Form **8868**

(Rev. January 2025)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Type or **Print** UNITED STATES BOWLING CONGRESS, INC. 20-1224922 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 621 SIX FLAGS DRIVE return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. 76011 ARLINGTON, TX Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return | Application Is For Return Code Code Form 990 or Form 990-EZ Form 4720 (other than individual) 01 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 12 05 Form 8870 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 Form 990-T (governmental entities) 15 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of ERIC KAMMLAH 621 SIX FLAGS DR - ARLINGTON, TX 76011 Telephone No. (817)385-8296 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN)
 If this is for the whole group, check this lifit is for part of the group, check this box ... and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15 , 20 25 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 24 or tax year beginning _____ , 20 , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return 2 Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

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

Form 8868 (Rev. 1-2025)

** 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

ΑI	For the	e 2024 calendar year, or tax year beginning and	ending					
	Check if applicable	C Name of organization		D Employer identific	cation number			
	Addres	UNITED STATES BOWLING CONGRESS, INC.						
	Name change	Doing business as		20-12249	22			
	Initial return Final return/	621 SIX FLAGS DRIVE	Room/suite	E Telephone number (800)514				
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	77,951,387.			
	Amend	ARLINGION, IX /0011		H(a) Is this a group return				
	Applic tion pendir	F Name and address of principal officer: CHAD MORFH1		for subordinates	····· — —			
		SAME AS C ABOVE		H(b) Are all subordinates in				
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) c	or 527	1	list. See instructions			
	Websit		1	H(c) Group exemptio				
	art I	organization: X Corporation Trust Association Other Summary	•		↑ State of legal domicile; W I			
ø.	1	Briefly describe the organization's mission or most significant activities: ${ m \underline{TO} \ \ DE}$						
Governance		PARTICIPATION IN THE SPORT OF BOWLING, OV						
erns	2	Check this box if the organization discontinued its operations or dispos	ed of more					
ŏ	3			3	21			
∞ ∞	1	Number of independent voting members of the governing body (Part VI, line 1b)			21			
Activities &		Total number of individuals employed in calendar year 2024 (Part V, line 2a)			110 21000			
Ĕ		Total number of volunteers (estimate if necessary)			354,914.			
Ą		Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, Part I, line 11			0.			
	۳	Net difference business taxable income from 1 om 350-1,1 art 1, life 11		Prior Year	Current Year			
Revenue	8	Contributions and grants (Part VIII, line 1h)		15,346,968.	16,866,616.			
	9	Program service revenue (Part VIII, line 2g)		25,441,868.	26,829,476.			
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,171,478.	5,072,480.			
ĕ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,227,224.	1,041,202.			
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		44,187,538.	49,809,774.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		704,996.	667,070.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
Ş	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		9,942,347.	10,368,767.			
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Expenses	. b	Total fundraising expenses (Part IX, column (D), line 25)	0.					
Ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		39,234,644.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		49,881,987.	52,950,975.			
	19	Revenue less expenses. Subtract line 18 from line 12		-5,694,449.	-3,141,201.			
Net Assets or		Total consts (Deck V. Pro 40)		ginning of Current Year .48,495,944.	End of Year 157,692,071.			
Asse Rals	20 21	Total assets (Part X, line 16) Total liabilities (Part X, line 26)		26,820,753.	135,263,680.			
Net /	22	Net assets or fund balances. Subtract line 21 from line 20		21,675,191.	22,428,391.			
Pa	art II	Signature Block			22/120/0321			
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules signed by: t, and complete, Declaration of preparer (other than officer) is based on all information of wh	and stateme	ents, and to the best of my	knowledge and belief, it is			
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge. 10/22/202				
٠.		Signature20000ficeocc428		Date				
Sig				Dale				
Her	е	CHAD MURPHY, EXECUTIVE DIRECTOR Type or print name and title						
			1[Date Check	PTIN			
Paid	i	Preparer's name		.0/22/25 of self-employ				
	parer	Firm's name CLIFTONLARSONALLEN LLP	-, <u> </u>		1-0746749			
-	Only	Firm's address 8215 GREENWAY BOULEVARD, SUITE 60	0	Timi o Liiv 4				
	,	MIDDLETON, WI 53562		Phone no. 60	8-662-8600			
Ma	y the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No			

Form	1 990 (2024) UNITED STATES BOWLING CONGRESS, INC.	20-1224922	Page 2
	rt III Statement of Program Service Accomplishments		<u> </u>
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
•	TO DEVELOP INTEREST AND PARTICIPATION IN THE SPORT OF BOY	WITNG	
	OVERSEEING COMPETITION, AND PROVIDING PROGRAMS AND SERVICE		
	MEMBERSHIP.	<u> </u>	
	MEMDEROIIII •		
2	Did the organization undertake any significant program services during the year which were not listed on the		37
	prior Form 990 or 990-EZ?	Ye	es 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?	Ye	s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as r	measured by expense	s.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	s, the total expenses,	and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 38,239,252. including grants of \$ 593,004.) (Revenue	ue \$ 26,604	,643.)
	UNITED STATES BOWLING CONGRESS INC. (USBC) IS AN ORGANIZA		
	DEVELOP INTEREST AND PARTICIPATION IN THE SPORT OF BOWLII		
	COMPETITIONS, AND PROVIDE PROGRAMS AND SERVICES TO ITS M		
4b	(Code:) (Expenses \$		<u> </u>
	IN ORDER TO HELP YOUTH BOWLERS ACHIEVE THEIR EDUCATIONAL		
	REACH THEIR FULL POTENTIAL, USBC WILL PROVIDE EFFECTIVE A	AND CONVENI	ENT
	ACCESS, SAFEKEEPING AND PRUDENT MANAGEMENT OF ALL SCHOLAI	RSHIP FUNDS	
	UNTIL DISTRIBUTED TO YOUTH BOWLERS IN COMPLIANCE WITH ALI	L REQUIRED	
	REGULATIONS.		
_			
4c	(Code:) (Expenses \$ including grants of \$) (Revenue)	ue \$)
4 - 1	Other present and incoming (Passaille and Cale of the Cale		
4d			
	(Expenses \$ including grants of \$) (Revenue \$)	
40	Total program convice expenses 18 111 118.		

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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
0	, ,	8		x
0	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	-		
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			.
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		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		Х
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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
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		х
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. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u>''</u>		<u></u>
.0	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,"	"		
13	·	19		x
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
20a	• •	20a 20b		 ^
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		\vdash
21			Х	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Λ	<u> </u>

	1990 (2024) UNITED STATES BOWLING CONGRESS, INC. 20-1224	922	P	age 2
Pal	rt IV Checklist of Required Schedules (continued)			·
	Dill		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	00	х	
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Λ	
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	23	Х	
24 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	- 21	
2 40	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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	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		Х
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		37	
	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 the 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? <i>If</i>	202		x
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	200		
·	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	<u> </u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? 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?	20		x
27	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37		x
38	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	31		
30	Note: All Farms 000 files are used to consolid to consolid to Colored to Colored	38	Х	
Pa		_ 55		
	Check if Schedule O contains a response or note to any line in this Part V			
	,		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b				
С				
	(gambling) winnings to prize winners?	1c	Х	

432004 12-10-24

Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 110 filed for the calendar year ending with or within the year covered by this return Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h Х Did the organization have unrelated business gross income of \$1,000 or more during the year? Х If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (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? 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? Х 6a 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). Х 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 7c If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 9 Did the sponsoring organization make any taxable distributions under section 4966? 9a 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 c Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 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? Х 15 If "Yes," see the instructions and file Form 4720, Schedule N. Х Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17 If "Yes," complete Form 6069.

432005 12-10-24

UNITED STATES BOWLING CONGRESS, INC. Form 990 (2024) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 21 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 21 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο Х 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure

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

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

X Own website Another's website X Upon request Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records ERIC KAMMLAH - (817)385-8296

621 SIX FLAGS DR, ARLINGTON, TX 76011

Form 990 (2024)

UNITED STATES BOWLING CONGRESS, INC.

20-1224922

<u> Page</u> **7**

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization no	or any related	organization compe	nsated any	current officer, o	lirector, or trustee.

(A) Name and title	(B) Average hours per		not cl	Posi heck i	more	than o		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee salar		irecto		tee)	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) CHAD MURPHY	40.00								_	
EXECUTIVE DIRECTOR				Х				471,511.	0.	40,807.
(2) JASON OVERSTREET	40.00								_	
DEPUTY EXECUTIVE DIRECTOR				Х				216,716.	0.	33,841.
(3) ROBERT STOKES	40.00								_	
MANAGING IT DIRECTOR						X		204,064.	0.	27,533.
(4) MASON BIRKES	40.00								_	
APPLICATIONS DEVELOPER						X		179,988.	0.	25,013.
(5) CHRISTINE BICKLEY	40.00									
DIRECTOR OF TECHNOLOGY PRO						X		142,760.	0.	23,698.
(6) ROGER NOORDHOEK	40.00									
MANAGING DIRECTOR OF MARKE						X		133,408.	0.	30,518.
(7) ERIC KAMMLAH	40.00									
DIRECTOR OF FINANCE				Х				130,614.	0.	33,297.
(8) CHRIS KRULL	40.00									
APPLICATION DEVELOPMENT MANAGER						X		123,201.	0.	32,950.
(9) SYDNEY BRUMMETT	2.50									
DIRECTOR		Х						5,151.	0.	0.
(10) DENNIS HACKER	2.50									
PRESIDENT		Х		Х				0.	0.	0.
(11) MIKE CANNINGTON	2.50									
VICE PRESIDENT		Х		Х				0.	0.	0.
(12) ANTHONY COLANGELO	2.50									
DIRECTOR		Х						0.	0.	0.
(13) BO GOERGEN	2.50									
DIRECTOR		Х						0.	0.	0.
(14) BRANDON BOWMAN	2.50									
DIRECTOR		Х						0.	0.	0.
(15) CHRISSIE KENT	2.50									
DIRECTOR		Х						0.	0.	0.
(16) CHRISSY LEE	2.50									
DIRECTOR		Х						0.	0.	0.
(17) CHRISTOPHER FLOYD	2.50									
DIRECTOR		Х						0.	0.	0.
										Farm 990 (2024)

432007 12-10-24

Part VII Section A. Officers, Directors, Trus								•	S (continued)	JZZ Fage C
(A)	(B)		,		C)	J		(D)	(E)	(F)
Name and title	Average hours per week	box	not cl	ss per	more son i	than o s both or/trus	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) DAVID HAYNES	2.50									
DIRECTOR	0.50	Х						0.	0.	0.
(19) GLENDA BECKETT	2.50	,,							_	
DIRECTOR	2 50	Х						0.	0.	0.
(20) KEVIN KRAUSS	2.50	,,							_	
DIRECTOR	2 50	Х						0.	0.	0.
(21) KRISTOPHER PRATHER	2.50	7.7						_	_	_
DIRECTOR	2 50	Х						0.	0.	0.
(22) MARK VAN METER	2.50	7.7						_	_	_
DIRECTOR (23) MATTHEW RUSSO	2.50	Х						0.	0.	0.
DIRECTOR	2.50	Х						0.	0.	0.
(24) MATTHEW VOLTZ	2.50	Λ						0.	U •	· ·
DIRECTOR	2.50	Х						0.	0.	0.
(25) MELISSA MCDANIEL	2.50	Λ						0.	0.	<u></u>
DIRECTOR	2.50	Х						0.	0.	0.
(26) NANCY SCHNEK	2.50							0.	0.	<u>.</u>
DIRECTOR	2.50	х						0.	0.	0.
1b Subtotal	I							1,607,413.	0.	247,657.
c Total from continuation sheets to Part VI	I. Section A							0.	0.	0.
d Total (add lines 1b and 1c)								1,607,413.	0.	247,657.

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

17 Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes." complete Schedule J for such person

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SIMPLEA LLC, 2028 E BEN WHITE BLVD STE		
240-2424, AUSTIN, TX 78741	IT SUPPORT	665,434.
WINKLER PRODUCTIONS LLC	TV PRODUCTION	
72 MONCEAU TERRACE, LAKE ST LOUIS, MO 63367	SERVICES	250,135.
CRAIG ELLIOTT	TV PRODUCTION	
867 E SHORELINE DR, HOPE, MI 48628	SERVICES	162,557.
LSC COMMUNICATIONS MCL LLC		
PO BOX 842291, BOSTON, MA 02284	MAGAZINE PRODUCTION	158,849.
MIKE DONOVAN DEVELOPMENTS INC	TOURNAMENT IT	
8097 S COOLIDGE WAY, AURORA, CO 80016	SERVICES	137,124.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 13		

SEE PART VII, SECTION A CONTINUATION SHEETS

20-1224922 UNITED STATES BOWLING CONGRESS, INC. Form 990 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) (A) (B) (C) (D) (E) Name and title Position Reportable Reportable Estimated Average (check all that apply) compensation compensation amount of hours per from from related other week the organizations compensation Highest compensated employee organization (W-2/1099-MISC) (list any Individual trustee or director from the (W-2/1099-MISC) organization hours for Institutional trustee related and related Key employee organizations organizations below Officer (line) (27) NICK PATE 2.50 DIRECTOR Х 0. 0. 0. (28) SHANNON PLUHOWSKY 2.50 Х 0. 0. 0. DIRECTOR (29) STEPHANIE DYSON 2.50 DIRECTOR X 0 . 0. 0.

Total to Part VII, Section A, line 1c

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Revenuè excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1a **1 a** Federated campaigns 14,347,507. 1b **b** Membership dues c Fundraising events 1c 1,462,426, d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ... 1,056,683. 1f 987,395 g Noncash contributions included in lines 1a-1f 16,866,616. h Total. Add lines 1a-1f **Business Code** 2 a TOURNAMENTS 713990 22,134,369. 22134369. Program Service Revenue b BRACKETS AND SWEEPS 713990 1,767,908 1,767,908. 516100 1,208,698. 1,208,698. SPECIAL EVENTS, BOOTHS, AND CONCE 713990 1,002,275 1,002,275 WORKSHOPS & SEMINARS 361,270, 361,270, 713990 354,956 f All other program service revenue 541800 354,956 26,829,476. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 4,060,968 -42 4061010. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 911,079. 911,079. 5 Royalties (i) Real (ii) Personal 6 a Gross rents 6b **b** Less: rental expenses ... c Rental income or (loss) 6c d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 29,122,817. assets other than inventory b Less: cost or other basis 28,111,305 and sales expenses Other Revenue 7c 1,011,512. c Gain or (loss) 1,011,512. 1011512. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 36,170. 10a and allowances 30,308 **b** Less: cost of goods sold 5,862. 5,862. c Net income or (loss) from sales of inventory **Business Code** 11 a MISCELLANEOUS 900099 124,261, 124,261 b d All other revenue 124,261 e Total. Add lines 11a-11d 49,809,774. 354,914. 5983601. 26604643 Total revenue. See instructions 12 Form 990 (2024)

UNITED STATES BOWLING CONGRESS, INC.

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Form 990 (2024) UNITED STATES
Part IX Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon				Г
	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	593,004.	593,004.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	74,066.	74,066.		
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,	006 500		206 500	
	trustees, and key employees	926,788.		926,788.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	7 111 104	6 600 605	407 400	
7	Other salaries and wages	7,111,124.	6,623,695.	487,429.	
8	Pension plan accruals and contributions (include	211 025	100 500	12 245	
	section 401(k) and 403(b) employer contributions)	211,825.	198,580.	13,245.	
9	Other employee benefits	1,627,514.	1,589,674.	37,840.	
0	Payroll taxes	491,516.	414,955.	76,561.	
11	Fees for services (nonemployees):				
а		405 241	F4 F70	270 760	
b		425,341.	54,572.	370,769.	
С	<u> </u>	69,265.		69,265.	
d	, 3				
е	y , F	F0 060		F0 060	
f	Investment management fees	59,268.		59,268.	
g	, ,	F 1FC 2F0	4 665 060	401 000	
	column (A), amount, list line 11g expenses on Sch O.)	5,156,350.	4,665,263.	491,087.	
2	Advertising and promotion	1,193,810.	541,082.	652,728.	
3	Office expenses	1,988,716.	1,954,288.	34,428.	
4	Information technology	609,943.	609,943.		
5	Royalties	1 000 600	64 160	1 012 460	
6	Occupancy	1,077,620.	64,160.	1,013,460.	
7	Travel	1,368,280.	1,112,452.	255,828.	
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	C10 47C	404 560	205 000	
9	Conferences, conventions, and meetings	610,476.	404,568.	205,908.	
20	Interest				
21	Payments to affiliates	010 266	670 277	140 000	
22	Depreciation, depletion, and amortization	819,366.	678,377. 112,014.	140,989. 585,793.	
3	Insurance	697,807.	112,014.	565,793.	
4	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	AWARDS & PRIZES	13,195,001.	13,176,523.	18,478.	
b	EARNINGS ALLOCATOIN - S	9,072,318.		9,072,318.	
С	TEMPORARY EMPLOYEE AGEN	4,209,043.	4,196,251.	12,792.	
d	LINEAGE	552,160.	552,160.		
е	All other expenses	810,374.	697,691.	112,683.	
25	Total functional expenses. Add lines 1 through 24e	52,950,975.	38,313,318.	14,637,657.	(
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Pa	rt X	Balance Sheet		,			. ago
		Check if Schedule O contains a response or note	to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			5,850,960.	1	6,341,263.
	2	Savings and temporary cash investments			197,748.	2	131,213.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,447,596.	4	976,284.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa	antial co	ntributor, or 35%			
		controlled entity or family member of any of these	e persor	ns		5	
	6	Loans and other receivables from other disqualifi					
		under section 4958(f)(1)), and persons described				6	
ţ	7	Notes and loans receivable, net			4 4 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5	7	24.222
Assets	8	Inventories for sale or use			14,472.	8	24,230.
⋖	9				655,042.	9	1,885,757.
	10a	Land, buildings, and equipment: cost or other		10 470 400			
		basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	18,4/9,499.	2 425 400		2 422 522
	l		2,435,498. 133,213,595.	10c	2,423,532.		
	11	Investments - publicly traded securities		11	145,451,452.		
	12	Investments - other securities. See Part IV, line 1	4,092,421.	12	145,451,452.		
	13	Investments - program-related. See Part IV, line 1	331,666.	13 14	286,666.		
	14	Intangible assets	256,946.	15	171,674.		
	15	Other assets. See Part IV, line 11			148,495,944.	16	157,692,071.
	16 17	Total assets. Add lines 1 through 15 (must equal Accounts payable and accrued expenses			3,902,445.	17	5,177,080.
	18	Grants payable	99,135,197.	18	104,622,815.		
	19	Deferred revenue			22,907,235.	19	24,825,668.
	20					20	
	21	Escrow or custodial account liability. Complete F				21	
s	22	Loans and other payables to any current or former					
Liabilities		trustee, key employee, creator or founder, substa					
abil		controlled entity or family member of any of these	e persor	ns		22	
Ï	23	Secured mortgages and notes payable to unrelate	ted third	parties		23	
	24	Unsecured notes and loans payable to unrelated	third pa	ırties		24	
	25	Other liabilities (including federal income tax, pay	ables to	related third			
		parties, and other liabilities not included on lines	17-24). (Complete Part X			
		of Schedule D			875,876.	25	638,117.
	26	Total liabilities. Add lines 17 through 25			126,820,753.	26	135,263,680.
w		Organizations that follow FASB ASC 958, chec	ck here	X			
če		and complete lines 27, 28, 32, and 33.			01 675 101		22 420 201
<u>alar</u>	27				21,675,191.	27	22,428,391.
ä	28	Net assets with donor restrictions				28	
ڃ		Organizations that do not follow FASB ASC 95	os, cnec	k nere			
P		and complete lines 29 through 33.				00	
şţ	29	Capital stock or trust principal, or current funds		fund		29	
\SS(30	Paid-in or capital surplus, or land, building, or equ				30 31	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc Total net assets or fund balances			21,675,191.	32	22,428,391.
Ž	33				148,495,944.	33	157,692,071.
	- 00	Total nabilities and het assets/fullu balailles				- 33	Form 990 (2024)

	1990 (2024) UNITED STATES BOWLING CONGRESS, INC.	20-3	<u> 12249</u>	22	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	49,			
2	Total expenses (must equal Part IX, column (A), line 25)	2	52,			
3	Revenue less expenses. Subtract line 2 from line 1	3		141		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	21,			
5	Net unrealized gains (losses) on investments	5	3,	854	<u>,99</u>	}6.
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		39	,40)5 <u>.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	22,	428	, 39	<u>)1.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_	`	/es	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 on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		_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?		L	2b	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	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		L	За		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
			F	orm 9	90 (2	2024)

432012 12-10-24

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public Inspection

Employer identification number Name of the organization UNITED STATES BOWLING CONGRESS 20-1224922 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions)) Total

Schedule A (Form 990) 2024 UNITED STATES BOWLING CONGRESS, INC. 20-1224922 Page 2

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	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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						
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Amounts from line 4	(4) 2020	(10) 1011	(0) 2022	(4) 2020	(6) 252 1	(i) rotar
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
0	Net income from unrelated business						
9							
	activities, whether or not the						
	business is regularly carried on						
	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10	-1- (i11				40	
	Gross receipts from related activities,	•	,			12	
	First 5 years. If the Form 990 is for the						
_	organization, check this box and stop tion C. Computation of Publi		_				
	Public support percentage for 2024 (I			acluma (fl)		14	0/
			•	***		15	<u>%</u> %
	Public support percentage from 2023 33 1/3% support test - 2024. If the o						
ioa		-					
L	stop here. The organization qualifies	. ,	•				
D	33 1/3% support test - 2023. If the condition have						
47-	and stop here. The organization qual						
	10% -facts-and-circumstances test						
	and if the organization meets the fact		•	-	•	· ·	
	meets the facts-and-circumstances te	_	-	*	-	47- and the 45 is	
b	10% -facts-and-circumstances test	_					ı∪% or
	more, and if the organization meets the		•				
	organization meets the facts-and-circu	umstances test. Th	e organization qua	aimes as a publich	v supported organi	zation	
40	Private foundation. If the organization						

20-1224922 Page 3

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

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

<u> </u>	qualify under the tests listed b	elow, please comp	nete i ait ii.)						
	tion A. Public Support	1			T				
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	13595574.	31608074.	15013965.	15346968.	16866616.	92431197.		
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the	025 157	25606450	10625061	05177704	26510600	07045050		
	organization's tax-exempt purpose	825,15/.	25696458.	19632861.	251///84.	<u> </u>	97845950.		
3	Gross receipts from activities that 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	14420731.	E7204E22	24640026	40524752	42277206	100077147		
	Total. Add lines 1 through 5	14420/31.	5/304532.	34649826.	40524/52.	433//306.	1902//14/		
7a	Amounts included on lines 1, 2, and						0.		
h	3 received from disqualified persons Amounts included on lines 2 and 3 received						 		
D	from other than disqualified persons that								
	exceed the greater of \$5,000 or 1% of the	701,473.		466 653.	1797689.	1076827.	4042642.		
_	amount on line 13 for the year Add lines 7a and 7b	701,473.		466,653.	1797689.	1076827.	4042642.		
	***************************************	701/1731		100,0330	27370031		186234505		
Sec	8 Public support. (Subtract line 7c from line 6.) 186234505 Section B. Total Support								
	mon be rotal cappert								
		(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total		
Cale	ndar year (or fiscal year beginning in) Amounts from line 6	(a) 2020 14420731.	(b) 2021 57304532.	(c) 2022 34649826.	(d) 2023 40524752.	(e) 2024 43377306.	(f) Total 190277147		
Cale 9	ndar year (or fiscal year beginning in)	(a) 2020 14420731. 1923637.	(b) 2021 57304532. 2615102.	(c) 2022 34649826. 2968003.	(d) 2023 40524752. 3972311.	43377306.			
Cale 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties,	14420731.	57304532.	34649826.	40524752.	43377306.	190277147		
Cale 9 10a	Amounts from line 6	14420731. 1923637.	57304532. 2615102.	2968003.	3972311.	43377306. 4972089.	16451142.		
Cale 9 10a b	Amounts from line 6	1923637. 226,396.	57304532. 2615102. 368,573.	2968003. 259,690.	3972311. 309,944.	43377306. 4972089. 354,914.	190277147 16451142. 1519517.		
Cale 9 10a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	14420731. 1923637.	57304532. 2615102.	2968003.	3972311.	43377306. 4972089. 354,914.	16451142.		
Cale 9 10a b	Amounts from line 6	1923637. 226,396.	57304532. 2615102. 368,573.	2968003. 259,690.	3972311. 309,944.	43377306. 4972089. 354,914.	190277147 16451142. 1519517.		
0 10abb b c c 11	Andar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1923637. 226,396. 2150033.	2615102. 368,573. 2983675. -265,741.	2968003. 259,690. 3227693.	3972311. 309,944. 4282255. 521,817.	4972089. 354,914. 5327003.	190277147 16451142. 1519517. 17970659.		
Cale 9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)	1923637. 226,396. 2150033. 281,898. 16852662.	2615102. 368,573. 2983675. -265,741. 60022466.	2968003. 259,690. 3227693. 14,962. 37892481.	3972311. 309,944. 4282255. 521,817. 45328824.	4972089. 4972089. 354,914. 5327003. 124,261. 48828570.	190277147 16451142. 1519517. 17970659. 677,197. 208925003		
Cale 9 10a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the	1923637. 226,396. 2150033. 281,898. 16852662.	2615102. 368,573. 2983675. -265,741. 60022466.	2968003. 259,690. 3227693. 14,962. 37892481.	3972311. 309,944. 4282255. 521,817. 45328824.	4972089. 4972089. 354,914. 5327003. 124,261. 48828570.	190277147 16451142. 1519517. 17970659. 677,197. 208925003		
Cale 9 10a b c 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	1923637. 226,396. 2150033. 281,898. 16852662. ne organization's fire	2615102. 368,573. 2983675. -265,741. 60022466. st, second, third, the second states are second.	2968003. 259,690. 3227693. 14,962. 37892481. fourth, or fifth tax y	3972311. 309,944. 4282255. 521,817. 45328824. vear as a section 5	4972089. 4972089. 354,914. 5327003. 124,261. 48828570. 01(c)(3) organization	190277147 16451142. 1519517. 17970659. 677,197. 208925003		
b 10a 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	1923637. 226,396. 2150033. 281,898. 16852662. ne organization's finition of the component of the componen	2615102. 2615102. 368,573. 2983675. -265,741. 60022466. rst, second, third, the centage	2968003. 259,690. 3227693. 14,962. 37892481.	3972311. 309,944. 4282255. 521,817. 45328824. /ear as a section 5	4972089. 4972089. 354,914. 5327003. 124,261. 48828570. 01(c)(3) organization	190277147 16451142. 1519517. 17970659. 677,197. 208925003		
Dale 9 10a b c c 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	1923637. 226,396. 2150033. 281,898. 16852662. ne organization's fill ic Support Per line 8, column (f), d	2615102. 368,573. 2983675. -265,741. 60022466. rst, second, third, the centage ivided by line 13, contage.	2968003. 259,690. 3227693. 14,962. 37892481. fourth, or fifth tax y	3972311. 309,944. 4282255. 521,817. 45328824. year as a section 5	4972089. 4972089. 354,914. 5327003. 124,261. 48828570. 01(c)(3) organization	190277147 16451142. 1519517. 17970659. 677,197. 208925003 pn,		
Dale 9 10 a b c c 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Stion C. Computation of Public Public support percentage from 2023	1923637. 1923637. 226,396. 2150033. 281,898. 16852662. ne organization's fill ic Support Per line 8, column (f), d	2615102. 2615102. 368,573. 2983675. -265,741. 60022466. rst, second, third, the centage ivided by line 13, colling line 15.	2968003. 259,690. 3227693. 14,962. 37892481.	3972311. 309,944. 4282255. 521,817. 45328824. year as a section 5	4972089. 4972089. 354,914. 5327003. 124,261. 48828570. 01(c)(3) organization	190277147 16451142. 1519517. 17970659. 677,197. 208925003		
b c 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here etion C. Computation of Public support percentage for 2024 (IPublic support percentage from 2023)	1923637. 1923637. 226,396. 2150033. 281,898. 16852662. ne organization's finite Support Per line 8, column (f), do 3 Schedule A, Part strment Income	2615102. 2615102. 368,573. 2983675. -265,741. 60022466. rst, second, third, fine tight of the second sec	2968003. 259,690. 3227693. 14,962. 37892481. fourth, or fifth tax y	3972311. 309,944. 4282255. 521,817. 45328824. /ear as a section 5	4972089. 354,914. 5327003. 124,261. 48828570. 01(c)(3) organization	190277147 16451142. 1519517. 17970659. 677,197. 208925003 pn, 89.14 % 90.45 %		
Cale 9 10 a b c 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here extion C. Computation of Public support percentage for 2023. Investment income percentage for 2023. Investment income percentage for 2025.	1923637. 226,396. 2150033. 281,898. 16852662. ne organization's fire support Per line 8, column (f), do 3 Schedule A, Part stment Income 224 (line 10c, column	2615102. 2615102. 368,573. 2983675. -265,741. 60022466. rst, second, third, 1 centage ivided by line 13, could by line 15 e Percentage nn (f), divided by line	2968003. 259,690. 3227693. 14,962. 37892481. fourth, or fifth tax y	3972311. 309,944. 4282255. 521,817. 45328824. vear as a section 5	4972089. 4972089. 354,914. 5327003. 124,261. 48828570. 01(c)(3) organization	190277147 16451142. 1519517. 17970659. 677,197. 208925003 on,		
Cale 9 10a b c 11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here extion C. Computation of Public support percentage for 2023. Investment income percentage from 2023. Investment income percentage from	1923637. 226,396. 2150033. 281,898. 16852662. ne organization's fire line 8, column (f), do a Schedule A, Part stment Income 224 (line 10c, colum 2023 Schedule A,	2615102. 2615102. 368,573. 2983675. -265,741. 60022466. rst, second, third, 1 centage ivided by line 13, coll, line 15 Percentage nn (f), divided by line 17	2968003. 259,690. 3227693. 14,962. 37892481. fourth, or fifth tax y	3972311. 309,944. 4282255. 521,817. 45328824. rear as a section 5	4972089. 4972089. 354,914. 5327003. 124,261. 48828570. 01(c)(3) organization	190277147 16451142. 1519517. 17970659. 677,197. 208925003 on, 89.14 % 90.45 % 8.60 % 7.39 %		
Cale 9 10a b c 11 12 13 14 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Stion C. Computation of Public Public support percentage from 2023. Investment income percentage from 33 1/3% support tests - 2024. If the	1923637. 1923637. 226,396. 2150033. 281,898. 16852662. ne organization's finite Support Per line 8, column (f), d Schedule A, Part Stment Income 224 (line 10c, colum 2023 Schedule A, e organization did n	2615102. 2615102. 368,573. 2983675. -265,741. 60022466. rst, second, third, the centage ivided by line 13, centage in (f), divided by line 15. Percentage in (f), divided by line 17 ot check the box of check the box of the centage in (f), divided by line 17 ot check the box of the centage in (f), divided by line 17 ot check the box of the centage in (f), divided by line 17 ot check the box of the centage in (f), divided by line 17 ot check the box of the centage in (f), divided by line 17 ot check the box of the centage in (f), divided by line 17 ot check the box of the centage in (f), divided by line 17 ot check the box of the centage in (f), divided by line 17 ot check the box of the centage in (f), divided by line 17 ot check the box of the centage in (f), divided by line 18 other centage in (f), divided by line 19 other centage in (f), divided by line (f), divide	2968003. 259,690. 3227693. 14,962. 37892481. Fourth, or fifth tax y	3972311. 309,944. 4282255. 521,817. 45328824. rear as a section 5	4972089. 4972089. 354,914. 5327003. 124,261. 48828570. 01(c)(3) organization	190277147 16451142. 1519517. 17970659. 677,197. 208925003 on, 89.14 % 90.45 % 8.60 % 7.39 % 7 is not		
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Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 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 on 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 on 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.)

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10b ule A (Form 990) 202	

	rdule A (Form 990) 2024 UNITED STATES BOWLING CO			20-1224922 Page 6
				Doub VII) Considerations
1	Check here if the organization satisfied the Integral Part Test as a qualifying the start Tes		•	n Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.	(B) Current Year
Sect	ion A - Adjusted Net Income		(A) Prior 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):			
a	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	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting ord	anization (see

Schedule A (Form 990) 2024

instructions).

UNITED STATES BOWLING CONGRESS, INC. 20-1224922 Page 7 Schedule A (Form 990) 2024 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 6 Other distributions (describe in Part VI). See instructions. 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 Distributable amount for 2024 from Section C, line 6 10 Line 8 amount divided by line 9 amount 10 (i) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2024 Amount for 2024 Distributable amount for 2024 from Section C, line 6 2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2024 a From 2019 **b** From 2020 c From 2021 **d** From 2022 e From 2023 f Total of lines 3a through 3e g Applied to under distributions of prior years h Applied to 2024 distributable amount i Carryover from 2019 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2024 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2024 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2025. Add lines 3i and 4c. 8 Breakdown of line 7: a Excess from 2020 **b** Excess from 2021 c Excess from 2022 d Excess from 2023

Schedule A (Form 990) 2024

e Excess from 2024

Schedule	A (Form 9	990) 2	2024	U	NIT	ED	STATE	S	BOW	LING	C	ONGR:	ESS,	INC.		20-	12249	22	Page 8
Part V	I Supp	olem	nental	Inform	atior	1. Pro	vide the	expl	lanation	s require	ed b	y Part II	, line 10; F	art II, lir	ne 17a or	17b: Pa	rt III. line	12:	
	Part I\	/, Sed	ction A, I	lines 1, 2	, 3b, 3	3c, 4b	, 4c, 5a, 6	3, 9a	a, 9b, 9d	c, 11a, 1°	1b, a	and 11c	; Part IV, S	Section	B, lines 1	and 2; F	Part IV, Se	ection (Σ,
	line 1; Section	Part n D	IV, Sect	ion D, lin 3. and 8:	es 2 a and F	and 3; Part V	Section I	ecti F lir	ion E, lii nes 2-5	nes 1c, 2 and 6	2a, 2 Also	b, 3a ar	nd 3b; Par ete this pa	t V, line t for an	1; Part V, v addition	Section al inforr	B, line 1 nation	e; Part	V,
	(See ii	nstruc	ctions.)									•	-			iai iiiioii	nation.		
SCHEI	DULE A	λ, :	PART	III,	, L	INE	12,	EΧ	PLAN	OITA	N	FOR	OTHER	INC	COME:				
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Schedule A (Form 990) 2024

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Schedule B (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

Employer identification number

20-1224922 UNITED STATES BOWLING CONGRESS INC. Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 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), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must

answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify

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

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (Rev. 12-2024)

Schedule I	B (Form 990) (Rev. 12-2024)		Page 2				
Name of o	rganization	E	mployer identification number				
UNITE	D STATES BOWLING CONGRESS, INC.		20-1224922				
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional additional contributors.	tional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1		\$5,024 	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				
2		\$7,214	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
3		\$9,076	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				
4		\$9,150	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
5		\$8,635	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		\$5,630	Person X Payroll Noncash (Complete Part II for				

Page 2

Name of o	rganization		Employer identification number
UNITE	D STATES BOWLING CONGRESS, INC.		20-1224922
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	ll space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
7		\$7,0	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d)
8		\$ <u>1,462,4</u>	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

UNITED STATES BOWLING CONGRESS, INC.

20-1224922

Part II	Noncash Property (see instructions). Use duplicate copies of Part II in	f additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	RECEIVABLES, INVENTORY, PREPAIDS AND FIXED ASSETS.	-	
8		\$\$	12/31/24
(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
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - \$	

Name of o	rganization		Employer identification number							
UNITE	D STATES BOWLING CONGRES		20-1224922							
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional second	through (e) and the following line ent haritable, etc., contributions of \$1,000 or	section 501(c)(7), (8), or (10) that total more than \$1,000 for the year ntry. For organizations r 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	 ift							
	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee							
(a) No										
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
-		(e) Transfer of gift								
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
	(e) Transfer of gift									
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held							
		(e) Transfer of gif	ift							
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee							

SCHEDULE D (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

UNITED STATES BOWLING CONGRESS, INC.

Employer identification number 20-1224922

Pa	rt I Organizations Maintaining Donor Advised		s or Accou	nts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	6.		
		(a) Donor advised funds	(b) Fu	nds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor adv	rised funds	
	are the organization's property, subject to the organization's e	xclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or			
Pa	rt II Conservation Easements. Complete if the orga	anization answered "Yes" on Form 990	, Part IV, line 7	·
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreati	on or education) Preservation	of a historically	y important land area
	Protection of natural habitat	Preservation	of a certified h	istoric structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	n of a conserva	ation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic struc	cture included on line 2a	2c	
d	Number of conservation easements included on line 2c acquir	ed after July 25, 2006, and not		
	on a historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele			during the tax
	year			
4	Number of states where property subject to conservation ease	ement is located	_	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling o	f	
	violations, and enforcement of the conservation easements it I	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing co	nservation eas	ements during the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and enforcing conserv	ation easemer	nts during the year
8	Does each conservation easement reported on line 2d above s	satisfy the requirements of section 170	(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expens	se statement a	nd
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's financial stater	ments that des	cribes the
	organization's accounting for conservation easements.			
Pai	rt III Organizations Maintaining Collections of		other Simila	ar Assets.
	Complete if the organization answered "Yes" on Form 9			
1a	If the organization elected, as permitted under FASB ASC 958			
	of art, historical treasures, or other similar assets held for publ	ic exhibition, education, or research in	furtherance of	public
	service, provide in Part XIII the text of the footnote to its finance			
b	If the organization elected, as permitted under FASB ASC 958			
	art, historical treasures, or other similar assets held for public e	exhibition, education, or research in fur	therance of pu	ıblic service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
				\$
2	If the organization received or held works of art, historical treas	sures, or other similar assets for financ	ial gain, provid	le
	the following amounts required to be reported under FASB AS	_		
а	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			\$

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

	dule D (Form 990) (Rev. 12-2024) UNITED t III Organizations Maintaining Co	STATES BO	t. Histo	orical Tre	RESS, I	r Othe	r Sim	2 nilar	0-12 Assets	24922	Pa	ıge 2
3	Using the organization's acquisition, accessio									(CONUIN	uea)	
3		ii, and other record	is, crieck	arry or tine	ioliowing tha	i illane s	signino	ant us	e or its			
_	collection items (check all that apply). Public exhibition		. 🗆									
a					change progr							
b	Scholarly research	•	e	Other								
С	Preservation for future generations											
4	Provide a description of the organization's col								e in Part	XIII.		
5	During the year, did the organization solicit or									7.,		1
Dos	to be sold to raise funds rather than to be mai									Yes		No
Pai	TIV Escrow and Custodial Arrang reported an amount on Form 990, Part		ete if the	organizatio	n answered "	Yes" on	Form	990, F	art IV, III	ne 9, or		
_	<u> </u>	· ·										
па	Is the organization an agent, trustee, custodia		•							٦.,		1
	on Form 990, Part X?								L	Yes		No
D	If "Yes," explain the arrangement in Part XIII a	na complete the to	ollowing to	abie:				Т		Amount		
	Destination below as							4.		Amount		
	Beginning balance						—	1c				
	Additions during the year							1d				
e	Distributions during the year							1e				
f O-	Ending balance							1f		7 v	$\overline{}$	1 N.
2a	Did the organization include an amount on Fo						•			Yes		∫ No ⊺
Par	If "Yes," explain the arrangement in Part XIII. On the transfer of the transfe											
	21 Zindomment Lando Complete in	(a) Current year		rior year	(c) Two year			ree ve	ars back	(e) Four	vears I	hack
4.	Passinning of year balance	(a) Current year	(5)1	nor year	(C) TWO you	ii 3 back	(4) 11	ii oo yo	uro buck	(C) i oui	yours	Jack
	Beginning of year balance											
b	Contributions											
	Net investment earnings, gains, and losses											
	Grants or scholarships											
е	Other expenditures for facilities											
_	and programs											
	Administrative expenses											
g	End of year balance				<u> </u>							
2	Provide the estimated percentage of the curre	•		j, column (a	i)) held as:							
а	Board designated or quasi-endowment		%									
b	Permanent endowment	%										
С	Term endowment9											
	The percentages on lines 2a, 2b, and 2c shou	•										
3a	Are there endowment funds not in the posses	sion of the organiza	ation that	t are held a	nd administe	red for th	ne			Г	V T	
	organization by:										Yes	No
										3a(i)		
										3a(ii)	-+	
	If "Yes" on line 3a(ii), are the related organizat									3b		
Box	Describe in Part XIII the intended uses of the or tVI Land, Buildings, and Equipme		owment for	unds.								
Fai			0 Dort IV	lina 11a G	Caa Farm 000	Dort V	lina 1	^				
	Complete if the organization answered					i i			.			
	Description of property	(a) Cost or o			t or other		Accum			(d) Book	value)
		basis (investi	ment)	pasis	(other)	de	eprecia	uon				
	Land											
b	Buildings											
	Leasehold improvements			16 05	11 670	1 4	111	0.0	4	1 000		7.6
	Equipment				4,670.					1,962		
	Other				<u> 14,829.</u>		943				, 85	
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must eq	ual Form 990. Part	X. line 10	Oc. column	(B))					2,423	, 53	٠ ۵ ک

Schedule D (Form 990) (Rev. 12-2024)

Schedule D (Form 990) (Rev. 12-2024) UNITED STA Part VII Investments - Other Securities			0-1224922 Page 3
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 e	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other COMPONENTS CMARK	05 661 776	COCM	
(A) INVESTMENTS - SMART (B) INVESTMENTS	95,661,776. 45,758,359.	COST	
(C) INVESTMENTS IN IBC	4,031,317.	COST	
(D)	±,031,317•	CODI	
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	145,451,452.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	I1d. 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, line 15, co	<i>l. (B))</i>		
Part X Other Liabilities			_
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	I1e or 11f. See Form 990, Part X, line 2	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			166 112
(2) POST-RETIREMENT BENEFIT OF	BLIGATION		466,443. 171,674.
(3) OPERATING LEASE LIABILITY			1/1,6/4.
(4)			
(5)			
<u>(6)</u>			
(9)	/ /D))		638,117.
Total. (Column (b) must equal Form 990, Part X, line 25, co 2. Liability for uncertain tax positions. In Part XIII, provide		the organization's financial statements	
2. Clability for uncertain tax positions. In Part XIII, provide			

432053 01-02-25

Schedule D (Form 990) (Rev. 12-2024)

	dule D (Form 990) (Rev. 12-2024) UNITED STATES BOWLING CONG				1224922	Page 4
Par	TXI Reconciliation of Revenue per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ts Witl	n Revenue per Re	turn		
1	T			1	53,796,	.199.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				00,.00,	,
а	Net unrealized gains (losses) on investments	2a	3,854,996.			
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	370,412.			
е	Add lines 2a through 2d			2e	4,225,	
3	Subtract line 2e from line 1			3	49,570,	<u>,791.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	F0 060			
а	Investment expenses not included on Form 990, Part VIII, line 7b		59,268. 179,715.	-		
b	Other (Describe in Part XIII.)		•	4.	239	083
C	Add lines 4a and 4b			4c 5	49,809	,983. 771
5 Pai	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) † XII Reconciliation of Expenses per Audited Financial Statemen	nts Wi	th Expenses per F			, / / = •
1 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	52,742,	,300.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d	30,308.			
е	Add lines 2a through 2d			2e		<u>,308.</u>
3	Subtract line 2e from line 1			3	52,711,	,992.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	F0 060			
а	Investment expenses not included on Form 990, Part VIII, line 7b		59,268. 179,715.	-		
b	Other (Describe in Part XIII.)				220	002
	Add lines 4a and 4b			4c 5	52,950	<u>,983.</u> 975
5 Pai	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	32,330	, , , , , , ,
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	/ lines 1	b and 2b: Part V line 4	Part	X line 2: Part X	 I
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi			,	, <u>_</u> ,	,
PAF	RT XI, LINE 2D - OTHER ADJUSTMENTS:					
COS		I, L	INE 10B		30,3	
	UITY LOSS IN INVESTMENT				340,1	
TOT	AL TO SCHEDULE D, PART XI, LINE 2D				370,4	112.
	RT XI, LINE 4B - OTHER ADJUSTMENTS:				170 5	71 E
205	SAN G KOMEN RECEIPTS				179,7	113.
DAE	RT XII, LINE 2D - OTHER ADJUSTMENTS:					
	T OF MERCHANDISE SOLD INCLUDED ON PART VIII	Γ. Τ.	INE 10B		30,3	308.
	TOT HEROIME, STOLE SOLES LIVE OF STATE OF THE STATE OF TH	_,				,,,,,
PAF	RT XII, LINE 4B - OTHER ADJUSTMENTS:					
GR.	NTS & ASSISTANCE				179,7	715.

Schedule D	(Form 990) (Rev.	12-2024) UNI	TED STATE	S BOWLING	CONGRESS,	INC.	20-1224922 Page 5
Part XIII	Supplement	al Informatio	n (continued)		CONGRESS,		<u> </u>
-							
-							
-							

SCHEDULE I (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization UNITED STATES BOWLING CONGRESS, INC.							Employer identification number 20-1224922
Part I General Information on Grants a			,				
Does the organization maintain records to criteria used to award the grants or assist Describe in Part IV the organization's property Part II Grants and Other Assistance to recipient that received more than Statements.	stance? ocedures for monit Domestic Organia	oring the use of grant	funds in the United	States. omplete if the orga			X Yes No
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CALIFORNIA STATE USBC 3673 INDUSTRY AVE # 102 LAKEWOOD, CA 90712	20-4609816	501(C)(3)	10,000.	0.			ASSOCIATION COVID RELIEF
FLORIDA STATE USBC 1846 TARA MARLE LN PORT ORANGE, FL 32128	20-4919987	501(C)(3)	10,000.	0.			ASSOCIATION COVID RELIEF
ILLINOIS STATE USBC 1429 N ILLINOIS ST SWANSEA, IL 62226	26-0119420	501(C)(3)	10,000.	0.			ASSOCIATION COVID RELIEF
INDIANA STATE USBC 2755 LAKE PINE PATH SAINT JOSEPH, MI 49085	20-4373495	501(C)(3)	7,000.	0.			ASSOCIATION COVID RELIEF
MICHIGAN STATE USBC PO BOX 217 GRANDVILLE, MI 49468-0217	22-2139025	501(C)(3)	10,000.	0.			ASSOCIATION COVID RELIEF
MINNESOTA STATE USBC 27672 213TH ST PIERZ, MN 56364	87-0759848	501(C)(3)	7,000.	0.			ASSOCIATION COVID RELIEF
 2 Enter total number of section 501(c)(3) a 3 Enter total number of other organizations 	nd government org	ganizations listed in the	e line 1 table				13.

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

Schedule I (Form 990) (Rev. 12-2024)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL BOWLING HALL OF FAME AND MUSEUM INC 621 SIX FLAGS DRIVE - ARLINGTON, TX 76011	51-0178494	501(C)(3)	129,255.	0.			RESEARCH BOWLING HISTORY
NEW YORK STATE USBC 9 TANGIER RD BREWSTER, NY 10509	45-2750653	501(C)(3)	10,000.	0.			ASSOCIATION COVID RELIEF
OHIO STATE USBC 3570 FALCON CHASE ST NW UNIONTOWN, OH 44685	20-4668318	501(C)(3)	10,000.	0.			ASSOCIATION COVID RELIEF
PENNSYLVANIA STATE USBC 234 WHITE CHURCH RD SAYLORSBURG, PA 18353	20-4046461	501(C)(3)	10,000.	0.			ASSOCIATION COVID RELIEF
TEXAS STATE USBC 4569 DILLY SHAW TAP BRYAN, TX 77808	20-4844906	501(C)(3)	10,000.	0.			ASSOCIATION COVID RELIEF
THE SUSAN G KOMEN BREAST CANCER FOUNDATION INC - 13770 NOEL ROAD, SUITE 801889 - DALLAS, TX 75380	75-1835298	501(C)(3)	163,944.	0.			BREAST CANCER RESEARCH
WISCONSIN STATE USBC 1111 RUTH ST WATERTOWN, WI 53094	90-0271628	501(C)(3)	10,000.	0.			ASSOCIATION COVID RELIEF

Schedule I (Form 990) (Rev. 12-2024) UNITED STATES BOWLING CONGRESS, INC.

Part III Grants and Other Assistance to Domestic Individuals. Part III can be duplicated if additional space is needed.	. Complete if the	e organization answe	ered "Yes" on Form 9	90, Part IV, line 22.				
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance			
TEAM USA AWARDS GRANTS	23	64,100.	0.					
TEAM USA BETTERMENT GRANTS	19	9,966.	0.					
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.				
PART I, LINE 2:								
USBC HAS A GRANT POLICY AND ALL REG								
PRIOR TO THE ISSUANCE OF FUNDS. DOI								
OF GRANT PURPOSE PRIOR TO BEING AWA								
ASSISTANCE ARE PROVIDED TO PROMOTE								
RESPONSIBLE FOR THE MANAGEMENT AND								
AFTER SCHOLARSHIPS HAVE BEEN APPROV	<u> </u>							
FEES, TEXTBOOKS, MEAL PLANS, HOUSING PLANS, AND REQUIRED CLASS SUPPLIES AND								
EQUIPMENT NECESSARY FOR THE SUCCESS								
UNIVERSITIES, COLLEGES, BUSINESS SO	CHOOLS, 1	ECHNICAL S	CHOOLS, TR	ADE SCHOOLS,				
AND VOCATIONAL SCHOOLS.								

SCHEDULE J (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation Information

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

20-1224922

UNITED STATES BOWLING CONGRESS, INC.

Questions Regarding Compensation Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: X a Receive a severance payment or change-of-control payment? 4a X **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4b X c Participate in or receive payment from an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 5 contingent on the revenues of: Х a The organization? 5a Х **b** Any related organization? If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: X a The organization? 6a X **b** Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Х 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III Х 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) (Rev. 12-2024)

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

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

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

	(B) Breakdown	of W-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) CHAD MURPHY (i	423,72	5. 47,785.	0.	16,223.	24,584.	512,318.	0.
EXECUTIVE DIRECTOR		0.	0.	0.	0.	0.	0.
(2) JASON OVERSTREET (i	216,71	5. 0.	0.	9,257.	24,584.	250,557.	0.
DEPUTY EXECUTIVE DIRECTOR		0.	0.	0.	0.	0.	0.
(3) ROBERT STOKES	198,11	5,945.	0.	8,087.	19,446.	231,597.	0.
MANAGING IT DIRECTOR		0.	0.	0.	0.	0.	0.
(4) MASON BIRKES	168,98	10,999.	0.	7,108.	17,905.	205,001.	0.
APPLICATIONS DEVELOPER (i		0.	0.	0.	0.	0.	0.
(5) CHRISTINE BICKLEY	142,54	7. 213.	0.	5,793.	17,905.	166,458.	0.
DIRECTOR OF TECHNOLOGY PRO		0.	0.	0.	0.	0.	0.
(6) ROGER NOORDHOEK	123,33	7. 10,071.	0.	2,739.	27,779.	163,926.	0.
MANAGING DIRECTOR OF MARKE	i)	0.	0.	0.	0.	0.	0.
(7) ERIC KAMMLAH	127,25	3,355.	0.	5,518.	27,779.	163,911.	0.
DIRECTOR OF FINANCE (i	i)	0.	0.	0.	0.	0.	0.
(8) CHRIS KRULL	123,05	9. 142.	0.	5,171.	27,779.	156,151.	0.
APPLICATION DEVELOPMENT MANAGER (i		0.	0.	0.	0.	0.	0.
)						
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						
(i)						
(i	i)						

Schedule J (Form 990) (Rev. 12-2024) UNITED STATES BOWLING CONGRESS, INC.	20-1224922	Page 3
Part III Supplemental Information		
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Ale	so complete this part for any additional information	n.

SCHEDULE L

(Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

UNITED STATES BOWLING CONGRESS, INC.

Employer identification number 2.0 – 1.2.2.4.9.2.2

Pa	art I Excess Benefit Trans	sactions (section 501(c)(3), section 50	1(c)(4), and section 501(c)(29) organizations	only)		
	Complete if the organization	n answered "Yes" on Form 990, Part IV, I	ine 25a or 25b; or Form 990-EZ, Part V, line	40b.		
1	(a) Name of diamondification and	(b) Relationship between disqualified	(a) Description of the secretion		(d) Corr	ected?
	(a) Name of disqualified person	person and organization	(c) Description of transaction	ansaction		No
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
2	Enter the amount of tax incurred by	the organization managers or disqualifie	d persons during the year under			•
	section 4958			\$		
3	Enter the amount of tax, if any, on li	ine 2, above, reimbursed by the organizat	tion	\$		
	•	, ,				

Part II Loans to and/or From Interested Persons

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization

reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan (d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Wi agreer	ritten ment?	
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
_(5)												
(6)												
_(7)												
(8)												
(9)												
(10)												
Total					\$							

Part III Grants or Assistance Benefiting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

	answered res on form 990, 12	Τ ΄	(-D T	(e) Purpose of	
(a) Name of interested person	(b) Relationship between	assistance	(c) Amount of (d) Type of assistance assistance		
	interested person and the organization	assistance	assistance	assistance	
	the organization				
(1) BO GOERGEN	BOARD MEMBER	9,106.	TRNMNT PRIZE	TRNMNT PRIZE	
(2) DAVID HAYNES	BOARD MEMBER	4,768.	TRNMNT PRIZE	TRNMNT PRIZE	
(3) KRISTOPHER PRATHER	BOARD MEMBER	20,463.	TRNMNT PRIZE	TRNMNT PRIZE	
(4) MARK VANMETER	BOARD MEMBER	1,920.	TRNMNT PRIZE	TRNMNT PRIZE	
(5) MATTHEW RUSSO	BOARD MEMBER	9,000.	TRNMNT PRIZE	TRNMNT PRIZE	
(6) NICK PATE	BOARD MEMBER	24,502.	TRNMNT PRIZE	TRNMNT PRIZE	
(7) SHANNON PLUHOWSKY	BOARD MEMBER	64,139.	TRNMNT PRIZE	TRNMNT PRIZE	
(8) STEPHANIE DYSON	BOARD MEMBER	1,067.	TRNMNT PRIZE	TRNMNT PRIZE	
(9) SYDNEY BRUMMETT	BOARD MEMBER	6,000.	TRNMNT PRIZE	TRNMNT PRIZE	
(10)					

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

Schedule L (Form 990) (Rev. 12-2024)

Schedule L (Form 990) (Rev. 12-2024) UNITED	STATES BOWLING CONG	RESS, INC.	20-1224	922	Page 2
Part IV Business Transactions Involv	ing Interested Persons				
Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 2	8b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	aring of zation's nues?
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
_(7)					
(8)					
(9)				-	
(10) Part V Supplemental Information					
	anasa ta musatiana an Cabadula I. Caa	:			
Provide additional information for response	onses to questions on Schedule L. See	instructions.			

Schedule L (Form 990) (Rev. 12-2024)

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

UNITED STATES BOWLING CONGRESS, INC.

Employer identification number 20-1224922

Par	t I Types of Property			•	•			
		(a) Check if applicable	(b) Number of contributions or litems contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu			s
1	Art - Works of art		Items contributed	Tomi ooo, r are viii, iirie rg				
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								
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or trust interests							
40	trust interests Securities - Miscellaneous							
12	Qualified conservation contribution -							
13								
44	Historic structures Qualified conservation contribution - Other							
14	The state of the s							
15	Real estate - Residential							
16 17	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	- 77	1	007 205	DOOK WATER			
25	Other (NET ASSETS FROM)	X		967,393.	BOOK VALUE			
26	Other ()							
27	Other ()							
28	Other (<u> </u>	<u> </u>					
29	Number of Forms 8283 received by the organiz						0	
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement 29			0	
							Yes	No
30a	During the year, did the organization receive by							
	must hold for at least 3 years from the date of		ntribution, and whi	ch isn't required to be used	for			77
	exempt purposes for the entire holding period?	?				30a		X
	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p				tions?	31		X
32a	Does the organization hire or use third parties		_					
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) foi	r a type of property	for which column (a) is che	cked,			
	describe in Part II.							

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

Schedule M (Form 990) 2024

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.	<u>2</u>
SCHEDUL	E M, PART I, COLUMN (B):	
NUMBER	OF CONTRIBUTORS IS BEING LISTED,	_
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Schedule M (Form 990) 2024

432142 01-18-25

SCHEDULE 0 (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization UNITED STATES BOWLING CONGRESS, INC.	Employer identification number 20-1224922
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISS	
PROVIDING PROGRAMS AND SERVICES TO ITS MEMBERSHIP.	
FORM 990, PART VI, SECTION A, LINE 6:	
THE ORGANIZATION HAS HAD MEMBERS SINCE ITS INCEPTION IN 20	04.
	
FORM 990, PART VI, SECTION A, LINE 7A:	
ASSOCIATION DELEGATES VOTE FOR DIRECTORS AT THE NATIONAL CO	ONVENTION.
FORM 990, PART VI, SECTION B, LINE 11B:	
THE DIRECTOR OF FINANCE WILL REVIEW THE FILING AND SUPPORT	ING SCHEDULES
BEFORE RECOMMENDING APPROVAL TO THE EXECUTIVE DIRECTOR.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ALL MANAGING DIRECTORS, EXECUTIVES, BOARD AND COMMITTEE ME	MBERS OF USBC ARE
REQUIRED TO SIGN A CONFLICT OF INTEREST DISCLOSURE FORM ON	
USBC MONITORS THIS BY ENSURING THAT THEY HAVE RECEIVED A S	
EACH PERSON. ANY IDENTIFIED POTENTIAL CONFLICTS OF INTERE	
TO ADMINISTRATION FOR FURTHER REVIEW AND APPROPRIATE ACTION	
FORM 990, PART VI, SECTION C, LINE 18:	
THE ORGANIZATION MAKES ITS 990 AVAILABLE FOR PUBLIC INSPEC	rion upon
REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF	F INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC U	
THESE DOCUMENTS ARE ALSO AVAILABLE ON USBC'S WEBSITE.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN POSTRETIREMENT BENEFIT OBLIGATION	39,405.

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

Schedule O (Form 990) (Rev. 12-2024)

SCHEDULE R (Form 990)

(Rev. January 2025) Department of the Treasury Internal Revenue Service

Name of the organization

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.

UNITED STATES BOWLING CONGRESS, INC.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

20-1224922

(a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) BC YOUTH BOWLING, INC 47-1705987 21 SIX FLAGS DRIVE (b) Primary activity Legal domicile (state or foreign country) Frimary activity Legal domicile (state or foreign country) Exempt Code section Solici(3)) Exempt Code section Solici(3)) Exempt Code section Solici(3))	lling
reganizations during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) EXEC YOUTH BOWLING, INC 47-1705987 SET SIX FLAGS DRIVE (b) CC) Legal domicile (state or foreign country) Fixed primary activity Section Fixed primary activity Section Fixed primary activity Section Sol1(c)(3)) (c) Exempt Code section Sol1(c)(3)) Exempt Code section Sol1(c)(3)) Fixed primary activity Section Sol1(c)(3))	
reganizations during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) EXEC YOUTH BOWLING, INC 47-1705987 S21 SIX FLAGS DRIVE (b) CC) Legal domicile (state or foreign country) Fixed primary activity Section CC) Exempt Code section Sol1(c)(3)) Direct controlling entity Exempt Code section Sol1(c)(3))	
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reganizations during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) EXEC YOUTH BOWLING, INC 47-1705987 S21 SIX FLAGS DRIVE (b) CC) Legal domicile (state or foreign country) Fixed primary activity Section CC) Exempt Code section Sol1(c)(3)) Direct controlling entity Exempt Code section Sol1(c)(3))	
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Name, address, and EIN of related organization Primary activity Legal domicile (state or foreign country) Legal domicile (state or foreign country) Exempt Code section Sol1(c)(3)) Direct controlling entity Exempt Code section Sol1(c)(3))	
EBC YOUTH BOWLING, INC 47-1705987 S21 SIX FLAGS DRIVE	(g) tion 512(b)(controlled entity?
521 SIX FLAGS DRIVE	s N
	X

Schedule R (Form 990) (Rev. 1-2025) UNITED STATES BOWLING CONGRESS, INC.

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)	(I	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disprop alloca	ortionate tions?	Code V-UBI amount in box	Genera manag partne	Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes I	lo
INTERNATIONAL BOWLING CAMPUS,											
LLC - 26-2175073, 621 SIX											
FLAGS DRIVE, ARLINGTON, TX											
76011	REAL ESTATE	ТX	N/A	RELATED	-265,284.	5,125,090.		X	N/A	X	50.00%
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	1										
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	-										
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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 country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled tity?

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

1a

Yes No

X

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	Gift, grant, or capital contribution to related organization(s)					1b		_X_
С	Gift, grant, or capital contribution from related organization(s)				L	1c		X
d	Loans or loan guarantees to or for related organization(s)				L	1d	Х	
е	Loans or loan guarantees by related organization(s)					1e		<u>X</u>
f	Dividends from related organization(s)					1f		_X_
	Sale of assets to related organization(s)					1g		<u>X</u>
h	Purchase of assets from related organization(s)					1h		X
i	Exchange of assets with related organization(s)					1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)					1j		<u>X</u>
k	Lease of facilities, equipment, or other assets from related organization(s)					1k	Х	
	Performance of services or membership or fundraising solicitations for related organ					11	Х	
m	Performance of services or membership or fundraising solicitations by related organ	nization(s)				1m		<u>X</u>
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	on(s)				1n	Х	
0	Sharing of paid employees with related organization(s)					10	Х	
р	Reimbursement paid to related organization(s) for expenses					1 p	Х	
q	Reimbursement paid by related organization(s) for expenses					1q	Х	
						1r		<u>X</u>
	Other transfer of cash or property from related organization(s)					1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on which it is the above in the above it is the above	ho must complete th	is line, including covered rela	tionships and transaction thresholds.				
	(a) Name of related organization	(b)	(c)	(d)				
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amou	ınt involv	/ed		
		type (a-s)						
(1)								
(2)								
(3)								
(4)								
<i>(</i> =\								
(5)								
(C)								
(6)		I		Calcadada D./	CO	0) (D	a 4 4	200E,
132163	10-23-24	16		Schedule R (-orm 99	U) (K	ev. 1-2	2025)

24922 Page 4

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec 501(c)(3) orgs.?		(g) Share of end-of-year assets	Dispretion allocat	opor- ate ions?		(j) Genera manag partne	(k) Percentage ownership
		ocumiyy	Sections 512-514)	Yes No	intestine	assess	Yes	No	(FOITH 1003)	Yes I	IO
											_
											_
									hadab D./Farr		

Schedule R	R (Form 990) (Re	v. 1-2025)	UNITED	STATES	BOWLING	CONGRESS,	INC.	20-1224922	Page 5
Part VII	Supplemer	ntal Infor	mation			CONGRESS,			
	Provide additi	onal informa	ation for respo	onses to ques	tions on Schedu	ıle R. See instructio	ns.		
								·	