1 Olympic Plaza
Colorado Springs, CO
80909-5780

usaswimming.org

The Form 990 is the annual information return filed by nonprofit organizations with the Internal Revenue Service (IRS). In addition to supporting a nonprofit's tax-exempt status, organizations use the Form 990 to share information about their programs and mission with the public. Most tax-exempt organizations must file a Form 990, including USA Swimming, Inc. and USA Swimming Foundation, Inc., under Section 501(c)(3). The Form 990 is due in the fifth month after the completion of the organization's fiscal year, with the option of a single six-month extension. An independent tax firm prepares the Form 990 from the audited financial statements and audited general ledgers.

The Form 990 is meaningful and valuable to our organizations for a variety of reasons. The Form 990 does the following:

- Provides financial information to accompany our annual independent audits, including statements of revenue and expenses, beginning and ending balance sheets, and other statements to support responsible financial stewardship of members' and donors' investments in the organizations.
- Illustrates to the public and the IRS that the organizations continue to serve the mission for which the IRS granted their tax-exempt status, by reporting their activities and accomplishments.
- Demonstrates accountability and transparency by reporting on board compensation and other indicators of independent governance as defined by the IRS.

The Form 990 is separate from the organization's annual audit. An independent external audit firm annually completes an independent audit of both USA Swimming and the USA Swimming Foundation. The audit follows generally accepted auditing standards (GAAS) and generally accepted accounting principles (GAAP). These are the accounting standards and rules by which organizations record and report their financial activities. GAAP audits are independent examinations of a company's financial statements and accounting records, to ensure compliance with GAAP performed by an independent audit firm. The yearly audit gives an opinion that concludes whether the entity's financial statements are fairly presented in all material respects in accordance with GAAP and can be relied upon. Both the USA Swimming and the USA Swimming Foundation 2025 audits received another consecutive year of clean, unqualified opinions.

Although the annual audit and the Form 990 use the same financials and balances, the required IRS tax code for the Form 990 and GAAP have different reporting requirements. A material difference between GAAP and IRS tax code is the treatment of donated services and the use of facilities. For tax reporting purposes, donations of incomplete gifts and donations of time are not recognized as charitable deductions because there is no actual asset transferred. Some examples related to our organizations include the donated time of USA Swimming employees working on USA Swimming Foundation programs.

GAAP requires that an organization report its supporting or related entities on a consolidated basis, whereas the tax code requires a separate Form 990 tax return for each applicable nonprofit entity. Thus, GAAP treats the USA Swimming Foundation as a supporting or related entity to USA Swimming, which is why the USA Swimming audit is reported on a consolidated basis with the USA Swimming Foundation, whereas both USA Swimming and the USA Swimming Foundation each file their own Form 990.
Please find some comparative highlights between the Form 990 (IRS tax code) and Audit (GAAP) below:

- GAAP and the tax code use the same audited financials. This is most clearly shown by comparing the total net asset balance from both the tax return (found in "Form 990 Part I Summary") and the audit (found in the "Consolidating Statement of Activities and Changes in Net Assets" on the consolidated audit and the "Statement of Financial Position" for the Foundation standalone audit).
- Form 990 Part I, Part VIII, and Schedule D Part XI all provide reconciliations of revenue. 2025 total revenue per the tax return was $42,517,593 compared to total revenue per the audit of $41,214,376. The reconciliation of $1,303,217 between the tax return and audit is shown in Schedule D, Part XI.
- Form 990 Part I, Part IX, and Schedule D Part XII all provide reconciliations of expenses. The 2025 total expense per the tax return was $40,756,760 compared to the total expense per the audit of $39,937,597. The $819,163 reconciliation between the tax return and audit is shown in Part XII Schedule D.
- In Schedule D, Part XII, Line 4b,the expense reconciliation between the audited financials and tax return of $739,105 offset by Part XI, Line 4b, is attributed to the salary and benefits of Foundation staff paid out from the USA Swimming entity and reimbursed by Foundation.
- In Schedule D, Part XI, Line 2a, the revenue reconciliation between the audited financials and tax return backs out $484,054 of unrealized investment loss. The tax code does not recognize any unrealized investment income/loss (gain/loss) until it's settled (realized). Page 3 of the PDF, Form 990, Part I Line 10 shows the actual transactional gain of $4,714,655, but not the unrealized gain/loss. The breakdown of that amount is shown in Part VIII, Line 3 and Line 7d.
- Another less material difference between GAAP and tax code reporting for our organizations is the treatment of donated services and the use of facilities. For tax reporting purposes, donations of incomplete gifts and donations of time are not recognized as charitable deductions, because there's no actual asset transferred. A couple of these examples, as they relate to our organizations, include the donated time of USA Swimming employees working on USA Swimming Foundation programs, as well as service-related VIK.
- GAAP requires supporting/related entities to be reported on a consolidated basis, whereas the tax code requires a separate Form 990 tax return for each applicable not-for-profit entity. Thus, GAAP treats USA Swimming Foundation as a supporting/related entity to USA Swimming which is why the USA Swimming audit is reported on a consolidated basis with USA Swimming Foundation (note the audit does also include non-consolidated support schedules) whereas both USA Swimming and USA Swimming Foundation each file their own tax return.
- The main Form 990, Part VII, Section A reports all compensation for Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. The amounts include reportable compensation from the organization, regardless of whether it was in relation to a Board Member's role as a Board Member.

PUBLIC DISCLOSURE COPY

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2025

Open to Public Inspection

A For the 2025 calendar year, or tax year beginning **and ending**

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ termin-ated
- ☐ Amended return
- ☐ Applica-tion pending

C Name of organization
USA SWIMMING, INC.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
1 OLYMPIC PLAZA

City or town, state or province, country, and ZIP or foreign postal code
COLORADO SPRINGS, CO 80909

F Name and address of principal officer: KEVIN RING
1 OLYMPIC PLAZA, COLORADO SPRINGS, CO 80909

D Employer identification number
20-4264282

E Telephone number
(719)866-4578

G Gross receipts $ 74,896,009.

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions

H(c) Group exemption number 5367

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.USASWIMMING.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 2005 **M** State of legal domicile: CO

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: NATIONAL GOVERNING BODY FOR THE SPORT OF SWIMMING. WE ADMINISTER (CONTINUED ON SCHEDULE O)

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14
5	Total number of individuals employed in calendar year 2025 (Part V, line 2a)	5	99
6	Total number of volunteers (estimate if necessary)	6	19000
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	971,000.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	7,706,715.	6,885,585.
9	Program service revenue (Part VIII, line 2g)	36,553,651.	30,500,476.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,168,708.	4,714,655.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	149,982.	416,877.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	47,579,056.	42,517,593.
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,032,393.	4,823,780.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	14,006,181.	13,557,897.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) 290,000.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	24,841,477.	22,375,083.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	43,880,051.	40,756,760.
19	Revenue less expenses. Subtract line 18 from line 12	3,699,005.	1,760,833.

		Beginning of Current Year	End of Year
Net Assets or Fund Balances			
20	Total assets (Part X, line 16)	50,715,376.	51,677,760.
21	Total liabilities (Part X, line 26)	24,059,884.	23,745,489.
22	Net assets or fund balances. Subtract line 21 from line 20	26,655,492.	27,932,271.

Part II Signature Block

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

Sign Here

Signature of officer — Date

KEVIN RING, CEO
Type or print name and title

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
DOREEN MERZ	DOREEN MERZ	11/03/26	☐	P00841439

Firm's name SORREN, INC. — Firm's EIN 93-4792291

Firm's address 90 S CASCADE AVE SUITE 700
COLORADO SPRINGS, CO 80903 — Phone no. (719) 630-1186

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
USA SWIMMING PROVIDES PROGRAMS AND SERVICES FOR OUR MEMBERS,SUPPORTERS, AFFILIATES, AND THE INTERESTED PUBLIC. WE VALUE THESE MEMBERS OF THE SWIMMING COMMUNITY, AND THE STAFF AND VOLUNTEERS WHO SERVE THEM.

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

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

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

4a (Code:) (Expenses $ 9,074,422. including grants of $) (Revenue $ 5,787,443.)
COMMERCIAL:

BUSINESS INTELLIGENCE AND DIGITAL PLATFORMS:
IN 2025, THE USA SWIMMING NETWORK SUSTAINED ITS RAPID GROWTH TRAJECTORY, DELIVERING ANOTHER YEAR OF TRIPLE-DIGIT INCREASES ACROSS DOWNLOADS, VIEWS, AND OVERALL ENGAGEMENT. CONTINUED INVESTMENT IN CONTENT STRATEGY AND PLATFORM OPTIMIZATION FURTHER STRENGTHENED THE NETWORK'S POSITION AS A CENTRAL HUB FOR THE SPORT. A KEY MILESTONE INCLUDED THE EXPANSION OF THE USA SWIMMING ARCHIVE, HIGHLIGHTED BY THE ADDITION OF OLYMPIC TRIALS CONTENT ALONGSIDE HUNDREDS OF NEWLY DIGITIZED ARCHIVAL RACE CLIPS, ENHANCING HISTORICAL DEPTH AND FAN ACCESSIBILITY.(CONTINUED ON SCH O)

4b (Code:) (Expenses $ 10,007,797. including grants of $ 4,539,164.) (Revenue $ 18,804,991.)
SPORT DEVELOPMENT:
IN 2025, SPORT DEVELOPMENT AGAIN INCREASED THE SCOPE OF COMMUNITY IMPACT AND OPPORTUNITIES IN THE SPORT BY PROVIDING COMMUNITY IMPACT GRANTS TO THIRTY USA SWIMMING CLUBS ACROSS THE COUNTRY TO EXPAND ACCESS TO COMPETITIVE SWIMMING PROGRAMS IN COMMUNITIES THAT HAVE TRADITIONALLY LACKED ACCESS. IN ADDITION, WE HAVE STRENGTHENED OUR COMMUNITY SWIM TEAM PROGRAM PARTNERSHIPS WITH LOS ANGELES AND CHICAGO. THE LA TEAM IN ITS SECOND YEAR HAS OVER 850 CHILDREN ON THE TEAM UP FROM 700 IN THE PREVIOUS YEAR, AND CHICAGO HAS GROWN TO 1850 ATHLETES FROM 1700 THE PREVIOUS MEMBERSHIP YEAR.

USA SWIMMING LAUNCHED THE NEW USA SWIMMING (CONTINUED ON SCH O)

4c (Code:) (Expenses $ 10,358,388. including grants of $ 284,616.) (Revenue $ 5,353,919.)
NATIONAL TEAM:
IN 2025, 139 ATHLETES REPRESENTED USA SWIMMING ACROSS 3 INTERNATIONAL COMPETITIONS:
WORLD AQUATICS CHAMPIONSHIPS: 9 GOLD, 11 SILVER, 9 BRONZE FOR A TOTAL OF 29 MEDALS.
WORLD AQUATICS JUNIOR CHAMPIONSHIPS: 10 GOLD, 6 SILVER, 6 BRONZE FOR A TOTAL OF 22 MEDALS.
WORLD UNIVERSITY GAMES: 27 GOLD, 12 SILVER, 11 BRONZE FOR A TOTAL OF 50 MEDALS.
USA SWIMMING WON BOTH THE GOLD MEDAL COUNT AND TOTAL MEDAL COUNT AT ALL THREE COMPETITIONS, INCLUDING SETTING WORLD UNIVERSITY GAMES RECORD FOR GOLD AND TOTAL MEDALS

4d Other program services (Describe on Schedule O.)
(Expenses $ 3,909,086. including grants of $) (Revenue $)

4e Total program service expenses 33,349,693.

SEE SCHEDULE O FOR CONTINUATION(S)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	X	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response 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	374		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c			

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return **2a** 99			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	**2b**	X	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	**3a**	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*	**3b**	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	**4a**		X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	**5a**		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	**6a**		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	**7a**		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**		X
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	**8**		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	**9b**		
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 **10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities **10b**			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders **11a**			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year **12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state? **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 **13b**			
c	Enter the amount of reserves on hand **13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	**15**		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	**16**		X
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	**17**		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	14		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6		X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	X	

Section C. Disclosure

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

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

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

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records

THE ORGANIZATION - (719)866-4578

1 OLYMPIC PLAZA, COLORADO SPRINGS, CO 80909

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

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TIMOTHY HINCHEY	0.00									
FORMER PRESIDENT & CEO							X	400,000.	0.	0.
(2) MICHELLE STEINFELD	40.00									
SECRETARY & GENERAL COUNSEL				X				347,796.	0.	45,582.
(3) JACOB GROSSER	40.00									
CHIEF OPERATING OFFICER				X				314,483.	0.	62,402.
(4) JOEL SHINOFIELD	40.00									
SPORT DEVELOPMENT						X		311,967.	0.	64,094.
(5) GREGORY MEEHAN	40.00									
NATIONAL TEAM (FROM 04/2025)					X			339,836.	0.	21,018.
(6) SHANA FERGUSON	35.00									
INTERIM CEO& COO (TO 04/2025)	5.00			X				253,145.	0.	20,052.
(7) ELAINE CALIP	40.00									
EXECUTIVE DIRECTOR, FOUNDATION	40.00				X			214,034.	0.	46,274.
(8) PATRICK MURPHY	40.00									
TECHNOLOGY						X		207,716.	0.	42,420.
(9) ERIC SKUFCA	35.00									
CFO (TO 07/2025)	5.00			X				209,386.	0.	40,548.
(10) MARIEJO TRUEX	40.00									
SPORT DEVELOPMENT (TO 08/2025)						X		217,486.	0.	27,732.
(11) MATTHEW LUPTON	40.00									
CREATIVE & PRODUCTIONS						X		171,282.	0.	48,885.
(12) BRENDAN HANSEN	40.00									
NATIONAL JUNIOR TEAM						X		169,637.	0.	47,237.
(13) KEVIN RING	35.00									
PRESIDENT & CEO (FROM 09/2025)	5.00			X				188,114.	0.	8,668.
(14) CORY HILLIARD	35.00									
CFO (FROM 12/2025)	5.00			X				33,077.	0.	138.
(15) ROBERT VINCENT, DIRECTOR	35.00									
(TO 3/2025),INTERIM CEO(TO 09/2025)	5.00	X		X				10,212.	0.	11,534.
(16) WILLIAM DOUGHTY	4.00									
DIRECTOR (FROM 9/2025)		X						11,979.	0.	0.
(17) IRA KLEIN	4.00									
DIRECTOR (TO 09/2025)		X						600.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(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/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) BRENT LANG BOARD CHAIR (FROM 9/2025)	16.00	X		X				0.	0.	0.
(19) KATHLEEN PRINDLE DIRECTOR	4.00	X						0.	0.	0.
(20) KENNETH CHUNG DIRECTOR	4.00	X						0.	0.	0.
(21) CHRIS BREARTON DIRECTOR	4.00	X						0.	0.	0.
(22) MAYA ANDREWS DIRECTOR	4.00	X						0.	0.	0.
(23) SABIR MUHAMMAD DIRECTOR	4.00	X						0.	0.	0.
(24) KATIE MEILI DIRECTOR	4.00	X						0.	0.	0.
(25) KATHLEEN FISH DIRECTOR	4.00	X						0.	0.	0.
(26) NIC FINK DIRECTOR	4.00	X						0.	0.	0.
1b Subtotal								3,400,750.	0.	486,584.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								3,400,750.	0.	486,584.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 36

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
DODD TECHNOLOGIES, 720 WEST PIONEER TRACE SUITE 200, PENDLETON, IN 46064	EVENT PRODUCTION SERVICES	1,331,479.
ECLIPSE PRODUCTIONS 605 MANNS HARBOR DR, APOLLO BEACH, FL 33572	TV PRODUCTION	1,190,104.
SKADDEN, ARPS, SLATE, MEAGHER & FLOM, LLP P.O. BOX 1764, WHITE PLAINS, NY 10602	LEGAL SERVICES	621,323.
TAKE IT LIVE MEDIA, 26752 OAKE AVE SUITE L, CANYON COUNTRY, CA 91315	VIDEO PRODUCTION AND STREAMING	383,990.
CREATIVE ARTISTS AGENCY, 2000 AVENUE OF THE STARS, LOS ANGELES, CA 90067	EMPLOYMENT SEARCH SERVICES	176,860.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 13

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JACK BAUERLE DIRECTOR (FROM 9/2025)	4.00	X						0.	0.	0.
(28) KATE LUNDSTEN DIRECTOR (FROM 9/2025)	4.00	X						0.	0.	0.
(29) ANDREW SELISKAR DIRECTOR (FROM 9/2025)	4.00	X						0.	0.	0.
(30) FRANK BUSCH DIRECTOR (TO 09/2025)	4.00	X						0.	0.	0.
(31) CLARK HAMMOND DIRECTOR (TO 09/2025)	4.00	X						0.	0.	0.
(32) NATALIE HALL DIRECTOR (TO 11/2025)	4.00	X						0.	0.	0.
(33) CAITLIN LEVERENZ SMITH VICE-CHAIR	4.00	X		X				0.	0.	0.
(34) KATY ARRIS-WILSON VICE-CHAIR FISCAL OVERSIGHT	4.00	X		X				0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d	1,531,666.			
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	5,353,919.			
	g	Noncash contributions included in lines 1a-1f	1g	$			
	h	**Total.** Add lines 1a-1f			6,885,585.		
Program Service Revenue			Business Code				
	2a	MEMBERSHIP INCOME	900099	24,079,151.	24079151.		
	b	SPONSORS, SUPPLIES & LICENSEE	900099	3,255,463.	3,255,463.		
	c	EVENTS	711300	1,334,862.	1,334,862.		
	d	SPONSORS-ADVERTISING	541800	971,000.		971,000.	
	e	RELATED AFFILIATE MANAGEMENT FEE	531120	860,000.	860,000.		
	f	All other program service revenue					
	g	**Total.** Add lines 2a-2f		30,500,476.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,373,065.			1373065.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties		226,118.	226,118.		
			(i) Real	(ii) Personal			
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	c	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
			(i) Securities	(ii) Other			
	7a	Gross amount from sales of assets other than inventory 7a	35,720,006.				
	b	Less: cost or other basis and sales expenses 7b	32,378,066.	350.			
	c	Gain or (loss) 7c	3,341,940.	-350.			
	d	Net gain or (loss)		3,341,590.			3341590.
	8a	Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	c	Net income or (loss) from fundraising events					
	9a	Gross income from gaming activities. See Part IV, line 19 9a					
	b	Less: direct expenses 9b					
	c	Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less returns and allowances 10a					
	b	Less: cost of goods sold 10b					
	c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue			Business Code				
	11a	OTHER INCOME	900099	190,759.	190,759.		
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a-11d		190,759.			
	12	**Total revenue.** See instructions		42,517,593.	29946353.	971,000.	4714655.

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 X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	824,684.	824,684.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,999,096.	3,999,096.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,178,878.	1,089,439.	1,089,439.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	8,711,509.	6,278,792.	2,432,717.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	648,618.	470,072.	178,546.	
9 Other employee benefits	1,241,129.	879,243.	361,886.	
10 Payroll taxes	777,763.	544,763.	233,000.	
11 Fees for services (nonemployees):				
a Management				
b Legal	855,329.	60,236.	795,093.	
c Accounting	44,830.		44,830.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	80,058.		80,058.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	2,823,697.	2,040,179.	493,518.	290,000.
12 Advertising and promotion				
13 Office expenses	1,546,179.	1,498,591.	47,588.	
14 Information technology	1,148,746.	638,125.	510,621.	
15 Royalties				
16 Occupancy	640,728.	520,013.	120,715.	
17 Travel	4,282,626.	4,026,321.	256,305.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,324,217.	1,280,560.	43,657.	
23 Insurance	4,016,302.	3,701,066.	315,236.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a GEAR, EQUIP, APPAREL, S	2,549,765.	2,545,907.	3,858.	
b TV VIDEO PRODUCTION	1,577,965.	1,577,965.		
c DUES, FEES & SUBSCRIPTI	1,022,630.	917,310.	105,320.	
d AWARDS & PROTOCOL GIFTS	458,216.	453,536.	4,680.	
e All other expenses	3,795.	3,795.		
25 **Total functional expenses.** Add lines 1 through 24e	40,756,760.	33,349,693.	7,117,067.	290,000.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	9,369,780.	1	8,457,296.
	2	Savings and temporary cash investments	8,537.	2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	3,949,647.	4	3,362,165.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	5,231,703.	9	5,010,254.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 9,501,955.			
	b	Less: accumulated depreciation — 10b: 7,537,336.	2,546,680.	10c	1,964,619.
	11	Investments - publicly traded securities	29,430,169.	11	32,743,426.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	178,860.	15	140,000.
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	50,715,376.	16	51,677,760.
Liabilities	17	Accounts payable and accrued expenses	5,683,005.	17	5,401,522.
	18	Grants payable		18	
	19	Deferred revenue	17,797,745.	19	17,845,365.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	579,134.	25	498,602.
	26	**Total liabilities.** Add lines 17 through 25	24,059,884.	26	23,745,489.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☒ **and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	26,655,492.	27	27,932,271.
	28	Net assets with donor restrictions		28	
		Organizations that do not follow FASB ASC 958, check here ☐ **and complete lines 29 through 33.**			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	26,655,492.	32	27,932,271.
	33	Total liabilities and net assets/fund balances	50,715,376.	33	51,677,760.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	42,517,593.
2	Total expenses (must equal Part IX, column (A), line 25)	2	40,756,760.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,760,833.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	26,655,492.
5	Net unrealized gains (losses) on investments	5	-484,054.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	27,932,271.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2025

Open to Public Inspection

Name of the organization
USA SWIMMING, INC.

Employer identification number
20-4264282

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
10 ☒ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations .....
g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						

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

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2025 (line 6, column (f), divided by line 11, column (f)) 14 %

15 Public support percentage from 2024 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test - 2025.** 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 - 2024.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10% -facts-and-circumstances test - 2025.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b **10% -facts-and-circumstances test - 2024.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9735092.	8012805.	8962147.	7706715.	6885585.	41302344.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	24223753.	26360773.	27442395.	35469947.	29946353.	143443221
3 Gross receipts from activities that are not an unrelated trade or business under section 513	125,000.					125,000.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	34083845.	34373578.	36404542.	43176662.	36831938.	184870565
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	1,860.	12,000.	4,500.	11,190.	1,400.	30,950.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year	540,563.	137,215.	544,108.	5144673.	1740295.	8106854.
c Add lines 7a and 7b	542,423.	149,215.	548,608.	5155863.	1741695.	8137804.
8 **Public support.** (Subtract line 7c from line 6.)						176732761

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) 2025	(f) Total
9 Amounts from line 6	34083845.	34373578.	36404542.	43176662.	36831938.	184870565
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1280732.	1330646.	1153431.	1090067.	1373065.	6227941.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1280732.	1330646.	1153431.	1090067.	1373065.	6227941.
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on				73,383.		73,383.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	35364577.	35704224.	37557973.	44340112.	38205003.	191171889

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2025 (line 8, column (f), divided by line 13, column (f))	15	92.45 %
16 Public support percentage from 2024 Schedule A, Part III, line 15	16	93.16 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2025** (line 10c, column (f), divided by line 13, column (f))	17	3.26 %
18 Investment income percentage from **2024** Schedule A, Part III, line 17	18	3.15 %

19a **33 1/3% support tests - 2025.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☒

b **33 1/3% support tests - 2024.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	**11a**		
b	A family member of a person described on line 11a above?	**11b**		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* **Part VI.**	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in* **Part VI** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* **Part VI** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally Integrated Supporting Organizations

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

- **a** ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- **c** ☐ The organization supported a governmental supported organization. *Describe in* **Part VI** *how you supported a governmental supported organization (see instructions).*

			Yes	No
2	Activities Test. **Answer lines 2a and 2b below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of its supported organization(s)? *If "Yes," then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* **Part VI** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. **Answer lines 3a, 3b, and 3c below.**			
a	Are the organization and its supported organization(s) part of an integrated system (for example, a hospital system)? *If "Yes," provide details in* **Part VI.**	**3a**		
b	Did the organization direct the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*	**3b**		
c	Did the organization have the power to regularly appoint or elect (and remove) a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in* **Part VI.**	**3c**		

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

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	**1**		
2 Recoveries of prior-year distributions	**2**		
3 Other gross income (see instructions)	**3**		
4 Add lines 1 through 3.	**4**		
5 Depreciation and depletion	**5**		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	**6**		
7 Other expenses (see instructions)	**7**		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	**8**		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	**1a**		
b Average monthly cash balances	**1b**		
c Fair market value of other non-exempt-use assets	**1c**		
d **Total** (add lines 1a, 1b, and 1c)	**1d**		
e **Discount** claimed for blockage or other factors (*explain in detail in* **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	**2**		
3 Subtract line 2 from line 1d.	**3**		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	**4**		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6 Multiply line 5 by 0.035.	**6**		
7 Recoveries of prior-year distributions	**7**		
8 **Minimum Asset Amount** (add line 7 to line 6)	**8**		

Section C - Distributable Amount		Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	**1**	
2 Enter 0.85 of line 1.	**2**	
3 Minimum asset amount for prior year (from Section B, line 8, column A)	**3**	
4 Enter greater of line 2 or line 3.	**4**	
5 Income tax imposed in prior year	**5**	
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	**6**	

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

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

Section D - Distributions		**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - *provide details in* **Part VI**)	5	
6 **Total annual distributions.** Add lines 1 through 5.	6	
7 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* **Part VI**). See instructions.	7	
8 Distributable amount for 2025 from Section C, line 6	8	
9 Line 7 amount divided by line 8 amount	9	

Section E - Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2025**	**(iii) Distributable Amount for 2025**
1 Distributable amount for 2025 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2025 (reasonable cause required - *explain in* **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2025			
a From 2020			
b From 2021			
c From 2022			
d From 2023			
e From 2024			
f **Total** of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2025 distributable amount			
i Carryover from 2020 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2025 from Section D, line 6: $			
a Applied to underdistributions of prior years			
b Applied to 2025 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2025, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in* **Part VI.** See instructions.			
6 Remaining underdistributions for 2025. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* **Part VI**. See instructions.			
7 **Excess distributions carryover to 2026.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2021			
b Excess from 2022			
c Excess from 2023			
d Excess from 2024			
e Excess from 2025			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, 3b, and 3c; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5 and 7; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

USA SWIMMING, INC.

Employer identification number

20-4264282

Organization type (check one):

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

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

General Rule

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

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

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

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

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

Name of organization: USA SWIMMING, INC.

Employer identification number: 20-4264282

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 1,531,666.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2		$ 5,353,919.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization

USA SWIMMING, INC.

Employer identification number

20-4264282

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

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

Name of organization

USA SWIMMING, INC.

Employer identification number

20-4264282

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

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

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

(e) Transfer of gift

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

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

(e) Transfer of gift

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

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

(e) Transfer of gift

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

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

(e) Transfer of gift

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

SCHEDULE D
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
USA SWIMMING, INC.

Employer identification number
20-4264282

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

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

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

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

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

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

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included on line 2a	2c	
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d	

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

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 $ _____

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

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

a Revenue included on Form 990, Part VIII, line 1 $ _____

b Assets included in Form 990, Part X $ _____

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

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

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

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

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

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	20,214,622.	18,760,530.	16,455,539.	19,927,985.	17,295,618.
b Contributions	74,807.		330,000.	297,500.	120,000.
c Net investment earnings, gains, and losses	3,126,181.	2,529,717.	2,746,241.	-3,008,946.	1,723,010.
d Grants or scholarships	778,125.	1,075,625.	771,250.	761,000.	728,750.
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	22,637,485.	20,214,622.	18,760,530.	16,455,539.	18,409,878.

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

a Board designated or quasi-endowment 63.3100 %
b Permanent endowment 26.8700 %
c Term endowment 9.8200 %

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

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

	Yes	No
(i) Unrelated organizations? 3a(i)		X
(ii) Related organizations? 3a(ii)	X	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b	X	

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

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		1,838,247.	1,417,914.	420,333.
c Leasehold improvements				
d Equipment		863,349.	276,905.	586,444.
e Other		6,800,359.	5,842,517.	957,842.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				1,964,619.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) INSURANCE LOSS RESERVE	480,754.
(3) DUE TO RELATED ORGANIZATION	17,848.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	498,602.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	41,214,376.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-484,054.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	-484,054.
3	Subtract line 2e from line 1			3	41,698,430.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	80,058.		
b	Other (Describe in Part XIII.)	4b	739,105.		
c	Add lines 4a and 4b			4c	819,163.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	42,517,593.

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	39,937,597.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	39,937,597.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	80,058.		
b	Other (Describe in Part XIII.)	4b	739,105.		
c	Add lines 4a and 4b			4c	819,163.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	40,756,760.

Part XIII Supplemental Information

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

PART V, LINE 4:
USA SWIMMING FOUNDATION, A RELATED ORGANIZATION, HOLDS ENDOWMENT FUNDS FOR THE BENEFIT OF USA SWIMMING. ENDOWMENT DISTRIBUTIONS PROVIDE FUNDING FOR GRANTS THAT BENEFIT USA SWIMMING ATHLETES AND COACHES. AN ENDOWMENT ALSO PROVIDES FUNDING FOR LEARN TO SWIM PROGRAMS.

PART X, LINE 2:
USA SWIMMING AND THE FOUNDATION ARE EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. IN ADDITION, THESE ENTITIES QUALIFY FOR THE CHARITABLE CONTRIBUTION DEDUCTION AND HAVE BEEN CLASSIFIED AS ORGANIZATIONS THAT ARE NOT PRIVATE FOUNDATIONS. THE ORGANIZATION BELIEVES THAT IT DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE CONSOLIDATED FINANCIAL STATEMENTS.

PART XI, LINE 4B - OTHER ADJUSTMENTS:
SALARY AND BENEFIT EXPENSES NETTED IN AUDIT REVENUE - CONTRIBUTION 739,105.

PART XII, LINE 4B - OTHER ADJUSTMENTS:
SALARY AND BENEFIT EXPENSES NETTED IN AUDIT REVENUE - CONTRIBUTION 739,105.

Part XIII Supplemental Information *(continued)*

532055 04-01-25

SCHEDULE F (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

USA SWIMMING, INC.

Employer identification number

20-4264282

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in the region	**(d)** Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in the region	**(f)** Total expenditures for and investments in the region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	TRAVEL EXPENSES	400,195.
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	TRAVEL EXPENSES	617,054.
3 a Subtotal	0	0			1,017,249.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			1,017,249.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule F (Form 990) (Rev. 12-2024)**

LHA 532071 04-01-25

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 **(a)** Name of organization	**(b)** IRS code section and EIN (if applicable)	**(c)** Region	**(d)** Purpose of grant	**(e)** Amount of cash grant	**(f)** Manner of cash disbursement	**(g)** Amount of noncash assistance	**(h)** Description of noncash assistance	**(i)** Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter .....

3 Enter total number of other organizations or entities .....

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of noncash assistance	**(g)** Description of noncash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)*	☐ Yes	☒ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)*	☐ Yes	☒ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)*	☐ Yes	☒ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)*	☐ Yes	☒ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)*	☐ Yes	☒ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)*	☐ Yes	☒ No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 3:
THE ORGANIZATION REPORTS ALL EXPENDITURES BASED ON THE ACCRUAL METHOD OF ACCOUNTING.

SCHEDULE I (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
USA SWIMMING, INC.

Employer identification number
20-4264282

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CSCAA 5101 NW 21ST AVE FT LAUDERDALE, FL 23226	59-6145666	501(C)(3)	100,000.	0.			COACHING SUPPORT
SWIMMAC CAROLINA 9850 PROVIDENCE CHARLOTTE, NC 28277	59-1769720	501(C)(3)	17,190.	0.			CLUB EXCELLENCE
CARMEL SWIM CLUB 515 E MAIN ST SUITE 100 CARMEL, IN 46032	35-1468610	C CORP	13,800.	0.			CLUB EXCELLENCE
SANDPIPERS OF NEVADA 4460 S DURANGO DR. STE. A LAS VEGAS, NV 89147	88-0151712	501(C)(3)	12,010.	0.			CLUB EXCELLENCE
LAKESIDE SWIM TEAM 1928 WOODBOURNE AVENUE LOUISVILLE, KY 40205	31-1054854	C CORP	11,560.	0.			CLUB EXCELLENCE
NATIONS CAPITAL SWIMMING, INC 8101 WOLFTRAP RD. VIENNA, VA 22182	80-0851325	S CORP	11,430.	0.			CLUB EXCELLENCE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... 19.

3 Enter total number of other organizations listed in the line 1 table ..... 11.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LONG ISLAND AQUATIC CLUB 750 STEWART AVE., UNIT F GARDEN CITY, NY 11530	11-3230107	501(C)(3)	10,580.	0.			CLUB EXCELLENCE
LAKESIDE AQUATIC CLUB 5108 ABBEY GLEN DR FLOWER MOUND, TX 75027	75-1835239	C CORP	10,490.	0.			CLUB EXCELLENCE
SARASOTA SHARKS 8501 POTTER PARK DR. SARASOTA, FL 34238	82-3302879	501(C)(3)	10,270.	0.			CLUB EXCELLENCE
ROCKVILLE MONTGOMERY SWIM CLUB 355 MARTINS LN ROCKVILLE, MD 20850	80-0588202	501(C)(3)	10,210.	0.			CLUB EXCELLENCE
RED WAVE SWIM TEAM INC PO BOX 173 MONTCLAIR, NJ 07836	22-2498619	501(C)(3)	10,130.	0.			CLUB EXCELLENCE
SHARKS SWIM TEAM 711 SILVER LAKE DR DANVILLE, CA 94526	30-0700351	501(C)(3)	9,690.	0.			CLUB EXCELLENCE
IRVINE NOVAQUATICS 32 BRENA IRVINE, CA 92604	95-3180357	501(C)(3)	9,660.	0.			CLUB EXCELLENCE
BOLLES SCHOOL SHARKS 7400 SAN JOSE BLVD JACKSONVILLE, FL 32217	59-0637814	501(C)(3)	9,570.	0.			CLUB EXCELLENCE
NOVA OF VIRGINIA AQUATICS 100 NOVA WAY HENRICO, VA 23229	54-1427388	C CORP	14,560.	0.			CLUB EXCELLENCE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS FORD AQUATICS 8353 LEGACY DR FRISCO, TX 75034	47-1649957	S CORP	9,080.	0.			CLUB EXCELLENCE
AQUAJETS SWIM TEAM 6545 FLYING CLOUD DR. STE. 202 EDEN PRAIRIE, MN 55344	20-5956938	C CORP	9,010.	0.			CLUB EXCELLENCE
FISHERS AREA SWIMMING TIGERS 13954 KEAMS DR FISHERS, IN 46038	20-5273324	501(C)(3)	8,740.	0.			CLUB EXCELLENCE
BELLEVUE CLUB 11200 SE 6TH ST BELLEVUE, WA 98004	41-1319546	PARTNERSHIP	8,260.	0.			CLUB EXCELLENCE
SWIM WITH BILL, LLC 1177 KILBERRY LN NORTH AURORA, IL 60542	20-9100691	LLC	8,110.	0.			CLUB EXCELLENCE
SEATTLE METROPOLITAN AQUATIC CLUB PO BOX 22564 SEATTLE, WA 98122	91-1693654	C CORP	8,040.	0.			CLUB EXCELLENCE
MASON MANTA RAYS 6050 MASON MONTGOMERY RD MASON, OH 45040	31-6001070	GOVT	7,940.	0.			CLUB EXCELLENCE
PIEDMONT FAMILY YMCA 1515 MCINTIRE PARK DR CHARLOTTESVILLE, VA 22902	54-1717336	501(C)(3)	7,710.	0.			CLUB EXCELLENCE
CHICAGO STATE FOUNDATION 9501 S KING DRIVE CHICAGO, IL 60628	47-3644945	501(C)(3)	10,000.	0.			CLUB EXCELLENCE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GRAMBLING STATE UNIVERSITY 403 S MAIN ST GRAMBLING, LA 71245	72-6000751	501(C)(3)	10,000.	0.			COMMUNITY SUPPORT
COPPIN STATE UNIVERSITY 2500 W NORTH AVE BALTIMORE, MD 21216	52-6002033	501(C)(3)	10,000.	0.			COMMUNITY SUPPORT
ELIZABETH CITY STATE UNIVERSITY FOUNDATION - 1704 WEEKSVILLE RD - ELIZABETH CITY, NC 27909	23-7115345	501(C)(3)	10,000.	0.			COMMUNITY SUPPORT
NORFOLK STATE UNIVERSITY 700 PARK AVE NORFOLK, VA 23504	54-6002808	501(C)(3)	40,000.	0.			COMMUNITY SUPPORT
TEXAS SOUTHERN UNIVERSITY 3100 CLEBURNE ST HOUSTON, TX 77004	74-6001391	501(C)(3)	10,000.	0.			COMMUNITY SUPPORT
MOREHOUSE COLLEGE 720 WESTVIEW DR., SW ATLANTA, GA 30314	58-1438873	501(C)(3)	10,000.	0.			COMMUNITY SUPPORT

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
MEDAL MONEY, ATHLETE STIPENDS AND RECORD BONUSES	95	3,161,314.	0.		
ATHLETE GRANTS	141	837,782.	0.		

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:
APPLICANTS MUST QUALIFY, WHERE APPLICABLE, FOR CERTAIN GRANTS, AND A FINAL REPORT IS REQUIRED TO BE SUBMITTED TO USA SWIMMING.

SCHEDULE I, PART III, COLUMN B, LINE 1-2
THE NUMBER OF RECIPIENTS REPORTED IS BASED ON THE NUMBER OF FULFILLED GRANT AND STIPEND APPLICATIONS, AND THE NUMBER OF INDIVIDUALS COUNTED WHO RECEIVED MEDALS OR BONUS MONIES.

SCHEDULE J (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

USA SWIMMING, INC.

Employer identification number

20-4264282

Part I Questions Regarding Compensation

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

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) TIMOTHY HINCHEY	(i)	0.	0.	400,000.	0.	0.	400,000.	0.
FORMER PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MICHELLE STEINFELD	(i)	287,796.	60,000.	0.	34,500.	11,082.	393,378.	0.
SECRETARY & GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JACOB GROSSER	(i)	254,483.	60,000.	0.	32,135.	30,267.	376,885.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JOEL SHINOFIELD	(i)	258,407.	53,560.	0.	32,130.	31,964.	376,061.	0.
SPORT DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) GREGORY MEEHAN	(i)	241,169.	98,667.	0.	0.	21,018.	360,854.	0.
NATIONAL TEAM (FROM 04/2025)	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) SHANA FERGUSON	(i)	133,145.	0.	120,000.	13,431.	6,621.	273,197.	0.
INTERIM CEO& COO (TO 04/2025)	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ELAINE CALIP	(i)	176,954.	37,080.	0.	22,244.	24,030.	260,308.	0.
EXECUTIVE DIRECTOR, FOUNDATION	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) PATRICK MURPHY	(i)	170,716.	37,000.	0.	21,152.	21,268.	250,136.	0.
TECHNOLOGY	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) ERIC SKUFCA	(i)	204,386.	0.	5,000.	20,884.	19,664.	249,934.	0.
CFO (TO 07/2025)	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) MARIEJO TRUEX	(i)	107,986.	0.	109,500.	11,419.	16,313.	245,218.	0.
SPORT DEVELOPMENT (TO 08/2025)	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) MATTHEW LUPTON	(i)	155,015.	16,267.	0.	17,890.	30,995.	220,167.	0.
CREATIVE & PRODUCTIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) BRENDAN HANSEN	(i)	152,637.	17,000.	0.	17,700.	29,537.	216,874.	0.
NATIONAL JUNIOR TEAM	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) KEVIN RING	(i)	179,849.	0.	8,265.	0.	8,668.	196,782.	0.
PRESIDENT & CEO (FROM 09/2025)	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

PART I, LINE 4A:
THE FOLLOWING EMPLOYEES RECEIVED SEVERANCE PAYMENTS DURING 2025: TIMOTHY HINCHEY, FORMER PRESIDENT & CEO, RECEIVED A $400,000 PAYMENT REPRESENTING THE SECOND INSTALLMENT DUE UNDER A SEVERANCE AGREEMENT ENTERED INTO IN CONNECTION WITH HIS 2024 SEPARATION FROM EMPLOYMENT. IN ADDITION, SHANA FERGUSON RECEIVED A SEVERANCE PAYMENT OF $120,000, MARIEJO TRUEX RECEIVED A SEVERANCE PAYMENT OF $109,500, AND ERIC SKUFCA RECEIVED A SEVERANCE PAYMENT OF $5,000.
PART I, LINE 7:
PERFORMANCE BASED COMPENSATION IS PAID TO KEY EMPLOYEES PURSUANT TO THE EMPLOYMENT PRACTICES OF THE ORGANIZATION. THIS COMPENSATION IS NOT BASED ON PERFORMANCE OF THE ORGANIZATION, BUT INSTEAD IS BASED ON INDIVIDUAL PERFORMANCE OF EACH EMPLOYEE.

SCHEDULE O (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
USA SWIMMING, INC.

Employer identification number
20-4264282

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
(CONTINUED) COMPETITIVE SWIMMING IN ACCORDANCE WITH THE TED STEVENS OLYMPIC & AMATEUR SPORTS ACT.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

(CONTINUED)COMMUNICATIONS:
THE COMMUNICATIONS TEAM PLAYED A CRITICAL ROLE IN SUPPORTING USA SWIMMING'S PRESENCE ON THE GLOBAL STAGE, PROVIDING INTEGRATED COMMUNICATIONS SUPPORT ACROSS MULTIPLE INTERNATIONAL TRIPS AND COMPETITIONS. STRATEGIC ENHANCEMENTS INCLUDED THE IMPLEMENTATION OF UPDATED MEDIA TRAINING AT NATIONAL TEAM ONBOARDING, ENSURING ATHLETES AND STAFF ARE WELL-PREPARED TO REPRESENT THE ORGANIZATION. ADDITIONALLY, THE TEAM DEVELOPED TARGETED MEDIA PARTNERSHIPS TO EXPAND THE SPORT'S REACH, DRIVING BROADER VISIBILITY AND ENGAGEMENT ACROSS KEY AUDIENCES WHILE CONTINUING TO REFINE PERSONALIZED MEMBER COMMUNICATIONS.

CREATIVE & PRODUCTIONS:

IN 2025, THE CREATIVE AND PRODUCTIONS TEAMS EXPANDED THEIR CAPABILITIES TO MEET THE DEMANDS OF A GROWING PARTNER PORTFOLIO AND INCREASED CONTENT OUTPUT. STRATEGIC PLANNING EFFORTS SHIFTED TO PRIORITIZE SHORT-FORM CONTENT GROWTH AND ENGAGEMENT, ALIGNING WITH EVOLVING AUDIENCE CONSUMPTION TRENDS. THE TEAM ALSO CONTINUED ITS WORK TO UNIFY BRAND IDENTITY ACROSS THE ORGANIZATION, ADVANCING THE OVERHAUL OF LSC LOGOS TO CREATE A MORE COHESIVE AND CONSISTENT VISUAL SYSTEM BETWEEN NATIONAL HEADQUARTERS AND LOCAL SWIMMING COMMITTEES. THIS WAS COMPLEMENTED BY ONGOING PRODUCTION OF HIGH-QUALITY VIDEO CONTENT AND SUPPORT FOR LIVE BROADCASTS AND DIGITAL PLATFORMS.

TECHNICAL EVENTS:

USA SWIMMING DELIVERED A ROBUST 2025 EVENT CALENDAR, EXECUTING HIGH-QUALITY COMPETITIONS ACROSS ALL LEVELS OF THE SPORT. THE NATIONAL EVENT SCHEDULE INCLUDED THE TYR PRO SWIM SERIES, OPEN WATER NATIONALS AND JUNIOR NATIONALS, TOYOTA NATIONAL CHAMPIONSHIPS, TYR FUTURES CHAMPIONSHIPS, SPEEDO JUNIOR NATIONAL CHAMPIONSHIPS, TYR SUMMER CHAMPIONSHIPS, TOYOTA U.S. OPEN, AND SPEEDO WINTER JUNIOR NATIONAL CHAMPIONSHIPS.

PARTNERSHIPS:

IN 2025, THE PARTNERSHIPS TEAM REFINED ITS SALES STRATEGY WITH A RENEWED FOCUS ON PIPELINE DEVELOPMENT AND LONG-TERM PARTNER GROWTH. THE TEAM INTRODUCED NEW AND DIVERSIFIED ASSETS TO BETTER ALIGN WITH EVOLVING PARTNER OBJECTIVES, ENABLING MORE FLEXIBLE AND INTEGRATED SALES OPPORTUNITIES ACROSS EVENTS, CONTENT, AND DIGITAL PLATFORMS. THESE EFFORTS SUPPORTED STRONGER PARTNER ENGAGEMENT WHILE POSITIONING USA SWIMMING TO CAPITALIZE ON CONTINUED COMMERCIAL MOMENTUM.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

Name of the organization: USA SWIMMING, INC.
Employer identification number: 20-4264282

(CONTINUED) UNIVERSITY ONLINE COACH EDUCATION PLATFORM AND COACH CERTIFICATION PROGRAM IN 2022. IN 2024, WE EXTENDED COURSE OFFERINGS TO OFFICIALS TO CREATE A UNIFORM STANDARD FOR TRAINING NEW STARTERS, REFEREES, AND OTHER MEET OFFICIALS. THIS HAS LED TO CONTINUED GROWTH IN OUR OFFICIATING RANKS IN 2025 WHICH IN-TURN WILL CREATE MORE COMPETITIVE OPPORTUNITIES FOR CHILDREN PARTICIPATING IN THE SPORT. USA SWIMMING AGAIN PROVIDED IN-PERSON CAMP OPPORTUNITIES TO ATHLETES AND COACHES ATTENDING NATIONAL DIVERSITY SELECT CAMPS, ZONE SELECT CAMPS (2), THESE CAMPS PROVIDE COMPREHENSIVE LEARNING AND DEVELOPMENT OPPORTUNITIES FOR PROMISING ATHLETES (180) AND COACHES (100) PREPARING THEM FOR POTENTIAL FUTURE NATIONAL JUNIOR TEAMS AND NATIONAL TEAMS.

OUR TEAM SERVICES GROUP CONTINUES TO PROVIDE SUPPORT FOR CLUBS ON BUSINESS OPERATIONS, GOVERNANCE, PERFORMANCE, ATHLETE DEVELOPMENT, AND MEMBERSHIP SUPPORT. THE TEAM HAS CONTINUED TO OFFER, AND INCREASED MEMBER ENGAGEMENT, WITH FOUR SUCCESSFUL COACH DEVELOPMENT NETWORKS- HIGH PERFORMANCE, SENIOR ATHLETE, 11-14 ATHLETE DEVELOPMENT, AND THE 10 AND UNDER NETWORK. WE ALSO COMPLETED YEAR ONE OF OUR NEW CLUB SUCCESS PROGRAM TO SUPPORT NEW CLUBS IN THEIR FIRST THREE YEARS OF EXISTENCE TO ENSURE THEIR SUCCESS AND THAT IN TURN PROVIDES NEW OPPORTUNITIES FOR FAMILIES TO JOIN AND HAVE A POSITIVE EXPERIENCE IN THE SPORT. OUR TEAM SERVICES ADVISOR HAVE DOUBLED THE NUMBER OF MONTHLY VISITS PROVIDING DIRECT PROGRAM DEVELOPMENT AND SUPPORT FOR OUR CLUBS IN 2025. WE ALSO LAUNCHED A NEW PILOT PROGRAM TO INCREASE ACCESS TO COMPETITION AND LOWER COST AND TIME COMMITMENT TO PARTICIPATE CALLED BLOCK PARTY WHICH IS NOW IN PHASE THREE. THE PILOT HAS CREATED OPPORTUNITIES FOR ALMOST 60,000 ATHLETES TO COMPETE IN SHORT, FUN, LOCAL, LOW-COST COMPETITIONS, UP FROM 27,000 LAST YEAR.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
RISK MANAGEMENT:

AS A BENEFIT OF MEMBERSHIP, USA SWIMMING PROVIDES MEMBERS AND VOLUNTEERS WITH PARTICIPANT ACCIDENT INSURANCE. MEMBER CLUBS AND INDIVIDUAL MEMBERS ARE ALSO PROVIDED COMMERCIAL GENERAL LIABILITY INSURANCE TO COVER THIRD PARTY INJURY AND PROPERTY DAMAGE CLAIMS AT SWIMMING ACTIVITIES AND ALLOW CLUBS TO USE FACILITIES THAT REQUIRE PROOF OF THIRD-PARTY LIABILITY INSURANCE COVERAGE. ELITE ATHLETE HEALTH INSURANCE AND SPORTS INJURY COORDINATION OF BENEFITS ARE PROVIDED TO NATIONAL TEAM ATHLETES THAT ELECT TO PARTICIPATE IN THE PROGRAM. DOMESTIC AND INTERNATIONAL TRAVEL ACCIDENT INSURANCE IS PROVIDED TO ATHLETES, COACHES, AND SUPPORT PERSONNEL WHO TRAVEL TO COMPETITIONS. FOREIGN COMMERCIAL LIABILITY INSURANCE COVERAGES ARE ALSO PROVIDED TO TEAM, STAFF, AND VOLUNTEERS WHO TRAVEL ON BEHALF OF THE USA SWIMMING NATIONAL TEAMS. MEDICAL PROFESSIONAL LIABILITY INSURANCE IS PROVIDED TO HEALTH CARE PROFESSIONALS WHO ACT AS EVENT VOLUNTEERS TO THE USA SWIMMING TEAM AT THE REQUEST OF THE NATIONAL TEAM OR UPON APPLICATION TO USA SWIMMING.
EXPENSES $ 3,909,086. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

FORM 990, PART VI, SECTION A, LINE 2:
CERTAIN OFFICERS OF USA SWIMMING ALSO SERVED AS OFFICERS OF THE RELATED ORGANIZATION, USA SWIMMING FOUNDATION, DURING THE YEAR. KEVIN RING (CEO, FROM SEPTEMBER 2025), ROBERT VINCENT (INTERIM CEO, APRIL 2025 THROUGH SEPTEMBER 2025), SHANA FERGUSON (INTERIM CEO TO 04/2025), ERIC SKUFCA (CFO, THROUGH JULY 2025), AND CORY HILLIARD (CFO, FROM DECEMBER 2025) WERE

Name of the organization: USA SWIMMING, INC.
Employer identification number: 20-4264282

EMPLOYEES OF USA SWIMMING WHILE ALSO SERVING AS OFFICERS OF USA SWIMMING FOUNDATION. ACCORDINGLY, THESE INDIVIDUALS HAD BUSINESS RELATIONSHIPS WITH ONE ANOTHER WITHIN THE MEANING OF THE FORM 990 INSTRUCTIONS.

FORM 990, PART VI, SECTION A, LINE 4:
THE BYLAWS OF THE ORGANIZATION WERE AMENDED TO REVISE FLEX MEMBERSHIP PROVISIONS, INCLUDING ELIGIBILITY TO PARTICIPATE IN USA SWIMMING BLOCK PARTY EVENTS; REQUIRE BOARD CANDIDATES TO COMPLETE A CONFLICT-OF-INTEREST DISCLOSURE REVIEW BY THE ETHICS COMMITTEE; AND UPDATE BOARD ELECTION PROCEDURES RELATING TO CANDIDATE NOMINATIONS AND CAMPAIGNING ACTIVITIES, INCLUDING SELF-NOMINATIONS AND THIRD-PARTY NOMINATIONS WITH APPLICANT CONSENT.

FORM 990, PART VI, SECTION A, LINE 6:
THE CORPORATION IS A MEMBERSHIP ORGANIZATION. THERE ARE TWO CLASSES OF NON-VOTING MEMBERS, GROUPS AND INDIVIDUALS. MEMBERS HAVE REPRESENTATION THROUGH THE HOUSE OF DELEGATES (HOD). EACH LOCAL SWIMMING COMMITTEE (LSC) HAS MEMBERS IN THE HOD, ATHLETES ARE ELECTED TO THE HOD, AND OTHER CONSTITUENCY GROUPS ELECT AND APPOINT MEMBERS TO THE HOD.

FORM 990, PART VI, SECTION A, LINE 7A:
MEMBERS OF THE BOARD OF DIRECTORS ARE ELECTED BY THE HOUSE OF DELEGATES (HOD), ELECTED BY THE ATHLETES, APPOINTED BY A USA SWIMMING COMMITTEE, AND ELECTED BY ALLIED ORGANIZATIONS

FORM 990, PART VI, SECTION A, LINE 7B:
THE HOUSE OF DELEGATES (HOD) IS RESPONSIBLE FOR THE FOLLOWING ACTIONS:
1) ELECTION OF CERTAIN BOARD MEMBERS
2) APPROVAL OF CHANGES TO THE RULEBOOK
3) APPROVAL OF CERTAIN CHANGES TO THE BYLAWS
4) SETTING CERTAIN TYPES OF MEMBERSHIP FEES

FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM IS DISTRIBUTED TO THE ENTIRE BOARD OF DIRECTORS VIA EMAIL AND BOARD MEMBERS ARE GIVEN THE OPPORTUNITY TO PROVIDE INPUT BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:
EACH DIRECTOR, OFFICER, COMMITTEE MEMBER AND EMPLOYEE SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS SUCH PERSON:
1. HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY,
2. HAS READ AND UNDERSTANDS THE POLICY,
3. HAS AGREED TO COMPLY WITH THE POLICY, AND
4. UNDERSTANDS THAT USA SWIMMING IS A CHARITABLE ORGANIZATION AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

THE DISCLOSURE STATEMENTS SHALL BE REVIEWED BY USA SWIMMING'S GENERAL COUNSEL. ANY ISSUES NOT PREVIOUSLY DISCLOSED SHALL BE REFERRED BY HIM OR HER TO THE BOARD OR APPROPRIATE COMMITTEE. THE DISCLOSURE STATEMENTS SHALL BE RETAINED IN THE FILES OF THE GENERAL COUNSEL. AT THE BEGINNING OF EACH BOARD MEETING, BOARD MEMBERS ARE ASKED TO DISCLOSE ANY CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:
A SPECIAL COMMITTEE OF THE BOARD OF DIRECTORS DEVELOPED AN EMPLOYMENT CONTRACT FOR THE CURRENT EXECUTIVE DIRECTOR USING COMPARABLE COMPENSATION

Name of the organization: USA SWIMMING, INC.
Employer identification number: 20-4264282

DATA FROM OTHER NATIONAL GOVERNING BODIES AND LIKE INDUSTRIES. THE HUMAN RESOURCE DEPARTMENT REVIEWS SALARY SURVEYS AND DATA FROM OTHER NATIONAL GOVERNING BODIES TO SET AND ADJUST COMPENSATION FOR OFFICERS AND OTHER KEY EMPLOYEES.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AL,AR,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,MN,MS,NV,NH,NJ,NM,NY,NC,ND
OK,OR,PA,RI,SC,TN,UT,WA,WV,WI

FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON THE ORGANIZATION'S WEBSITE. THE ORGANIZATION WILL ALSO PROVIDE IN A TIMELY MANNER, COPIES OF ALL GOVERNING DOCUMENTS, INCLUDING ITS CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS WHEN REQUESTED IN WRITING OR IN PERSON.

FORM 990, PART VII, SECTION A, LINE 1A
THE NUMBER OF HOURS OF OFFICERS, KEY EMPLOYEES, AND HIGHLY COMPENSATED EMPLOYEES IS BASED ON NUMBER OF HOURS FOR A FULL TIME POSITION. THE HOURS DO NOT REFLECT ACTUAL HOURS SPENT BY THESE EMPLOYEES.

FORM 990, PART IX, COLUMN (D)
USA SWIMMING, INC IS PART OF A CONSOLIDATED ENTITY REPORTING ON SEPARATE 990S. AS SUCH, CERTAIN FUNCTIONS AND THE RELATED EXPENSES ARE REPORTED IN A SEPARATE ENTITY. PLEASE SEE USA SWIMMING FOUNDATION FOR ADDITIONAL INFORMATION.

FORM 990, PART XII, LINE 2C
THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR SELECTING THE INDEPENDENT AUDITOR FOR THE FINANCIAL STATEMENT AUDIT. THIS PROCESS HAS NOT CHANGED FROM PRIOR YEARS.

SCHEDULE R (Form 990)
(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
USA SWIMMING, INC.

Employer identification number
20-4264282

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
USA SWIMMING FOUNDATION, INC - 72-1581977 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	FUNDRAISING	COLORADO	501(C)(3)	LINE 12A, I	USA SWIMMING	X	

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

Schedule R (Form 990) (Rev. 1-2025)

LHA 532161 04-01-25

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No

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

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

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

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	USA SWIMMING FOUNDATION, INC.	C	1,531,666.	CASH
(2)	USA SWIMMING FOUNDATION, INC.	L	860,000.	CASH
(3)	USA SWIMMING FOUNDATION, INC.	Q	200,000.	ESTIMATED CASH
(4)				
(5)				
(6)				

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

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

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

Part VII Supplemental Information

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