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DLN: 93493286000724

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS

generally cannot redact the information on the form

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

Open to Public Inspection

A Fo	r the 2	2013 calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31	-2013	1										
	eck if ap Iress cha	oplicable UNITED STATES BOWLING CONGRESS INC			· identification number									
	ne char	Doing Business As		20-1224	1922									
Init	ıal retur	Number and street (or P O box if mail is not delivered to street address) Room/suite												
┌ Ten	mınated	631 CIV FLACC DDD/F	-	E Telephone										
Am	ended r	eturn Cıty or town, state or province, country, and ZIP or foreign postal code		(800)51	14-2695									
_		ARLINGTON, TX 76011 pending		G Gross rece	upts \$ 38,251,069									
		F Name and address of principal officer	H(a) Is the	s a group re	<u> </u>									
		JENNIFER SALAZAR		dinates?	┌ Yes									
		621 SIX FLAGS DRIVE ARLINGTON,TX 76011	U(b) A	11	taa EvasENa									
			ות Are a includ	ll subordina [.] ded?	tes									
I Tax	x-exem	pt status	If"No	o," attach a	list (see instructions)									
J W	ebsite	: WWW BOWL COM	H(c) Grou	p exemptior	n number ►									
K Forn	n of org	anization ✓ Corporation ← Trust ← Association ← Other ►	L Year of fo	rmation 2004	M State of legal domicile WI									
Pa	rt I	Summary			·									
Governance	Т	Briefly describe the organization's mission or most significant activities ODEVELOP INTEREST AND PARTICIPATION IN THE SPORT OF BOWLING ROVIDING PROGRAMS AND SERVICES TO ITS MEMBERSHIP	, OVERSEE	ING COMPE	ETITION, AND									
ě 🗎	_													
100 1300	2 0	Check this box 🔭 if the organization discontinued its operations or disposed of	more than 2	5% of its ne	et assets									
	3 1	lumber of voting members of the governing body (Part VI, line 1a)		.	3 24									
Activities &	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)		🗀	4 24									
₹	5 ⊺	otal number of individuals employed in calendar year 2013 (Part V, line 2a) .		[5 145									
ã.	6 ⊺	otal number of volunteers (estimate if necessary)			6 21,000									
		otal unrelated business revenue from Part VIII, column (C), line 12		_7	7a 1,051,427									
	b∧	let unrelated business taxable income from Form 990-T, line 34		I	7b 0									
			Prio	r Year	Current Year									
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)		7,345,96										
Revenue	9 10	Program service revenue (Part VIII, line 2g)		229,76 77,56										
Ž	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		326,55	-									
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		320,33	1,307,321									
		12)		7,979,85	 									
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		91,59										
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0 0									
8	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines $5-10$)		4,402,10	9,251,729									
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0 0									
ਡੋ	ь	Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright^0												
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,421,21	 									
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		9,914,91										
_ en	19	Revenue less expenses Subtract line 18 from line 12		-1,935,06	3 2,768,587									
Net Assets or Fund Balances			1	of Current ear	End of Year									
SSel Bafa	20	Total assets (Part X, line 16)		7 42,803,846										
A Per Fig.	21	Total liabilities (Part X, line 26)		32,660,591 22,284										
	22	Net assets or fund balances Subtract line 21 from line 20		17,337,18	6 20,519,025									
Dar	t II	Signature Block												

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete $\;\;$ Declaration of prepare preparer has any knowledge

	**	****						
Sign	▼ Sıg	nature of officer						
Here	_	INIFER SALAZAR CFO						
	Ту	pe or print name and title						
Doid		Print/Type preparer's name KIMBERLY ANDERSON CPA Preparer's signature						
Paid Prepare	r	Firm's name ► CLIFTONLARSONALLEN LLP Firm's address ► 8215 GREENWAY BOULEVARD SUITE 600						
Use Onl								

May the IRS discuss this return with the preparer shown above? (see instruction

MIDDLETON, WI 53562

(Expenses \$ including grants of \$

28.010.169

Total program service expenses ►

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
_		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νo
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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	26		No
37	organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
3/	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

Par				_
	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 1a 5,402			110
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
	by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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?	6a		No
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax vear			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
_	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	Ť	103	
	more members of the governing body?	7a	Yes	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			1
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	V	
		IUa	Yes	
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?	10a	Yes	
		10b		No
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		No
11a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b		No
11a b 12a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a	Yes	No
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a 12b 12c	Yes Yes Yes	No
11a b 12a b c	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No
11a b 12a b c	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	10b 11a 12a 12b 12c	Yes Yes Yes	No
11a b 12a b c	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	N o
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
11a b 12a c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
11a b 12a c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	

Form 990 ((2013	
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	ч	У	C	•

Part VIII 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 instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per	Posi		(C)				ו (ט) ו	(E)	(F)
						heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		(W- 2/1099- MISC)	organization and related organizations

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	than o	one l both	o not check e box, unless th an officer cor/trustee)			Repor comper from organiza	nsation o the otion (W-	(E) Reportable compensation from related organizations (W	'-	(F) Estima mount o compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
1h	Sub-Total							<u> </u>						
C	Total from continuation shee	· · · · · · · ts to Part VII, S	ection A	Α.		• •		Þ						
d	Total (add lines 1b and 1c) .						-	Þ		1,376,620		0		47,651
2	Total number of individuals (in \$100,000 of reportable comp						d abov	e) w	ho receive	ed more th	an			
													Yes	No
3	Did the organization list any f					, key	emplo	yee	, or highes	t compen	sated employee		163	140
_	on line 1a? If "Yes," complete s					•		•				3		No
4	For any individual listed on lin organization and related organ													
5	Individual	la receive or acc	rue co	 mnen	• satu	• on fr	om an	v uni	· ·	· · ·	or individual for	4	Yes	
	services rendered to the orga											5		No
Se	ection B. Independent Co	ontractors												
1	Complete this table for your fi compensation from the organi	ve highest comp											tav vear	
	-	(A)	-	acion	101	cire c	arena	ar ye	ar ending		(B)		(C)
MICH	ا AEL BEST & FRIEDRICH LLC 100 EAST	Name and business WISCONSIN AVENU		JKEE \	WI 53	202				LEGAL SER	cription of services /ICES	+	Comper	418,690
SIMPL	E A LLC 815 A BRAZOS STREET 115 A	USTIN TX 78701								WEBSITE C	ONSULTING	ightharpoons		286,358
	EMPORARY BOWLING ASSOCIATION D				ARLI	VGTO	N TX 76	011			G CONSULTING INT COMPUTER SERVI	CES		240,000
	DONOVAN DEVELOPMENT 34839 CHEI			30107										204,505
	RTEAM INC 718 WASHINGTON AVE N Total number of independent co			t not	limit	٠+ ١٠٥٠	o thac	م اید	ted above	IT DEVELOR		+		200,054
	\$100,000 of compensation froi			. 1101		.eu ti	o (1105	C 1151	ieu above,	, will lece	ived more tilali			

Progra
Other Revenue
Other

Part \		Statement o	f Revenue					raye :
			ule O contains a respor	nse or note to any lir				<u>୮</u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
တည	1a	Federated cam	paigns 1a					
Grants mounts	ь	Membership du	ies 1b	16,750,513				
ي ق	c	Fundraising ev	ents 1c					
ff. A A	d	Related organiz	zations 1d					
i5 [a	e	Government grant						
Sin				974.665				
Lie Contributions, Giffs, Grants and Other Similar Amounts	f	similar amounts no	ons, gifts, grants, and 1f ot included above	874,665				
윤호	g	Noncash contributi 1a-1f \$	ons included in lines			į		
ng n	h	'	s 1a-1f		17,625,178			
<u> </u>	 			Business Code				
E e	2a	TOURNAMENTS		Business Code 713990	15,201,907	15,201,907		
Program Serwce Revenue	2u	BRACKETS AND SV	MFEDS	713990	1,163,459	1,163,459		
or O⊈	"	ADVERTISING INC		713990 541800		1,163,439	1 051 427	
Ņ.	d		BOOTHS, AND CONCE	713990	1,051,427 495,689	495,689	1,051,427	
38	l e	EQUIPMENT TESTI	·	713990	185,717	185,717		
Ē	f		am service revenue	713990	185,/1/	183,717		
ĵog L	'	All other progre	am service revenue					
	g		s 2a-2f		18,098,199			
	3		ome (including dividendar ar amounts)		188,485			188,48
	4		stment of tax-exempt bond					
	5	Royalties .	<u></u>	🕨	889,913			889,91
			(ı) Real	(II) Personal				
	6a	Gross rents	4,800					
	b	Less rental expenses	0					
	C	Rental income or (loss)	4,800					
	d	Net rental inco	me or (loss)		4,800			4,80
	_	Gross amount	(ı) Securities	(II) O ther				
	7a	from sales of assets other than inventory	238,616	743				
	Ь	Less cost or other basis and	250,625	0				
	c	sales expenses Gaın or (loss)	-12,009	743				
	d		ss)		-11,266			-11,260
пе	8a	Gross income f events (not inc	from fundraising	-				
Other Revenue		\$ of contributions See Part IV, lir	s reported on line 1c) ne 18 a					
ā ē	Ь	Less directex	penses b					
ᅙ	c		(loss) from fundraising	events 🛌				
	9a	Gross income f See Part IV, lir	from gaming activities ne 19					
	Ь	less direct ox	penses b					
	c		(loss) from gaming activ	vities				
	10a	Gross sales of returns and allo	owances .	251.100				
	.	1	a L	964,498				
	b c		oods sold . . b (loss) from sales of inve	731,927 entory -	232,571	232,571		
	F	Miscellaneou		Business Code	232,371	202,571		
	11a	INVESTMENT		531390	-292,554	-292,554		
	ь							
	c							
	d	All other reven	ue		533,191	533,191		
	e	Total. Add lines	ا s 11a-11d	🕨	340 637			
	12	Total revenue.	See Instructions	🕨	240,637			
	1		· · · •		37,268,517	17,519,980	1,051,427	1,071,93

Form 990 (2013) Page **10** Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) (B) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 494,393 494,393 Grants and other assistance to individuals in the United States See Part IV, line 22 153,734 153,734 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 1,424,271 1,424,271 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 6,580,257 5,677,041 903,216 Pension plan accruals and contributions (include section 401(k) 143,792 124,055 19,737 and 403(b) employer contributions) 411,193 Other employee benefits 476,614 65,421 10 626,795 540,760 86,035 11 Fees for services (non-employees) Management 752,647 Legal 752,647 Accounting 38,683 38,683 Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 1,489,488 1,187,497 301,991 Schedule O) Advertising and promotion . . 1,169,279 1,098,962 70,317 12 13 Office expenses 2,093,107 1,932,414 160,693 35,788 28,883 14 Information technology . . 64,671 15 Royalties . 492,492 13,566 478,926 16 Occupancy **17** 920,031 96,626 823,405 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . . . 179,366 118,993 60,373 20 3,449 3,449 Payments to affiliates 21 22 Depreciation, depletion, and amortization . 728,167 728,167 23 70,838 154,094 224,932 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a AWARDS & PRIZES 10,139,778 10,105,498 34,280 TEMPORARY EMPLOYEE AGEN 2,956,654 2,956,654 LINEAGE 2,425,911 2,425,911 d MAINTENANCE & RENTAL 423,049 422,677 372 e All other expenses 498,370 143,569 354,801 Total functional expenses. Add lines 1 through 24e 25 34,499,930 28,010,169 6,489,761 0

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)

26

Form 990 (2013) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 22,634,142 19,237,370 1 1 117.032 117.032 2 2 3 3 4 7.745.806 4 1.185.834 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets 6 7 8 148.675 8 338.670 9 686,569 9 610,446 10a Land, buildings, and equipment cost or other basis Complete 25,589,849 10a Part VI of Schedule D h Less accumulated depreciation 10b 18,486,169 7,383,865 10c 7,103,680 3,878,539 7,296,245 11 11 12 7,400,936 12 6,912,356 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 14 14 2,213 2,213 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 49,997,777 16 42,803,846 8,442,435 17 3,078,473 **17** 18 18 19 22,393,278 17,888,891 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 1,824,878 1,317,457 26 **Total liabilities.** Add lines 17 through 25 32,660,591 26 22,284,821 Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 16,949,017 27 20,130,857 28 28 388,169 29 29 388,168 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ŏ 30 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund

32

33

š

Retained earnings, endowment, accumulated income, or other funds

Total liabilities and net assets/fund balances

20,519,025

42,803,846

32

33

17,337,186

49,997,777

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
-					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		37,;	268,517
2	Total expenses (must equal Part IX, column (A), line 25)	2		34,4	499,930
3	Revenue less expenses Subtract line 2 from line 1	3		2,7	768,587
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		17,:	337,186
5	Net unrealized gains (losses) on investments	5		;	256,240
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		:	157,012
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		20,!	519,025
Par	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🔽
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	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	arate			
	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 oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ne	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Software ID: Software Version:

EIN: 20-1224922

Name: UNITED STATES BOWLING CONGRESS INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033 1130)	2,1033 11200)	related organizations
DARLENE BAKER	2 50	×				_		0	0	0
DIRECTOR TAMORIA ADAMS	2 50									
DIRECTOR		Х						0	0	0
RAY BATY DIRECTOR	2 50	×						0	0	О
ANDREW CAIN	2 50	х		х				0	0	0
PRESIDENT ANTHONY COLANGELO	2 50	X						0	0	0
DIRECTOR PERRY DANIELS	2 50									
DIRECTOR THOMAS BLUTH	2 50	X						0	0	0
DIRECTOR CATHY DESOCIO		×						0	0	0
DIRECTOR	2 50	х						0	0	0
MIKE FAGAN DIRECTOR	2 50	×						0	0	0
JO DIMOND	2 50	×						0	0	0
DIRECTOR LIBBI FLETCHER	2 50	×						0	0	0
DIRECTOR ERIK GALGANSKI	2 50									
DIRECTOR MICHAEL ITALIA	2 50	X						0	0	0
DIRECTOR KELLY KULICK	2.50	X						0	0	0
DIRECTOR	2 50	х						0	0	0
TONY MANNA JR DIRECTOR	2 50	×						0	0	0
MARK MARTIN	2 50	х						0	0	0
TOM MARTINO	2 50	×						0	0	0
DIRECTOR JAN SCHMIDT	2 50								0	0
DIRECTOR FRANK WILKINSON	2 50	X						0	0	0
VICE-PRESIDENT		×		Х				0	0	0
MARCI WILLIAMS DIRECTOR	2 50	х						0	0	0
KAREN JOST DIRECTOR	2 50	х						0	0	0
STEVEN O'BRIEN	2 50	х						0	0	0
DAN PATTERSON	2 50	х						0	0	0
DIRECTOR ROBERT SPIGNER	2 50									
DIRECTOR STUART UPSON	40 00	X						0	0	0
EXECUTIVE DIRECTOR	1000			Х				289,530	0	10,140

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inc	iepenaent ee.							1	1	1
(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
BRIAN LEWIS	40 00			х				138,774	0	5,787
MANAGING DIR, TOURNAMENTS KEVIN TERRY	40 00							152.505		
CHIEF REVENUE OFFICER				Х				152,685	0	0
NEIL STREMMEL	40 00			x				138,996	0	5,796
MANAGING DIR, NGB								,		,
JON-PAUL ESTES MANAGING DIRECTOR, IT	40 00			х				103,802	0	4,400
PETER TREDWELL	40 00			Х				155,279	0	5,398
MANAGING DIR, MEDIA/MARKET										
SUSAN MERRILL CFO - UNTIL 6/21/13	40 00			х				91,685	0	3,728
JASON OVERSTREET MANAGING DIR OF COMMUNICAT	40 00			х				117,532	0	4,944
MIKE SPRIDCO MANAGING DIR OF RULES AND	40 00			х				79,728	0	3,437
ERIC KEARNEY	40 00			х				82,242	0	3,538
MANAGING DIR OF OPERATIONS JENNIFER SALAZAR	40 00									
				х				26,367	0	483
CFO - EFFECTIVE 10/28/13	5 00					1	l			

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As Filed Data -

DLN: 93493286000724

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

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

2013

Open to Public Inspection

Name	of	the	organization	
JNITED	ST	ATES	BOWLING CONGRESS	INC

Employer identification number

20-1224922

Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All org	ganızatıons	must comp	olete this p	art.) See ır	structions.	
The	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	gh 11, check	only one bo	x)		
1	Γ	A churc	:h, conventi	on of churches, or as	ssociation of	churches de	escribed in s e	ection 170(b)(1)(A)(i).		
2	Γ	A schoo	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Schedu	ıle E)				
3	Γ	A hospi	tal or a coo	perative hospital se	rvice organiz	atıon descrı	bed ın sectio	n 170(b)(1)	(A)(iii).		
4	Γ			n organization operat	ed ın conjun	ction with a	hospital desc	cribed in sec	tion 170(b)(1)(A)(iii). E	nter the
5	_			ty, and state erated for the benefit	t of a collogo	orunwarat	w owned or o	paratad by a	government	al unit docci	rihad in
,	'	=	•	A)(iv). (Complete P	_	or universit	y owned or o	perated by a	i governinent	ai uiiit uesti	ilbed III
6	Г				•	al unit desci	ribed in secti	on 170(b)(1)(A)(v).		
7	Ĺ.	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)									
8			· ·	described in section			-	-			
9	굣	_		at normally receives					•	-	=
				ities related to its ex							
			_	oss investment inco				•		tax) from bus	sinesses
	_			janization after June							
10	<u> </u>			ganized and operated							
11	ı	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type II b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated									
e f g	Γ	other the section of the or check the Since A followin	nan foundati 509(a)(2) rganization his box ugust 17, 2 g persons?	ox, I certify that the on managers and other received a written decorate the organic received.	ner than one etermination zation accep	or more pub from the IRS sted any gift	licly support 5 that it is a ⁻ or contribution	ed organizat Type I , Type on from any	ions describe	ed in section	n 509(a)(1) or ng organization,
				rectly or indirectly og governing body of th				persons des	scribed iii (ii)	11g(
		. ,	Ť	er of a person descri		-				11g(
		• •	•	lled entity of a perso	• •		hove?			11g(
h				ng information about						1-9(···/
						· · · · · · · · · · · · · · · · ·	(-)				
(i) Name of supported organizatio		rted	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you the organiz in col (i) o suppor	zation f your	(vi) Is the organization in col (i) organized in the US?		(vii) A mount of monetary support
				instructions))	Yes	No	Yes	No	Yes	No	
Tota	1										

	(Complete only if you of Part III. If the organization	checked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ition failed to q	ualify under		
S	ection A. Public Support	rtion rans to qu	diriy dilaci tile	teoto notea per	ovy predoc con	ipiete i di c IIII)			
	endar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")								
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3								
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column	1							
	(f)								
6	Public support. Subtract line 5 from line 4								
S	ection B. Total Support								
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
7	in) ► A mounts from line 4								
8	Gross income from interest,								
9	dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated								
	business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)								
11	Total support (Add lines 7 through 10)								
12	Gross receipts from related activiti	es, etc (see inst	ructions)	<u> </u>	1	12			
13	First five years. If the Form 990 is this box and stop here								
14	ection C. Computation of Pub Public support percentage for 2013			11 column (f)		141			
15	Public support percentage for 2013	,		II, Column (1))		14			
				on line 12 and 1	ine 14 is 32 4/20/-	or more, check t	hie hov		
b	33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain								
b 18	in Part IV how the organization mee organization 10%-facts-and-circumstances test- 15 is 10% or more, and if the organization in Part IV how the organization private foundation. If the organization	ets the "facts-and - 2012. If the org nization meets th tion meets the "f	d-circumstances anization did not e "facts-and-circ acts-and-circum	' test The organi check a box on li umstances" test stances" test Th	zation qualifies a: ne 13, 16a, 16b, , check this box a le organization qu	s a publicly suppo or 17a, and line nd stop here. alifies as a public	orted ►		
	instructions			. ,	,		▶ □		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

36	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) ┡	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	3	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do	23,767,989	23,254,332	20,574,692	7,345,961	17,62	5,178	92,568,152
	not include any "unusual grants ")							
2	Gross receipts from admissions,							
	merchandise sold or services							
	performed, or facilities furnished	22,552,808	21,206,787	19,380,939	396,606	18,01	1,270	81,548,410
	in any activity that is related to the organization's tax-exempt							
	purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or							
_	business under section 513 Tax revenues levied for the							
4	organization's benefit and either							
	paid to or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to the organization without							
	charge							
6	Total. Add lines 1 through 5	46,320,797	44,461,119	39,955,631	7,742,567	35,63	5,448	174,116,562
7a	Amounts included on lines 1, 2,							
	and 3 received from disqualified							0
	persons Amounts included on lines 2 and							
D	3 received from other than							
	disqualified persons that exceed							0
	the greater of \$5,000 or 1% of							
	the amount on line 13 for the year						-	0
С 8	Add lines 7a and 7b Public support (Subtract line 7c							
0	from line 6)							174,116,562
Se	ction B. Total Support							
Cale	ndar year (or fiscal year	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	;	(f) Total
	nealinnina in i 📂 👚 📗	` '	` '					
9	beginning in) ► A mounts from line 6	46,320,797	44,461,119	39,955,631	7,742,567	35,636	5,448	174,116,562
9 10a				39,955,631	7,742,567	35,636	5,448	174,116,562
_	A mounts from line 6 Gross income from interest, dividends, payments received	46,320,797	44,461,119	, ,	, ,	·		
_	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents,			39,955,631 656,598	7,742,567	·	5,448 3,198	174,116,562 3,715,646
_	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	46,320,797	44,461,119	, ,	, ,	·		
_	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents,	46,320,797	44,461,119	, ,	, ,	·		
10a	A mounts 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	46,320,797 962,558	44,461,119	656,598	214,312	1,083	3,198	3,715,646
10a	A mounts 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	46,320,797	798,980	, ,	, ,	·	3,198	
10a b	A mounts 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	962,558 346,789	798,980 246,728	656,598 236,600	214,312 8,625	1,085	3,198 1,427	3,715,646 1,890,169
b c	A mounts 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	46,320,797 962,558	798,980	656,598	214,312	1,083	3,198 1,427	3,715,646
10a b	A mounts 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	962,558 346,789	798,980 246,728	656,598 236,600	214,312 8,625	1,085	3,198 1,427	3,715,646 1,890,169
b c	A mounts 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 in line 10b, whether or not the	962,558 346,789	44,461,119 798,980 246,728	656,598 236,600	214,312 8,625	1,085	3,198 1,427	3,715,646 1,890,169
t b c 11	A mounts 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 in line 10b, whether or not the business is regularly carried on	962,558 346,789	44,461,119 798,980 246,728	656,598 236,600	214,312 8,625	1,085	3,198 1,427	3,715,646 1,890,169
b c	A mounts 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 in line 10b, whether or not the business is regularly carried on Other income Do not include	46,320,797 962,558 346,789 1,309,347	44,461,119 798,980 246,728 1,045,708	656,598 236,600 893,198	214,312 8,625 222,937	1,083 1,053 2,134	3,198 1,427 4,625	3,715,646 1,890,169 5,605,815
t b c 11	A mounts 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 in line 10b, whether or not the business is regularly carried on	962,558 346,789	44,461,119 798,980 246,728	656,598 236,600	214,312 8,625	1,083 1,053 2,134	3,198 1,427	3,715,646 1,890,169
t b c 11	A mounts 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 in 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 IV) Total support. (Add lines 9, 10c, 11, and 12)	46,320,797 962,558 346,789 1,309,347 1,303,475 48,933,619	44,461,119 798,980 246,728 1,045,708 -33,318 45,473,509	656,598 236,600 893,198 172,112 41,020,941	214,312 8,625 222,937 98,831 8,064,335	1,083 1,053 2,134 240 38,013	3,198 1,427 1,625 0,637	3,715,646 1,890,169 5,605,815 1,781,737 181,504,114
b c c 111	A mounts 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 in 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 IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is	46,320,797 962,558 346,789 1,309,347 1,303,475 48,933,619	44,461,119 798,980 246,728 1,045,708 -33,318 45,473,509	656,598 236,600 893,198 172,112 41,020,941	214,312 8,625 222,937 98,831 8,064,335	1,083 1,053 2,134 240 38,013	3,198 1,427 1,625 0,637	3,715,646 1,890,169 5,605,815 1,781,737 181,504,114 zation,
b c 111 12 13 14	A mounts 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 in 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 IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	46,320,797 962,558 346,789 1,309,347 1,303,475 48,933,619 for the organization	44,461,119 798,980 246,728 1,045,708 -33,318 45,473,509 on's first, second,	656,598 236,600 893,198 172,112 41,020,941	214,312 8,625 222,937 98,831 8,064,335	1,083 1,053 2,134 240 38,013	3,198 1,427 1,625 0,637	3,715,646 1,890,169 5,605,815 1,781,737 181,504,114
b c 111 12 13 14 Se	A mounts 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 in 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 IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	46,320,797 962,558 346,789 1,309,347 1,303,475 48,933,619 for the organization	44,461,119 798,980 246,728 1,045,708 -33,318 45,473,509 on's first, second,	656,598 236,600 893,198 172,112 41,020,941 third, fourth, or f	214,312 8,625 222,937 98,831 8,064,335	1,083 1,053 2,134 240 38,013 501(c)(3)	3,198 1,427 1,625 0,637	3,715,646 1,890,169 5,605,815 1,781,737 181,504,114 zation,
b c 111 12 13 14 See 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 in 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 IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	46,320,797 962,558 346,789 1,309,347 1,303,475 48,933,619 for the organization of the organization of the organization of the second of	44,461,119 798,980 246,728 1,045,708 -33,318 45,473,509 on's first, second, ercentage f) divided by line	656,598 236,600 893,198 172,112 41,020,941 third, fourth, or f	214,312 8,625 222,937 98,831 8,064,335	1,083 1,053 2,134 240 38,013 501(c)(3)	3,198 1,427 1,625 0,637	3,715,646 1,890,169 5,605,815 1,781,737 181,504,114 zation, 95 930 %
b c 111 12 13 14 See 15 16	A mounts 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 in 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 IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here Ection C. Computation of Pub Public support percentage from 201	46,320,797 962,558 346,789 1,309,347 1,303,475 48,933,619 for the organization of the organization of the organization of the second of	44,461,119 798,980 246,728 1,045,708 -33,318 45,473,509 on's first, second, ercentage f) divided by line art III, line 15	656,598 236,600 893,198 172,112 41,020,941 third, fourth, or f	214,312 8,625 222,937 98,831 8,064,335	1,083 1,053 2,134 240 38,013 501(c)(3)	3,198 1,427 1,625 0,637	3,715,646 1,890,169 5,605,815 1,781,737 181,504,114 zation,
b c 111 12 13 14 See 15 16 See	A mounts 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 in 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 IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pub Public support percentage from 20:	1,303,475 48,933,619 for the organization (lic Support Personal Company) (line 8, column (line 8, column (line 8, column (line 8)) 1,2 Schedule A, Personal Column (line 8)	44,461,119 798,980 246,728 1,045,708 -33,318 45,473,509 on's first, second, ercentage f) divided by line art III, line 15 me Percentage	656,598 236,600 893,198 172,112 41,020,941 third, fourth, or f	214,312 8,625 222,937 98,831 8,064,335 Ifth tax year as a	1,083 1,053 2,134 24(38,013 501(c)(3)	3,198 1,427 1,625 0,637	3,715,646 1,890,169 5,605,815 1,781,737 181,504,114 zation, 95 930 % 96 580 %
b c 111 12 13 14 See 15 16 See 17	A mounts 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 in 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 IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pub Public support percentage for 2013 Public support percentage from 2015 ection D. Computation of Inv Investment income percentage for	46,320,797 962,558 346,789 1,309,347 48,933,619 for the organization of the organization of the second of the	44,461,119 798,980 246,728 1,045,708 -33,318 45,473,509 on's first, second, ercentage f) divided by line art III, line 15 me Percentage plumn (f) divided by	236,600 893,198 172,112 41,020,941 third, fourth, or f 13, column (f)) Je by line 13, column	214,312 8,625 222,937 98,831 8,064,335 Ifth tax year as a	1,083 1,053 2,134 240 38,013 501(c)(3) 15 16	3,198 1,427 1,625 0,637	3,715,646 1,890,169 5,605,815 1,781,737 181,504,114 zation, 95 930 % 96 580 % 3 090 %
10a b c 111 12 13 14 See 15 16 See 17 18	A mounts 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 in 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 IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pub Public support percentage from 20:	46,320,797 962,558 346,789 1,309,347 1,303,475 48,933,619 for the organization of the organization o	44,461,119 798,980 246,728 1,045,708 -33,318 45,473,509 on's first, second, ercentage f) divided by line fart III, line 15 me Percentage blumn (f) divided by A, Part III, line 1	41,020,941 third, fourth, or f	214,312 8,625 222,937 98,831 8,064,335 ifth tax year as a	1,083 1,083 1,083 2,134 38,013 501(c)(3) 15 16 17 18	1,427 1,625 1,710 organi:	3,715,646 1,890,169 5,605,815 1,781,737 181,504,114 zation, 95 930 % 96 580 % 3 090 % 2 050 %

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).										
	Facts And Circumstances Test									
Retu	ırn Reference	Explanation								
		Schodulo A / Form 0	000 er 000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493286000724

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

illai Nevellae Selvice					Inspec	
Name of the organization JNITED STATES BOWLING CONG	RESS INC			oloyer identifica 1224922	tion numbe	
	ns Maintaining Donor Adv answered "Yes" to Form 990,		Funds	or Accounts		
	<u> </u>	(a) Donor advised funds		(b) Funds and	other accou	ınts
Total number at end of	year					
Aggregate contribution	ns to (during year)					
Aggregate grants from	(during year)					
Aggregate value at end	d of year					
		rs in writing that the assets held in do anization's exclusive legal control?	nor adv	ısed	┌ Yes	┌ No
-	e purposes and not for the benefit	nor advisors in writing that grant fund t of the donor or donor advisor, or for a			┌ Yes	┌ No
art III Conservatio	n Easements. Complete if t	the organization answered "Yes"	to Forn	n 990, Part I\	/, line 7.	
Preservation of land Protection of natur Preservation of ope	en space		certifie	d historic struc	ture	
easement on the last of	_	qualified conservation contribution in	the lon	ii oi a coliseiva	CIOTI	
				Held at the	End of the	Year
Total number of conse	rvation easements		2a			
Total acreage restrict	ed by conservation easements		2b			
Number of conservation	on easements on a certified histor	ric structure included in (a)	2c			
	on easements included in (c) acqu d in the National Register	ured after 8/17/06, and not on a	2d			
Number of conservation the tax year ►	on easements modified, transferre 	d, released, extinguished, or terminat	ted by th	ne organization	during	
Number of states wher	e property subject to conservation	on easement is located 🗠				
	have a written policy regarding theservation easements it holds?	ne periodic monitoring, inspection, hai	ndling of	violations, and	│ ├─ Yes	┌ No
Staff and volunteer ho	urs devoted to monitoring, inspec	ting, and enforcing conservation ease	ements o	during the year		
A mount of expenses in	ncurred in monitoring, inspecting,	and enforcing conservation easemen	ts durin	g the year		
Does each conservation and section 170(h)(4)) above satisfy the requirements of se	ection 17	70(h)(4)(B)(ı)	☐ Yes	┌ No
balance sheet, and inc		servation easements in its revenue ar footnote to the organization's financia its				
		s of Art, Historical Treasures, es" to Form 990, Part IV, line 8.	, or Ot	her Similar	Assets.	
works of art, historical	treasures, or other similar asset	.6 (ASC 958), not to report in its reve s held for public exhibition, education its financial statements that describ	, or rese	arch in furthera		
works of art, historical		.6 (ASC 958), to report in its revenue s held for public exhibition, education items				lıc
(i) Revenues included	ın Form 990, Part VIII, line 1			► \$		
(ii) Assets included in	Form 990, Part X					
If the organization rec	eived or held works of art, historic	cal treasures, or other similar assets 16 (ASC 958) relating to these item:		. —		
Revenues included in	Form 990, Part VIII, line 1			► \$		
A scats included in Fer	rm 990 Bart V			. ¢		

Part III Organizations Maintaining Collections of Art, His	storical Tr	easu	res, or Othe	er Similar Ass	ets (continue
3 Using the organization's acquisition, accession, and other records, c collection items (check all that apply)			_	_	of its
a	☐ Loan o	or excl	nange program	s	
b Γ Scholarly research e	┌ Other	-			
c Preservation for future generations					
4 Provide a description of the organization's collections and explain ho Part XIII	w they furthe	er the o	rganızatıon's e	xempt purpose ın	1
5 During the year, did the organization solicit or receive donations of a assets to be sold to raise funds rather than to be maintained as part	•				_ Yes
Part IV Escrow and Custodial Arrangements. Complete if	f the organi	ızatıor		<u>'</u>	
Part IV, line 9, or reported an amount on Form 990, P					
Is the organization an agent, trustee, custodian or other intermediary included on Form 990, Part X?		itions d	or other assets		Yes No
b If "Yes," explain the arrangement in Part XIII and complete the follow	wing table			A me	ount
c Beginning balance			1c		June
d Additions during the year			1d		
e Distributions during the year			1e		
f Ending balance			1f		
2a Did the organization include an amount on Form 990, Part X, line 217	7			Г	Yes No
b If "Yes," explain the arrangement in Part XIII Check here if the expl		haan n	rovided in Part		
Part V Endowment Funds. Complete if the organization and					
(a)Current year (b)Prior year				(e)Four years bad
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentage of the current year end balance (III	ne 1g, colum	n (a)) h	neld as		
a Board designated or quasi-endowment ►					
b Permanent endowment ►					
C Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100%					
3a Are there endowment funds not in the possession of the organization	that are held	d and a	dmınıstered fo	r the	v 1
organization by (i) unrelated organizations		_		3a(i	Yes No
(ii) related organizations				3a(ii	
b If "Yes" to 3a(II), are the related organizations listed as required on 9				3b	
4 Describe in Part XIII the intended uses of the organization's endown	nent funds				
Part VI Land, Buildings, and Equipment. Complete if the of 11a. See Form 990, Part X, line 10.	organizatior	n answ	vered 'Yes' to	Form 990, Par	t IV, line
Description of property	(a) Cost or basis (invest		(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book valu
1a Land					
b Buildings			59,09	6 14,127	7 44,9
c Leasehold improvements					
		$\overline{}$			+
d Equipment			11,246,74	<u> </u>	5,723,6
d Equipment			14,284,00	<u> </u>	

Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.	plete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
(a) Description of security or category	(b)Book value	(c) Method of va	
(including name of security)		Cost or end-of-year	market value
(1)Financial derivatives			
(2)Closely-held equity interests (3)Other			
(A) INVESTMENT IN INTERNATIONAL BOWLING	6.012.256		
CAMPUS, LLC	6,912,356	С	
	6,912,356		
Part VIII Investments—Program Related. Con See Form 990, Part X, line 13.	mplete if the organizatior	n answered 'Yes' to Fo	orm 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of va	aluation
		Cost or end-of-year	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	h		
Part IX Other Assets. Complete if the organization	answered 'Yes' to Form 990	, Part IV, line 11d See I	Form 990, Part X, line 15
(a) Descrip	otion		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15			
Part X Other Liabilities. Complete if the organ	nızatıon answered 'Yes' to	o Form 990, Part IV, I	ine 11e or 11f. See
Form 990, Part X, line 25. (a) Description of liability	(b) Book value		
	(D) DOOK value		
Federal income taxes POST-RETIREMENT BENEFIT OBLIGATION	1,281,363		
DEFERRED COMPENSATION	36,094		
BEFERRED COMPENSATION	30,034		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	4 345 455		
Total. (Column (b) must equal form 990, Part X, col (B) line 25)	1,317,457	e organization's financia	L statements that

Par		evenue per Audited Financial Sta ered 'Yes' to Form 990, Part IV, line :		its With Revenue p	er Re	eturn Complete if
1		r support per audited financial statements			1	46,009,142
2	A mounts included on line 1 but	t not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investi	ments	2a	256,240		
b	Donated services and use of fa	cilities	2b			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII)		2d	8,702,529		
e	Add lines 2a through 2d .				2e	8,958,769
3	Subtract line $2e$ from line 1 .				3	37,050,373
4	A mounts included on Form 990), Part VIII, line 12, but not on line 1				
а	Investment expenses not inclu	ided on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)		4b	218,144		
c	Add lines 4a and 4b				4c	218,144
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line	12)		5	37,268,517
Part		cpenses per Audited Financial St		nts With Expenses	per	Return. Complete
_		swered 'Yes' to Form 990, Part IV, line				44.642.500
1	·	audited financial statements			1	44,613,588
2		not on Form 990, Part IX, line 25	1 -	I		
a		cilities	2a		-	
b			2b		-	
с			2c	10.110.550	-	
d	Other (Describe in Part XIII)		2d	10,113,658	1	
e	Add lines 2a through 2d				2e	10,113,658
3					3	34,499,930
4), Part IX, line 25, but not on line 1:	1.	I		
a	·	ided on Form 990, Part VIII, line 7b			-	
b			4b		┨	_
_ C	Add lines 4a and 4b				4c	0
5	<u> </u>	d 4c. (This must equal Form 990, Part I, lir	ne 18)		5	34,499,930
	Supplemental Info		1.4	D 10/1 41 131		
		Part II, lines 3, 5, and 9, Part III, lines 1a lines 2d and 4b, and Part XII, lines 2d and				le anv additional
	mation	,				
	Return Reference	Explanation				
	XI, LINE 2D - OTHER	COST OF MERCHANDISE SOLD INCLUI			731,9	27 REVENUE
	STMENTS	INCLUDED ON PY 990 FOR 7/1/12-12/				
	XI, LINE 4B - OTHER STMENTS	EQUITY LOSS IN INVESTMENT -292,5 ASSISTANCE 449,126	54 MEF	RCHANDISE SALES 61	,572	GRANTS &
PART	XII, LINE 2D - OTHER STMENTS	COST OF MERCHANDISE SOLD INCLUI ASSISTANCE -449,126 MERCHANDIS 7/1/12-12/31/12 9,892,429				

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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Schedule I (Form 990)

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

OMB No 1545-0047

DLN: 93493286000724

Department of the Treasury

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

Name of the organization		ation about Schedule 1 (Tomi 550) and its inst	- 40010115 15 40 <u>4747 47715</u>	11g0 v / 101 111 230 1	Employer identifi	cation number
UNITED STATES BOWLING C	ONGRESS INC					20-1224922	
	nation on Grants					•	
	d to award the grants or grants or granization's procedure to	rassistance?	of grant funds in the U	Jnited States the United States	Complete if the or	ganızatıon answered	∀Yes □
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SUSAN G KOMEN BREAST CANCER FOUNDATION INC 5005 LBJ FREEWAY DALLAS,TX 752446125	75-1835298	501(C)(3)	452,477				BREAST CANCER RESEARCH
(2) THE BOWLERS TO VETERANS LINK 11350 RANDOM HILLS ROAD SUITE 800 FAIRFAX,VA 22030	53-0211351	501(C)(3)	8,428				AID TO VETERANS
(3) INTERNATIONAL BOWLING CAMPUS LLC 621 SIX FLAGS DRIVE ARLINGTON,TX 76011	26-2175073	N/A	26,303				YOUTH BOWLING PROGRAMS
2 Enter total number of sec	tion 501(c)(3) and gov	ernment organizations l	ısted ın the lıne 1 table	j		· >	2

Enter total number of other organizations listed in the line 1 table

(a)Type of grant or assistance

(b) Number of

recipients

(f)Description of non-cash assistance

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

(d)A mount of

non-cash assistance

(e)Method of valuation (book,

FMV, appraisal, other)

(c)A mount of

cash grant

GRANTS AND ASSISTANCE ARE PROVIDED TO PROMOTE THE SPORT OF BOWLING

(1) TEAM USA AWARDS GRANT		20	67,335							
(2) TEAM USA BETTERMENT GRA	NT	17	11,250							
(3) YOUTH TOURNAMENT SCHOLARSHIPS		50	5,000							
(4) TEAM USA PROGRAM GRANT		20	70,149							
Part IV Supplemental In	formati	on. Provide the infor	rmation required in P	art I, line 2, Part III,	column (b), and any other	addıtıonal ınformatıon.				
Return Reference	Explanati	ion								
PART I, LINE 2 USBC HAS A GRANT POLICY AND ALL REQUESTS ARE FORMALLY REVIEWED AND APPROVED PRIOR TO THE ISSUANCE OF FUNDS ALL										

Schedule I (Form 990) 2013

DLN: 93493286000724

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

Employer identification number

UNITED STATES BOWLING CONGRESS INC 20-1224922 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in 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, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ✓ Written employment contract Compensation committee Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4c** Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo

payments not described in lines 5 and 6? If "Yes," describe in Part III

For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was

Any related organization?

section 53 4958-6(c)?

ın Part III

7

If "Yes," to line 6a or 6b, describe in Part III

8

7

Νo

Νo

Νo

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported as deferred	
		(i) Base compensation	incentive reportable compensation compensation		compensation	belletts		in prior Form 990	
	(i) (ii)	279,530 0	10,000	0	10,140 0	0	299,670 0	0 0	
(2)KEVIN TERRY CHIEF REVENUE OFFICER	(i) (ii)	147,685 0	5,000 0	0	0 0	0	152,685 0	0	
(3)PETER TREDWELL MANAGING DIR, MEDIA/MARKET	(i) (ii)	155,279 0	0	0	5,398 0	0	160,677 0	0	

Schedule J (Form 990) 2013

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 Also complete this part for any additional information

Return Reference Explanation

Schedule J (Form 990) 2013

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DLN: 93493286000724

OMB No 1545-0047

2013

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SCHEDULE O

Department of the Treasury
Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization UNITED STATES BOWLING CONGRESS INC

Employer identification number

20-1224922

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS HAD MEMBERS SINCE ITS INCEPTION IN 2004
FORM 990, PART VI, SECTION A, LINE 7A	ASSOCIATION DELEGATES VOTE FOR DIRECTORS AT THE NATIONAL CONVENTION
FORM 990, PART VI, SECTION B, LINE 11	THE CFO AND CONTROLLER REVIEW FORM 990 PRIOR TO SIGNING
FORM 990, PART VI, SECTION B, LINE 12C	OFFICERS, DIRECTORS AND COMMITTEE MEMBERS OF USBC ARE REQUIRED TO SIGN A CONFLICT OF INTER EST DISCLOSURE FORM ON AN ANNUAL BASIS USBC MONITORS THIS BY ENSURING THAT THEY HAVE RECE IVED A SIGNED FORM BY EACH PERSON ANY IDENTIFIED POTENTIAL CONFLICTS OF INTEREST ARE REPORTED TO ADMINISTRATION FOR REVIEW AND APPROPRIATE ACTION
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION OF USBC'S CEO, EXECUTIVE DIRECTOR AND OTHER TOP MANAGEMENT OFFICALS IS DE TERMINED BY THE BOARD COMPENSATION COMMITTEE ALL OTHER COMPENSATION IS DIRECTED BY THE EX ECUTIVE DIRECTOR
FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION MAKES ITS 990 AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AND ON THEIR WEBSITE
FORM 990, PART XI, LINE 9	CHANGE IN POSTRETIREMENT BENEFIT OBLIGATION 157,012
FORM 990, PART XII, LINE 2C	THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT OR SELECTION PROCESS FROM THE PRIOR YEAR

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

DLN: 93493286000724

2013

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2013

Employer identification number

20-1224922

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

UNITED STATES BOWLING CONGRESS INC

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.
 ★ See separate instructions.

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

▶ Information about Schedule R (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

(b) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (c) (g) Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Direct controlling Primary activity Section 512(b) or foreign country) (if section 501(c)(3)) (13) controlled entity entity? Yes No (1) SMART BOWLING SCHOLARSHIP FUNDING CORPORATION LINE 7 SCHOLARSHIP FUNDING TX 501(C)(3) 621 SIX FLAGS DRIVE N/A ARLINGTON, TX 76011 27-2358041

Cat No 50135Y

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominan income(relate unrelated, excluded fro tax under sections 512 514)	d, income n	(g) Share of end of-year assets	(t - Disproj alloca	prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percentage ownership
ITERNATIONAL BOWLING CAMPUS		REAL ESTATE	TX	N/A	RELATED	-125,917	6,912,356	Yes	No No		Yes	No No	50 000 %
IX FLAGS DRIVE GTON, TX 76011 75073						,	5,535,555						
Identification of Related Orgaline 34 because it had one or mo	anizations Taxal re related organız	ole as a Cor ations treate	porati das a c	on or Trus orporation	st Complet or trust du	e if the orga	ınızatıon aı year.	nswere	ed "Ye	s" on Form	1 990	, Part	t IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or fore country)	ıgn	(d) Direct con entit	trolling Type y (C	of entity Share		(g) are of end of-year assets		(h) Percentage ownership	(b	(i) tion 512 o)(13) ntrolled ntity?	
											Ye	es	No

					Yes	No					
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	elated organizations lis	sted in Parts II-IV?		\Box							
	crated organizations in	occuminants II IV		1a		No					
Sincy grants, or capital continuation to related organization(s)											
Sity graits, or capital contribution for related organization(c)											
taran da antara da a											
Dividends from related organization(s)				1f		No					
				1g		No					
				1h		No					
				1i		No					
k Lease of facilities, equipment, or other assets from related organization(s)											
, , , , , , , , , , , , , , , , , , , ,											
m Performance of services or membership or fundraising solicitations by related organization(s)											
Sharing of paid employees with related organization(s)				10	Yes						
Reimbursement paid to related organization(s) for expenses				1 p		No					
Reimbursement paid by related organization(s) for expenses				1q	Yes						
O ther transfer of cash or property to related organization(s)				1r		No					
Other transfer of cash or property from related organization(s)				1s		No					
	T										
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved		ount II	nvolved						
MART BOWLING SCHOLARSHIP FUNDING CORPORATION	L	112,144	CASH								
	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Gift, grant, or capital contribution to related organization(s) Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s) Sale of assets to related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s) Reimbursement paid to related organization(s) for expenses Reimbursement paid to related organization(s) for expenses Other transfer of cash or property to related organization(s) If the answer to any of the above is "Yes," see the instructions for information on who must complete (a) Name of related organization	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Gift, grant, or capital contribution to related organization(s) Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s) Sale of assets to related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s) Reimbursement paid to related organization(s) for expenses Reimbursement paid to related organization(s) for expenses Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including companization (s) Transaction type (a-s)	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Gift, grant, or capital contribution to related organization(s) Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Dividends from related organization(s) Sale of assets to related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s) Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships (a) Name of related organization (b) Transaction Transaction Type (a-s) Amount involved	Gift, grant, or capital contribution from related organization(s) Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees to or for related organization(s) Dividends from related organization(s) Dividends from related organization(s) Purchase of assets to related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations for related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Sharing of paid employees with related organization(s) Sharing of paid employees with related organization(s) Reimbursement paid to related organization(s) for expenses Reimbursement paid to related organization(s) for expenses Other transfer of cash or property from related organization(s) Other transfer of cash or property from related organization(s) Tinnsaction from the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds (c) (d) Method of determining amelyspe (as) (for property from the paid of the determining amelyspe (as) (for property from the paid of the determining amelyspe (as) (for property from the paid of the determining amelyspe (as) (for property from the paid of the determining amelyspe (as) (for property from the paid of determining amelyspe (as) (for property from the paid of determining amelyspe (as) (for property from the paid of determining amelyspe (as) (for property from the paid of determining amelyspe (as) (for property from the paid of determining amelyspe (as) (for property from the paid of determining amelyspe (as) (for property from the paid of determining amelyspe (as) (for property from the paid of determining amelyspe (as) (for 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Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

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 Legal domicile Predominant domicile Income (c) Legal domicile Predominant income Share of total The prodominate allocations? Share of total The prodominate allocations? The prodominate allocations allocations are prodominate allocations are prodominate allocations. The prodominate allocation are prodominate allocations are prodominated allocations are prodominated allocations are prodominated all																	
(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-	section total section solutions total section		organizations?		(h) Disproprtiona allocations	(h) Disproprtionate allocations?						(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No					
									_		1	1					
			I		1				-	1		•					

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013