ue						<u> </u>
	q	Total. Add lines 2a-2f				•	292,070.			
		Investment income (includ					· ·			
1	0	•	•			•	25,666.			25,60
		other similar amounts)					25,000.			25,00
1	4	Income from investment o		•	•					
	5	Royalties				<u></u>				ļ
				(i) Real		(ii) Personal				
	6 a	Gross rents	6a							
		Less: rental expenses	6b				-			
							-			
		Rental income or (loss)	6c							
	d	Net rental income or (loss)		<u></u>		<u> </u>				
7	7 a	Gross amount from sales of		(i) Securit	ies	(ii) Other				
		assets other than inventory	7a 4	265,41	Ο.					
	b	Less: cost or other basis								
D		and sales expenses	7b		0.					
			- '	065 /1	<u>~</u>		-			
	С	Gain or (loss)	/C	20J,4I	0.					
	d	Net gain or (loss)				<u></u>	265,410.			265,42
	8 a	Gross income from fundraisin	ng eve	nts (not						
3		including \$		of						
		contributions reported on								
				,	0-					
	-	Part IV, line 18			<u>8a</u>					
		Less: direct expenses			8b					
	С	Net income or (loss) from t	fundr	aising even	ts	<u></u>				
	9 a	Gross income from gaming	g act	ivities. See						
		Part IV, line 19	-		9a					
	h	Less: direct expenses			9b					
										
		Net income or (loss) from g			· <u>···</u>	····· 🟲				
10	0 a	Gross sales of inventory, le			1					
		and allowances				67,305.				
	b	Less: cost of goods sold			10b	24,226.				
		Net income or (loss) from s					43,079.	43,079.		
+	v		50103	or inventor	1	Business Code				
1		Miggollasses					117 000	117 000		
	1 a	<u>Miscellaneous</u>				711300	117,239.	117,239.		l
<mark>و</mark> 1 [.]										
1 ¹	b									(
evenue 1	b c									1
Revenue	с									
Levenue L	c d						117,239.			

-orm	1 990 (2020) USA Shooting rt IX Statement of Functional Expense	, Inc.		84-12	263863 Page
	ion 501(c)(3) and 501(c)(4) organizations must compl		r organizations must corr	nplete column (A).	
	Check if Schedule O contains a respons			<u> </u>	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	12,094.	12,094.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	157,302.	94,926.	53,209.	9,16
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,003,619.	605,642.	339,488.	58,48
8	Pension plan accruals and contributions (include		·		
	section 401(k) and 403(b) employer contributions)	19,361.	11,684.	6,549.	1,12
9	Other employee benefits	148,318.	89,504.	50,170.	1,12 8,64 4,29
10	Payroll taxes	73,675.	44,460.	24,921.	4,29
11	Fees for services (nonemployees):	-			
а	Management				
	Legal	23,820.	7,940.	7,940.	7,94
	Accounting	75,144.	25,048.	25,048.	25,04
	Lobbying	-			
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
a	Other. (If line 11g amount exceeds 10% of line 25,				
3	column (A) amount, list line 11g expenses on Sch O.)	137,228.	70,183.	13,635.	53,41
12	Advertising and promotion	21,761.	5,280.	6,510.	<u>53,41</u> 9,97
13	Office expenses			.,	- /
.e 14	Information technology				
15	Royalties				
16	Occupancy	24,060.	12,616.	11,444.	
17	Travel	440,400.	296,697.	141,834.	1,86
18	Payments of travel or entertainment expenses	·	·		•
-	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	2,217.		2,217.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	80,067.	80,067.		
23	Insurance	50,354.	30,000.	19,354.	1,00
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Printing, Postage, and	1,053,806.	4,845.	9,079.	1,039,88
b	2	55,160.	54,978.	182.	
с	Dues and Subscriptions	53,767.	32,145.		21,62
d	Stipends	47,450.	43,550.	3,900.	
е	All other expenses	159,749.	154,991.	-7,790.	12,54
OE	Total functional evenence. Add lines 1 through 0.4s	3 630 352	1 676 650	707 690	1 255 01

3,639,352.

e All other expenses 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

1,255,012.

707,690.

1,676,650.

USA	Shooting,	Inc.
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		Check if Schedule O contains a response or no	te to any	line in this Part X			
			to to uny		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			139,414.	1	903,000.
	2	Savings and temporary cash investments			263,279.	2	133,427.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the	se perso	ins		5	
	6	Loans and other receivables from other disqual	ified pers	sons (as defined			
		under section 4958(f)(1)), and persons describe	d in sect	ion 4958(c)(3)(B)		6	
ŝ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			122,414.	8	135,981.
As	9	B			32,683.	9	28,069.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,856,366.			
	b	Less: accumulated depreciation	10b	1,604,280.	332,153.	10c	252,086.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line	2,493,170.	12	3,018,766.		
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ			3,383,113.	16	4,471,329.
	17	Accounts payable and accrued expenses			330,878.	17	159,595.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ŝ	22	Loans and other payables to any current or form	ner office	er, director,			
Liabilities		trustee, key employee, creator or founder, subs	tantial co	ontributor, or 35%			
abil		controlled entity or family member of any of the	se perso	ins		22	
	23	Secured mortgages and notes payable to unrel	ated thire	d parties	0.	23	152,117.
	24	Unsecured notes and loans payable to unrelate	d third p	arties	0.	24	271,000.
	25	Other liabilities (including federal income tax, page	ayables t	o related third			
		parties, and other liabilities not included on line	s 17-24).	Complete Part X			
		of Schedule D			159,498.	25	375,706.
	26	Total liabilities. Add lines 17 through 25			490,376.	26	958,418.
		Organizations that follow FASB ASC 958, ch	eck here				
ces		and complete lines 27, 28, 32, and 33.					
aŭ	27	Net assets without donor restrictions			2,682,762.	27	3,202,936. 309,975.
Ba	28	Net assets with donor restrictions			209,975.	28	309,975.
pur		Organizations that do not follow FASB ASC 9	958, che	ck here 🕨 🗌			
ц		and complete lines 29 through 33.					
S	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or e				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in				31	
Nei	32	Total net assets or fund balances		L	2,892,737.	32	3,512,911.
	33	Total liabilities and net assets/fund balances			3,383,113.	33	<u>4,471,329.</u>

4,471,329. Form 990 (2020)

Form 990 (
Part X	Balance Sheet

Form	USA Shooting, Inc.	84-12	63863	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,154		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,639),3!	52.
3	Revenue less expenses. Subtract line 2 from line 1	3	514	1,8	98.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,892		
5	Net unrealized gains (losses) on investments	5	105	5,2	76.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	3,512	2,93	11.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				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	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	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 on Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle 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	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2020)

SCHED	ULE	Α
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Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2020
Open to Public Inspection

Nam	e of t	the organization						Employer	identification number
		USA	Shooting, 1	Inc.				8	4-1263863
Pa	rt I	Reason for Public (Charity Status.	(All organizations must o	complete th	nis part.) S	ee instruction	S.	
The	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, c	heck 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 sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	n 990 or 99	90-EZ).)			
3		A hospital or a cooperative	hospital service orga	anization described in s	ection 170	(b)(1)(A)(ii	ii).		
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	llege or university owned	d or operat	ed by a go	overnmental u	nit describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organization that norma	lly receives a substa	ntial part of its support f	rom a gove	ernmental	unit or from th	ne general p	oublic described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or
		university:							
10	X	An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	port from c	ontributior	ns, membersh	ip fees, and	d gross receipts from
		activities related to its exem	npt functions, subjec	t to certain exceptions;	and (2) no	more than	33 1/3% of it	s support fi	rom gross investment
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	om busines	ses acqui	red by the org	anization a	Ifter June 30, 1975.
		See section 509(a)(2). (Con	mplete Part III.)						
11		An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).		
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	or section	509(a)(2).	See section	509(a)(3). 🤇	Check the box in
		lines 12a through 12d that	• •					-	
а		Type I. A supporting orga		-	•	-			
		the supported organization			i majority c	of the direc	tors or truste	es of the su	ipporting
		organization. You must o	-						
b		Type II. A supporting org	-				-		•
		control or management o			ame perso	ns that co	ntrol or mana	ge the supp	ported
_		organization(s). You mus							al
С		J Type III functionally inte						ly integrate	a with,
d		its supported organization	.,.,	•				tod organi-	ration(a)
d	L	_ Type III non-functionally that is not functionally int						-	
		requirement (see instructi			-			anallenin	101055
е		Check this box if the orga	,	•				II Type III	
C	L	functionally integrated, or					турст, турс	n, rype n	
f	Ente	er the number of supported of			0 0				
		vide the following information	•						
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount or	monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)
<u>Tota</u>	I								

Schedule A (Form 990 or 990-EZ) 2020 USA Shooting, Inc.

8	4 –	1	2	6	3	8	6	3	Page 2
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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.)

Sec	ction A. Public Support	-	-		_		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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						
5	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,						
	· · · · ·						
~							
_	Public support. Subtract line 5 from line 4.						
		() 0040	(1) 0017	() 0040	(1) 0010	() 0000	(0 T))
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
-	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fi				501(c)(3)	
	organization, check this box and stor				-		
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2020 (I	ine 6, column (f), d	livided by line 11,	column (f))		14	%
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2020. If the c	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organizatior	۱			
b	33 1/3% support test - 2019. If the o	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly s	supported organiz	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	-					
	meets the facts-and-circumstances te			-			
b	10% -facts-and-circumstances test	•	• •		•		
~	more, and if the organization meets th	-				-	
	organization meets the facts-and-circu						
18	Private foundation. If the organization		-				
		an and not oncon a		a, 100, 17a, 01 17	S, SHOOK (113 DOA 8		······· 🚩 🗖

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 USA Shooting, Inc. Part III Support Schedule for Organizations Described in Section 509(a)(2)

84-1263863 Page 3

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")	4610984.	3227936.	4948525.	5493129.	4236543.	22517117.
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	900,238.	873,744.	2060280.	783,784.	231,196.	4849242.
3 Gross receipts from activities that	500,2001	0,0,,110		,,		10192120
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization'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	5511222.	4101680.	7008805.	6276913.	4467739.	27366359.
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.)						27366359.
Section B. Total Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6	5511222.	4101680.	7008805.	6276913.	4467739.	27366359.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	41 335.	154,128.	66,386.	133 871.	291,076.	686,796.
b Unrelated business taxable income	41,333.	104,120.		100,0710	251,070.	
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b	41,335.	154,128.	66,386.	133,871.	291,076.	686,796.
 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		69,023.	112,737.			
13 Total support. (Add lines 9, 10c, 11, and 12.)	5552557.	4324831.	7187928.	6548812.		28490180.
14 First 5 years. If the Form 990 is for th	e organization's fir	rst, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3) organizatic	on,
	o Cupport Dor					>
Section C. Computation of Publi						06.06.00
15 Public support percentage for 2020 (li		•			15	<u>96.06</u> % 97.67%
16 Public support percentage from 2019 Section D. Computation of Inves					16	97.67 %
•			20.12. oolump (f))		47	2.41 %
17 Investment income percentage for 20		- · · · · · · · · · · · ·			17	1 00
18 Investment income percentage from 219a 33 1/3% support tests - 2020. If the			n line 14 and line		18	
more than 33 1/3%, check this box ar						
b 33 1/3% support tests - 2019. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%, a	nd
line 18 is not more than 33 1/3%, che 20 Private foundation. If the organizatio						

Schedule A (Form 990 or 990-EZ) 2020

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Ра	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
ec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			-
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	experimention (a) are fine on the accompany of a supported experimention (a) (a) (b) (b) (b) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c			

_	- ····· ···· ·························		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization(s).	L	2
;	By reason of the relationship described in line 2, above, did the organization's supported organizations have a		
	significant voice in the organization's investment policies and in directing the use of the organization's	- 1	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		

supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	(see instructions).
---	---	---------------------

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

с		The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instruction	n <u>s).</u>	
2	Activ	ties Test. Answer lines 2a and 2b below.		Yes	

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

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.

3

2a

2b

3a

3b

No

Schedule A (Form 990 or 990-EZ) 2020	USA	Shooting	Tnc
Schedule A (Form 990 or 990-EZ) 2020	DODA	shouting,	THC

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

 1
 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.

All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Chock here if the current year is the organization's first as a non-functional	lly integrator		nization (soo

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

Schedule A (Form 990 or 990-EZ) 2020

			d = 500(a)(3) Supporting (\
Schedule A	(Form 990 or 990-E7)	₂₀₂₀ USA Shoot	ting, Inc.	

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continue	ed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	6	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which th	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020		(iii) Distributable Amount for 2020
_1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
C	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2016				
b	Excess from 2017				
C	Excess from 2018				
d	Excess from 2019				
е	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-	EZ) 2020 US	SA Shooting	g, Inc.

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

Schedule B

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

Name of the organization

Organization type (check one):

** PUBLIC DISCLOSURE COPY *

Schedule of Contributors

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

OMB No. 1545-0047

2020

Employer identification number

707	Chaoting	Tna	
JSA	Shooting,	inc.	

Filers of:	Section:
Form 990 or 990-EZ	$\fbox{3}$ 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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under
sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from
any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h;
or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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

 $\label{eq:LHA} \ \ \mbox{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Employer identification number

USA Shooting, Inc.

. .

84-1263863

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		\$ <u>55,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>4</u>		\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u> </u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

USA Shooting, Inc.

84-1263863

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		\$ <u> </u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8_		\$ <u>100,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ <u> </u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ <u>21,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

USA Shooting, Inc.

84-1263863

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		\$ <u>55,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$ <u> </u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$23,374.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16		\$ <u>125,000.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

(d)

USA Shooting, Inc.

84-1263863

(c)

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.
(a)	(b)	(c)
No.	Name, address, and ZIP + 4	Total contr
19_		

No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
19		\$ <u>1,054,757.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b)	(c) Total contributions	(d) Turne of contribution
	Name, address, and ZIP + 4	\$	Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

84-1263863

USA Shooting, Inc.

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

Farti	Noncash Froperty (see instructions). Use duplicate copies of Part	ii ii additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
16	Ammunition	_	
		\$\$	
(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
		_	
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of or	rganization		Employer identification number				
USA SI	hooting, Inc.		84-1263863				
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a) through (e) and the following line entities in the second se	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year try. For organizations				
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or	less for the year. (Enter this info. once.) \$				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
			[
		(e) Transfer of gif	t				
	Transferee's name, address, a	nd ZI D + 4	Polationship of transforor to transforoe				
-			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 gif	t				
	Transferee's name, address, a	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
		[
		[
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I		(-, 3					
-		(a) Transfer of sif	•				
		(e) Transfer of gif	t .				
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
-		e) Transfer of gif	t				
		(, , , , , , , , , , , , , , , , , , ,					
ŀ	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				

00		Supplement	L Einanaial Stataman	to		OMB No. 1545-0047
	HEDULE D n 990)		al Financial Statemer anization answered "Yes" on Form 9			2020
(For	11 990)	Part IV, line 6, 7, 8, 9, 10	, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or	90, 12b.		Ζυζυ
	ment of the Treasury I Revenue Service		Attach to Form 990. 90 for instructions and the latest info	rmation		Open to Public Inspection
_	e of the organizati				Employer	r identification number
	-	USA Shooting, Inc.			8	4-1263863
Par	tl Organiza	ations Maintaining Donor Advise	d Funds or Other Similar Fund	ds or Ac	counts.	Complete if the
	organizatio	n answered "Yes" on Form 990, Part IV, lin	e 6.			
			(a) Donor advised funds	(b) Funds an	d other accounts
1	Total number at er	nd of year				
2		f contributions to (during year)				
3		f grants from (during year)				
4		t end of year				
5	-	on inform all donors and donor advisors in v	-			
		on's property, subject to the organization's				Yes No
6	•	on inform all grantees, donors, and donor a	0 0			
		ooses and not for the benefit of the donor o			•	
Par		ate benefit?				Yes No
		ation Easements. Complete if the org		0, Part IV,	line 7.	
1		servation easements held by the organization		f . h:		stant land and a
		n of land for public use (for example, recrea	,		•	rtant land area
		f natural habitat	Preservation	i oi a certii	ied historic	structure
0		of open space	ind concentration contribution in the fa	m of a com	o an estion o	accoment on the last
2		through 2d if the organization held a qualif	led conservation contribution in the fol	m of a cor		
-	day of the tax year					at the End of the Tax Year
a		onservation easements			2a	
b	° °				2b	
C		vation easements on a certified historic stru			2c	
a		vation easements included in (c) acquired a			0.4	
2		nal Register			2d	a tha tay
3		vation easements modified, transferred, rel	eased, extinguished, or terminated by	ine organiz	ation during	y the tax
4	year ►	 where property subject to conservation eas	sement is located			
- 5		tion have a written policy regarding the per	·			
5	-	orcement of the conservation easements it				Yes No
6		r hours devoted to monitoring, inspecting,				
Ŭ			handling of violations, and officiong of	Shoorvation	reasementa	o during the year
7	Amount of expens	 es incurred in monitoring, inspecting, hanc	lling of violations and enforcing conse	vation eas	ements dur	ing the year
•	► \$			ration dat		ing the year
8		vation easement reported on line 2(d) abov	e satisfy the requirements of section 1	70(h)(4)(B)(i)	
-)(4)(B)(ii)?			•	Yes No
9		be how the organization reports conservation				
		d include, if applicable, the text of the footr	•			the
	organization's acc	ounting for conservation easements.	-			
Par	rt III Organiza	ations Maintaining Collections of	Art, Historical Treasures, or	Other Si	milar As	sets.
	Complete i	f the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statemer	nt and bala	nce sheet w	vorks
	of art, historical tre	easures, or other similar assets held for put	lic exhibition, education, or research in	n furtheran	ce of public	
	service, provide in	Part XIII the text of the footnote to its finar	ncial statements that describes these it	ems.		
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its revenue statement ar	id balance	sheet work	s of
	art, historical treas	sures, or other similar assets held for public	exhibition, education, or research in fu	urtherance	of public se	ervice,
	provide the followi	ing amounts relating to these items:				
	(i) Revenue inclu	ded on Form 990, Part VIII, line 1			▶ \$	
					▶ \$	
2	If the organization	received or held works of art, historical treat	asures, or other similar assets for finan	cial gain, p	orovide	
	the following amou	unts required to be reported under FASB A	SC 958 relating to these items:			
а	Revenue included	on Form 990, Part VIII, line 1			▶ \$	
		Form 990, Part X			▶ \$	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 032051 12-01-20

Sche	dule D (Form 990) 2020 USA Sho	oting, Inc	•						63863	
Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	rical Tre	asures, o	r Other	[.] Simila	r Assets	(continu	ued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check a	any of the f	ollowing tha	t make si	gnificant ι	use of its		
	collection items (check all that apply):									
а	Public exhibition	c	a 🛄 ro	oan or excl	hange progra	am				
b	Scholarly research	e	e 🗌 o	ther						
с	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how the	y further th	e organizatio	on's exen	npt purpos	se in Part	XIII.	
5	During the year, did the organization solicit of	r receive donations	of art, hist	orical treas	ures, or othe	er similar	assets		-	
	to be sold to raise funds rather than to be ma								Yes	No
Par	t IV Escrow and Custodial Arran		ete if the c	organizatio	n answered	"Yes" on	Form 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custodi		•						٦	
	on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing tak	ole:						
									Amount	
	Beginning balance									
	Additions during the year									
e	Distributions during the year									
t Or	Ending balance						1f			
	Did the organization include an amount on F						ty?	∟	Yes	
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete						<u></u> 0			
		(a) Current year		or year	(c) Two yea			ware hack	(a) Four	years back
1a	Beginning of year balance	(a) Current year		Ui yeai	(C) 1W0 yea	IS DACK	(u) mee y	Cars Dack		/cais Dack
h	Contributions									
с С	Net investment earnings, gains, and losses									
с А	Grants or scholarships									
ŭ	Other expenditures for facilities									
C										
f	Administrative expenses									
, a	End of year balance									
2	Provide the estimated percentage of the curr	rent vear end balanc	e (line 1a	column (a)) held as:					
a	Board designated or quasi-endowment		%		,					
b	Permanent endowment	%								
c		%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3a	Are there endowment funds not in the posse		ation that a	are held an	d administe	red for th	e organiza	ation		
	by:								[`	Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza								3b	
4	Describe in Part XIII the intended uses of the		wment fur	nds.						
Par	t VI Land, Buildings, and Equipm	ient.								
	Complete if the organization answere	d "Yes" on Form 990	0, Part IV,	line 11a. S	ee Form 990), Part X,	line 10.			
	Description of property	(a) Cost or o basis (investi		(b) Cost basis (ccumulate preciation	ed	(d) Book	value
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment			47	2,560.		129,30		43	,254.
	Other			1,38	3,806.	1,1	L74,9'	74.		,832.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X. column	(<u>B). line 1(</u>)c.)				252	,086.

Schedule D (Form 990) 2020

Part VII Inv	estments - O	ther Se	curities.	
Schedule D (Forn	n 990) 2020	USA	Shooting,	Inc

Complete if the organization answered "Yes"	, ,	· · ·	
(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) USOE Investment Portfolio	3,018,766.	End-of-Year Market	Value
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	3,018,766.		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	5,010,700.		
Complete if the organization answered "Yes" of			· · · · · · · · · · · · · · · · · · ·
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990. Part IV. line 1	1d. See Form 990. Part X. line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	<u>. 15.)</u>		
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) Due to the USOPC			375,706.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25)		375,706.
<u></u>	<u> </u>	······	

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2020 USA Shooting, Inc.			84-	1263863 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per Re	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ι.			
1	Total revenue, gains, and other support per audited financial statements			1	4,961,832.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	105,276.		
b	Donated services and use of facilities	. 2b	702,306.		
с	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	807,582.
3	Subtract line 2e from line 1			3	4,154,250.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	. 4b			
с	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	4,154,250.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem		Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ι.			
1	Total expenses and losses per audited financial statements			1	4,341,658.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a	702,306.		
b	Prior year adjustments	. 2b			
С	Other losses	. 2c			
d	Other (Describe in Part XIII.)	. 2d			
е	Add lines 2a through 2d			2e	702,306.
3	Subtract line 2e from line 1			3	3,639,352.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_	
b	Other (Describe in Part XIII.)	. 4b			
с	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	3,639,352.
Pa	t XIII Supplemental Information.				

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

Part X, Line 2:

The	Organization	qualifies	as	a	tax-exempt	organization	under	section
		1		_				

501(c)(3)f the Internal Revenue Code and, accordingly, is not subject to

tax.

The Organization's Forms 990, Return of Organization Exempt From Income

Tax, are subject to examination by various taxing authorities, generally

for three years after the date they were filed. Management of the

organization believes that it does not have any uncertain tax positions

that are material to the financial statements.

Part XIII Supplemental Information (continued)	

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Part

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

2020 **Open to Public** Inspection

Name	of the	organizatio
Name		organizati

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

Employer identification number
84-1263863

USA Shooting	, Inc.	
Types of Property		
	(a)	(

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of d noncash contrib	eterminir		3
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 \dots							
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 (<u>Ammunition</u>)	X	0		3.Fair Market			
26	Other (<u>Equipment Cas</u>)	X	0).fair Market			
27	Other (Protective He)	X	0	15,000	.Fair Market	: Val	ue	
28	Other ()							
29	Number of Forms 8283 received by the organiz	zation during	the tax year for co	ontributions				
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29			—	
							Yes	No
30a	During the year, did the organization receive by							
	must hold for at least three years from the date							37
	exempt purposes for the entire holding period?	?				30a	$ \rightarrow $	<u>X</u>

b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **b** If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2020

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 Schedule M (Form 990) 2020
 USA Shooting, Inc.
 84–1263863
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 Part II
 Supplemental Information. 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 O (Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.



USA Shooting, Inc.

Form 990, Part I, Line 1, Description of Organization Mission:

passion for the shooting sports.

Form 990, Part III, Line 4d, Other Program Services:

Membership - Provided USA Shooting News, to approximately 5,000

members. Provided the members an opportunity to compete in USA Shooting

sanctioned matches and achieve national ranking scores.

Expenses \$ 67,064. including grants of \$ 0. Revenue \$ 128,179.

Form 990, Part VI, Section A, line 4:

USA Shooting updated its bylaws in 2020 to satisfy the requirements of the

Empowering Olympic, Paralympic, and Amateur Athletes Act of 2020. This

included changes to the composition of the board of directors increasing

athlete representation.

Form 990, Part VI, Section A, line 7a:

Coach representative elected by coaches and athlete representatives elected by athletes.

Form 990, Part VI, Section B, line 11b:

Form 990 was provided by e-mail to the organization's governing body before

it was filed.

Form 990, Part VI, Section B, Line 12c:

Annual certification required by board of directors and staff, reviewed by

secretary.

Form 990, Part VI, Section B, Line 15:

Compensation of senior staff wil typically be made annually during the yearly performace review conducted in the December time frame. Increases or bonuses (other than contractual requirements) in excess of 8% will be reviewed and approved by the executive committee. Merit increases and bonuses will be based upon achievement of stated objectives, organizational goals and overall financial success of supervised areas as well as that of the organization. Additional stated criteria may be used in determining compensation adjustments as determined by the executive director. Changes to compensation of the executive director - chief executive officer will be made as determined appropriate by a compensation committee composed of the president, treasurer and other selected members as determined by the organization's mission, goals and success either wholly or for substantial advances in identified areas.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990: AL,AK,AR,CA,CT,FL,GA,IL,KS,KY,ME,MD,MA,MI,MN,NE,NH,NJ,NM,NY,NC,ND,OH,OK,OR PA,RI,SC,SD,TN,UT,VA,WA,WV,WI

Form 990, Part VI, Section C, Line 19:

The Organization's governing documents, conflict of interest policy, and

financial statements are made available to the public through the

organziation's website or upon request.

SCH	IED	U	LE	R
	-	_		

(Form 990)

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Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Open to Public Inspection Employer identification number

OMB No. 1545-0047

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84-1263863

Name of the organization

Department of the Treasury Internal Revenue Service

USA Shooting, Inc.

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

(a) Name, address, and EIN (if applicable) 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

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on 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		(f) Direct controlling entity	cont	g) 512(b)(13) rolled :ity?
		Legal domicile (state or foreign country) Exempt Code section Public charity status (if section 501(c)(3)) Direct controlling entity				Yes	No
United States Olympic & Paralympic Committee							
- 13-1548339, 1 Olympic Plaza, Colorado							
Springs, CO 80909	Supporting Olympic Sports	District of Columbia	501(c)(3)	Line 10			х
	-						
	-						

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

Schedule R (Form 990) 2020

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate itions?	Code V-UBI amount in box 20 of Schedule	Genera manag partne	or Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	ю
											+
	-										
	1										
	1										
	4										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on 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	(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	ent	(i) ction (b)(13) trolled tity?
		country)						Yes	No
								1	

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Ye	es I
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		
b Gift, grant, or capital contribution to related organization(s)			
c Gift, grant, or capital contribution from related organization(s)		X	۲
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)		X	5
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)	1h		
i Exchange of assets with related organization(s)	11		
j Lease of facilities, equipment, or other assets to related organization(s)			_
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X	ζ
Performance of services or membership or fundraising solicitations for related organization(s)			
m Performance of services or membership or fundraising solicitations by related organization(s)		n	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			
o Sharing of paid employees with related organization(s)			4
p Reimbursement paid to related organization(s) for expenses			
q Reimbursement paid by related organization(s) for expenses			
r Other transfer of cash or property to related organization(s)	<u>1r</u>		
s Other transfer of cash or property from related organization(s)	1s		

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 related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) USOPC	С	977,846.	Cash
(2) USOPC	Е	397,565.	FMV
(3) USOPC	с	743,724.	FMV
(4) USOPC	к	9,000.	Agreement
(5)			
<u>(6)</u>			

Schedule R (Form 990) 2020 USA Shooting, Inc.

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on 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.

(0)	<u> </u>	F	(d)	1-	、	(f)	(a)		•	(1)	(i)	(14)						
(a)	(b)	(c)	(d)	Are a partners 501(c orgs	all	(f)	(g) Share of		ר) החסיי-	(i) Code V URI	(j)	(k)						
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners 501(c	s sec.)(3)	Share of total	end-of-year	tio	opor- nate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin							
of entity		country)	excluded from tax under	orgs		income	assets		tions?	of Schedule K-1	partner?							
		country)	sections 512-514)	Yes	No	Income	asseis	Yes	No	(Form 1065)	Yes No	·						
												 						

Schedule R (Form 990) 2020

USA Shooting, Inc.

 Schedule R (Form 990) 2020
 USA

 Part VII
 Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.