PUBLIC DISCLOSURE COPY

			** PUBLIC DISCLOSURE COPY	* *		_
	0	00	Return of Organization Exempt Fror	m In	icome Tax	OMB No. 1545-0047
Forr	n Y	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code			0 2021
			Do not enter social security numbers on this form as it n	may be	made public.	Open to Public
		of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the la	-	-	Inspection
AF	or th	e 2021 calenda	ar year, or tax year beginning and endin			
Bc	heck if	C Name of	organization		D Employer identifica	tion number
а	pplicab	UNIT	ED STATES AUSTRALIAN FOOTBALL			
	Addr	ess LEAG	UE, INC C/O CLARK, SCHAEFER, HACKETT			
	Name	e ge Doing bu	usiness as		43-186129	4
	Initia		and street (or P.O. box if mail is not delivered to street address) Room	/suite	E Telephone number	
	Final return	9160	HIGHWAY 64, SUITE 12 #205		(872)-228	-7235
	termi ated		own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	316,974.
	Amer returr	nded TATE	LAND, TN 38002		H(a) Is this a group retu	ım
	Appli tion	F Name a	nd address of principal officer: SEBASTIAN AGUIARI		for subordinates?	Yes X No
	pend	^{ing} SAME .	AS C ABOVE		H(b) Are all subordinates inclu	uded? Yes No
<u>I</u> T	ax-e>	empt status:	X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) or	527	If "No," attach a lis	st. See instructions
			USAFL.COM		H(c) Group exemption	
		f organization:	X Corporation Trust Association Other ► L	Year o	f formation: 1997 M	State of legal domicile : MO
Pa	art I	•				
đ	1	Briefly describ	e the organization's mission or most significant activities: $\begin{tabular}{c} {\tt THE} & {\tt USA} \end{tabular}$	FL 1	IS A NON-PROP	?IT
Activities & Governance			SPORTS ORGANIZATION DEDICATED TO THE			
srne	2	Check this bo	x 🕨 🛄 if the organization discontinued its operations or disposed of	more t	han 25% of its net asset	ts.
0 Vē	3		ing members of the governing body (Part VI, line 1a)			<u> </u>
ي م	4		ependent voting members of the governing body (Part VI, line 1b)			<u> </u>
es	5		of individuals employed in calendar year 2021 (Part V, line 2a)			1
iviti	6	Total number	of volunteers (estimate if necessary)			20
Act			d business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.
	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	<u></u>		0.
					Prior Year 82,777.	Current Year 111,651.
ne	8		and grants (Part VIII, line 1h)		21,823.	120,530.
Revenue	9	•	ce revenue (Part VIII, line 2g)		92.	30,955.
Re			come (Part VIII, column (A), lines 3, 4, and 7d)		2,414.	18,196.
			(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		107,106.	281,332.
	12 13		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	0.
			nilar amounts paid (Part IX, column (A), lines 1-3) to or for members (Part IX, column (A), line 4)		0.	0.
			to or for members (Part IX, column (A), line 4) r compensation, employee benefits (Part IX, column (A), lines 5-10)		73,203.	73,203.
ses			undraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses			ng expenses (Part IX, column (D), line 25) \blacktriangleright 0.			
Ĕ			es (Part IX, column (A), lines 11a-11d, 11f-24e)	-	63,165.	172,249.
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)		136,368.	245,452.
	19		expenses. Subtract line 18 from line 12		-29,262.	35,880.
or					inning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (F	Part X, line 16)		199,537.	236,295.
Ass d Ba	21	Total liabilities	(Part X, line 26)		152,020.	156,898.
Euno	22	Net assets or	fund balances. Subtract line 21 from line 20		47,517.	79,397.
Pa	art II					
Unde	er pen	alties of perjury,	declare that I have examined this return, including accompanying schedules and s	statemer	nts, and to the best of my k	nowledge and belief, it is
true,	corre	ct, and complete.	Declaration of preparer (other than officer) is based on all information of which pre-	eparer h	nas any knowledge.	
Sigr	n	-	e of officer		Date	
Her	е		STIAN AGUIARI, PRESIDENT			
		IVDe or p	print name and title			

		Type of print hante and this			
		Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Pai	id	NATOSHA DILLEY	NATOSHA DILLEY	04/26/22	2 self-employed P01225377
Pre	eparer	Firm's name 🕒 CLARK, SCHAEFER,	HACKETT & CO.	Firm	n's EIN ▶ 31-0800053
Use	e Only	Firm's address 🖌 1 EAST 4TH STREE	Т		
		CINCINNATI, OH 4	5202	Pho	ne no.513-241-3111
Ma	ay the IF	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No

132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2021)

	UNITED STATES AUSTRALIAN FOOTBALL 1990 (2021) LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT 43-1861294 Page 2
Par	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE USAFL IS A GRASSROOTS, AMATEUR SPORTS ORGANIZATION DEDICATED TO
	THE DEVELOPMENT OF AND PARTICIPATION IN AUSTRALIAN FOOTBALL IN THE
	UNITED STATES.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes X No
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$215,662. including grants of \$) (Revenue \$120,530.)
	THE USAFL SERVES OVER 45 CLUBS AND APPROXIMATELY 1,500 PLAYERS AND
	OTHER SUPPORT STAFF. A MONTHLY E-NEWSLETTER IS PUBLISHED EACH MONTH TO
	MEMBERS AND THERE IS A CONTINUAL FLOW OF INFORMATION TO CLUB
	PRESIDENTS, VIA EMAIL UPDATES, SOCIAL MEDIA, WEB PAGES AND CONFERENCE
	CALLS. AN ANNUAL GENERAL MEETING IS HELD EACH OCTOBER. PROGRAMS IN 2021
	INCLUDED THE MANAGEMENT OF A COACHES ASSOCIATION, UMPIRES ASSOCIATION,
	WOMEN'S ASSOCIATION, ADMINISTRATOR'S CONFERENCE, SIX REGIONAL
	TOURNAMENTS AND A NATIONAL TOURNAMENT.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
40	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
τu	
40	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses > 215,662.
<u>4e</u>	Form 990 (2021)
132002	2 12-09-21

Form 990 (2021) LEAGUE , INC Part IV Checklist of Required Schedules LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT

1 is the organization described in sectors 501(c)(3) or 4477(a)(1) (other than a private foundation)? Image: the organization required to complete Schedule B, Schedule O Combinuos? See instructions Image: the organization required to complete Schedule B, Schedule O Combinuos? See instructions 3 Did the organization complete Schedule B, Schedule O Combinuos? See instructions Image: the organization complete Schedule C, Part I Image: the organization as offered in Proc. 98191 / "Proc." complete Schedule C, Part I Image: the organization as offered in Proc. 98191 / "Proc." complete Schedule C, Part I Image: the organization as offered in Proc. 98191 / "Proc." complete Schedule C, Part I Image: the organization required to organization that receives membership dues, assessments, or or organization required to reversion of an accounts I with donor have the right to provide aduce on the distribution or investment of anomaxin an uch final proc." Proc. 98101 / "Proc." complete Schedule D, Part I Image: the organization maint in Part I, Image: the organization theory or the organization maint in Collicitons of works of art, historical treasures, or other similar assets I, which donors are offer to schedule D, Part II Image: the organization maint in Collicitons of works of art, historical treasures, or other similar assets protocida for amount in Part II. The complete Schedule D, Part II. Image: the organization required to repart organization, decidity on through a mainted organization, decidity on thr				Yes	No
If Yes, "complete Schedule A complete Schedule C Arrity Vise," Complete Schedule C Part II. Image: Schedule C Part II. Sectors 90 (c)(3) organizations. Did the organization ergage in lobbying activities on behalf of or in opposition to candidates for any and the organization ergage. In lobbying activities, or have a section 501(h) election in effect d arrity of the organization ergage in lobbying activities, or have a section 501(h) election in effect d arrity of the organization that receives membership dues, assessments, or animal amounts as defined or (d)(d), d01(c)(6). D01(c)(6) or 000(c) for 000(c) organization that receives membership dues, assessments, or animal amounts as defined in Rev. Proc. B (137) if Yes, "complete Schedule C, Part II. Image: Complete Schedule C, Part II. D Id the organization receives the ordination or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or account fail mass accel. The trace of the second and the acceleration devices of the intercel trace organization. For the acceleration devices of the intercel trace organization. The trace organization report an amount in Part X, Iine 21, for escrew or custodial account liability, serve are a custodial for amounts in of the organization report an amount for Interest the trace organization. Includ assets in donor restricting organization acceleration organization report an amount for investments - other securities in Part X, Iine 127 if Yes, "complete Schedule D, Part II. Image: Complete Schedule D, Part II. D Id the organization report an amount for investments - order securities in Part X, Iine 127 if Yes, "complete Schedule D, Part	1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)?		162	NO
2 Is the organization engage in direct political campaign activities on behalf of ori lopposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 3 X 4 Section 501(b)(3) organizations. Did the organization engage in loobying activities, or have a section 501(b) election in effect during the skyrol '/ Yes,' complete Schedule C, Part I X 5 Is the organization a section 501(b) election in effect during the skyrol '/ Yes,' complete Schedule C, Part I X 6 Did the organization martian any donor adveet tunds or any similar funds or accounts for which donors have the engine in the organization martian any donor adveet tunds or any similar funds or accounts for Wes,' complete Schedule C, Part I C 7 Did the organization martian any donor adveet funds or any similar funds or accounts for Wes,' complete Schedule C, Part I Y X 8 Did the organization martian activities? If Yes,' complete Schedule C, Part I Y X 9 Did the organization martian is activities? If Yes,' complete Schedule D, Part I X 9 Did the organization martian is activities? If Yes,' complete Schedule D, Part I X 10 Did the organization martian is activities? If Yes,' complete Schedule D, Part I X 10 Did the organization martian is activities in Part X, Im 10P, If Yes,' complete Schedule D, Part V 10 <	•	-	1	x	
 3 Did the organization engage in clinet or indirect political campaign activities on behalf of or in opposition to candidates for public official" if Yes, "complete Schedule C, Part II 4 Section 501(b) organization. Did the organization ingage in lobbying activities, or have a section 501(b) election in effect during the tax year? If Yes, "complete Schedule C, Part II 6 Did the organization enternation and on any smill finds or associating that receives membership dues, assessments, or is in the organization maintain any doner advect during or assement, including escience to the provide advice on the distribution or investment of amounts in such funds or associating the Yes, "complete Schedule D, Part II 7 Did the organization maintain any doner advect during escience to to preserve open space, the environment, historic land areas, or instoric structures? If Yes, "complete Schedule D, Part II 9 Did the organization namican and example Schedule D, Part II 9 Did the organization maintain collections of works of art, historical treasure, or other similar assets? If Yes, "complete Schedule D, Part II 9 Did the organization asserts on yor the following quartions in Yes," the complete Schedule D, Part II 9 Did the organization asserts on yor the following quartions in Yes, "the complete Schedule D, Part IV 10 Did the organization report an amount for fund, buildings, and equipment in Part X, line 12, that is 5% or more of its total asset reported in Part X, line 137, If Yes, "complete Schedule D, Part IV 11 Did the organization report an amount for other assets in Part X, line 12, the Its 5% or more of its total asset reported in Part X, line 117, If Yes, "complete Schedule D, Part VI 11 Did the organization report an amount for insettments - other securities in Part X, line 12, the Its 5% or more of its total asset reported in Part X, line 117, If Yes, "complete Schedule D, P	2				
public office? # 'Yes,' complete Schedule Q. Part I 3 X 4 Section 50((c)) organizations. Did the organization engage in lobbying activities, or have a section 50(t)) election in effect 4 X 5 Is the organization a section 50(t)(k) 50((s)(c) 50((s)) or 50(_		-
 Section 50 (Lq)3 organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect Is the organization a section 501(h)(h), 501(h)(h), or 501(h)(h) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-197. If "Yes," complete Schedule C, Part II Did the organization markina my doore adviced 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 II Did the organization neutrino estement, including easements to preserve open space. Did the organization neutrino relation setting in the serve or outsofial account fability. Serve as pustodian for schedule D, Part II Did the organization amount in Part X, ine 21, for account Schedule D, Part II Did the organization and anount in Part X, ine 21, for account sets in donor-restricted informements or in quadi endowments? If "Yes," complete Schedule D, Part II Did the organization server to mough a related organization, hold assets in donor-restricted informements or in quadi endowments? If "Yes," complete Schedule D, Part VI. Did the organization server to an amount for investments - other assets in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 15% If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments - other assets in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 15% If "Yes," complete Schedule D, Part VI. Did the organization report an amount for other assets in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 15% If "Yes," complete Schedule D, Part XI. Did the organization report an amount for other assets in Part X, line 12% If "Yes," complet	-		3		х
during the tax year? If Yes," complete Schedule C, Part II 4 X 5 Is the organization a section S(10(4), 50	4		-		
5 Is the organization actions of 010(20, 5010(20), or 5010(20) organization that receives membership dues, assessments, or similar amounts as defined in the Price (56 1979) * 14%; "complete Schedule (2, Part II) 5 X 6 Did the organization maintain any done 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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or account liability, serve as putatodian of the organization maintain and collections of works of art, historical treasures, or other similar assets? If 'ryes,' complete Schedule D, Part II 7 X 9 Did the organization, mercer or through a relied organization, hold assets in donor-restricted endowments or in quasi endowments? If 'ryes,' complete Schedule D, Part V 7 X 9 Did the organization assert on any of the following questions is 'ryes,' then complete Schedule D, Part VI, VII, VII, VX, X, as applicable. 8 X 9 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 147, 'ryes,' complete Schedule D, Part VII, VII, VII, VX, X, as applicable. 11a X 9 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			4		Х
similar amounts as defined in Rev. Proc. 89:197. If "Yes," complete Schedule C, Part II 5 X 0 Did the organization marken any donor advised funds or any similar hands or accounts? If "Yes," complete Schedule D, Part I 5 X 10 the organization necevor or hold a conservation easement, including essements to preserve open space, the environment, historical treasures, or other a simular assets? If "Yes," complete Schedule D, Part II 5 X 10 the organization marken collection of works of art, historical treasures, or other a simular assets? If "Yes," complete Schedule D, Part II 7 X 10 the organization marken collections of works of art, historical treasures, or other and the organization and the organization, and and the organization, and any the organization, and any the organization, and any the organization, answer to any of the following questions is "Yes," then complete Schedule D, Part IV 7 X 10 the organization report an amount for land, building, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 10 X 11 the organization report an amount for land, building, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11a X 12 Did the organization report an amount for hime schedule D, Part V 11a X 13 Did the organization report an amount for hime schedule D, Part V 11a X 14 Did the organization report an amount for hime schedule D, Part X	5				
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provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. K 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic inductanes. If "Yes," complete Schedule D, Part II. 7 X 8 Did the organization report an amount in Part X, line 21, for easrow or custodial account liability, serve as a subcidian for amounts no listed in Part X, or provide credit counseling, debt magement, credit repar, or debt mogblation services? 8 X 9 Did the organization report an amount in Part X, line 21, for easrow or custodial account liability, serve as a subcidian for amounts no listed in Part X, vire, "complete Schedule D, Part IV. 8 X 9 Did the organization, directly or through a related organization, hold assets in donorrestriched endowments 10 X 10 the organization report an amount for lawstments - other securities in Part X, line 10? If Yes, "complete Schedule D, Part VI. 10 X 111a X as applicable. 111a X 111a X 10 User organization report an amount for investments - organized an Part X, line 10? If Yes, "complete Schedule D, Part X 111a X 111a X 111a X 111a	6				
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9 Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt managament, credit repair, or doff negotiation services? 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>II</i> 'Yes,' complete Schedule D, Part V 10 X 11 If the organization is anyout to following questions is 'Yes,' then complete Schedule D, Part V, VII, VII, VII, VI, or X, as applicable. 10 X 12 Did the organization report an amount for land, buildings, and equipment in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>II</i> 'Yes,' complete Schedule D, Part VI 11a X 13 Did the organization report an amount for investments - ordpragm related th Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>II</i> 'Yes,' complete Schedule D, Part VI 11a X 14 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? <i>II</i> 'Yes,' complete Schedule D, Part X 11a X 11d Did the organization is poly the ordenization and the other assets in Part X, line 15? Hat is 5% or more of its total assets reported in Part X, line 16? <i>II</i> 'Yes,' complete Schedule D, Part X 11a X 11d Did the organization schedule D, Part X	8				
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as pustodian for amounts not listed in Part X: or provide credit counseling, debt management, credit repair, or debt negotiation services? 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments? 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments? 10 X 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VII, VII, VII, VII, VII, VII, VII,		Schedule D, Part III	8		X
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 investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i> 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? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> 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 any foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> 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), line 36 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i>. See instructions 17 X 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> 19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a X 20b 20b 21 X 	b				
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 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> 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? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions 17 Did the organization report more than \$15,000 otal of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," 18 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a 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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i> 21 X 	15				
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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 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 18 X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 20a 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 20 X	17				
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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					
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II					
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LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT

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Pa	t 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			77
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
258	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	050		х
h	transaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</i> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	<u>25a</u>		<u></u>
U	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		25b		х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
20	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		х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		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		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			T 7
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
~ ~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
07	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	07		x
20	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	х	
Pa	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	1 30	17	
	Charly if Schedule O contains a reasonance or note to any line in this Dart V			
-	Check it Schedule O contains a response of note to any line in this Part V		Yes	No
19	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 14		103	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
v	(gambling) winnings to prize winners?	1c	х	
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UNITED STATES AUSTRALIAN FOOTBALL m 990 (2021) LEAGUE, INC C/O CLARK, SCHAEFER, HACKE art V Statements Regarding Other IRS Filings and Tax Compliance (continued)	ETT 43-1861	294	Pa	age 🤇
			Yes	No
a 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 1			
If at least one is reported on line 2a, did the organization file all required federal employment tax return		2b	х	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instruction	3			v
	-	3a		X
If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b		
At any time during the calendar year, did the organization have an interest in, or a signature or other a financial account in a foreign country (such as a bank account, securities account, or other financial a		4a		x
If "Yes," enter the name of the foreign country ►				
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).			
a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	/	X
Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ction?	5b		X
If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		<u>5c</u>		
a Does the organization have annual gross receipts that are normally greater than \$100,000, and did th				
any contributions that were not tax deductible as charitable contributions?		<u>6a</u>		X
If "Yes," did the organization include with every solicitation an express statement that such contribution of the statement that such contribution.	ons or gifts	0		
were not tax deductible?		6b		
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 ser	vices provided to the payor?	7a		x
 If "Yes," did the organization notify the donor of the value of the goods or services provided? 		7b		
 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 				
to file Form 8282?		7c		x
If "Yes," indicate the number of Forms 8282 filed during the year	7d			
Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract?	7e		Х
Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7f		X
If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as required? \dots	7g		
If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a Form 1098-C?	7h		
Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
sponsoring organization have excess business holdings at any time during the year?		8		
Sponsoring organizations maintaining donor advised funds.				
		9a		
Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:		9b		
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-		
Section 501(c)(12) organizations. Enter:	100			
Gross income from members or shareholders	11a			
Gross income from other sources. (Do not net amounts due or paid to other sources against				
amounts due or received from them.)	11b			
a 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	-		
Section 501(c)(29) qualified nonprofit health insurance issuers.				
		13a		
Note: See the instructions for additional information the organization must report on Schedule O.				
Enter the amount of reserves the organization is required to maintain by the states in which the	13b			
organization is licensed to issue qualified health plans Enter the amount of reserves on hand	13c			
		14a		X
If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu.		14b		
Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				
excess parachute payment(s) during the year?		15		X
If "Yes," see the instructions and file Form 4720, Schedule N.	income?	16		X
If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment				
Is the organization an educational institution subject to the section 4968 excise tax on net investment If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in				
Is the organization an educational institution subject to the section 4968 excise tax on net investment If "Yes," complete Form 4720, Schedule O.		17		

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Form	1990 (2021) LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT 43-1861			age 6
Pa	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a	"No" r	espon	se
	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
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7			
	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			
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	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	-		
74	more members of the governing body?	7a	х	
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	74		
	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:	10		
a		8a	Х	
a b	The governing body? Each committee with authority to act on behalf of the governing body?	8b	X	
9	Each committee with authority to act on benaif of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00	- 23	
9		9		x
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		21
	tion Driverso (This Section B requests information about policies not required by the internal Revenue Code.)		Yes	No
100	Did the examination have lead chapters, branches, or affiliated?	10a	X	
	Did the organization have local chapters, branches, or affiliates?	IUa	23	
a		104	Х	
110	and branches to ensure their operations are consistent with the organization's exempt purposes?	<u>10b</u> 11a	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u></u>	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	10-	Х	
	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		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40.	х	
40	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	~	
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?	45 -		x
a	The organization's CEO, Executive Director, or top management official	15a		
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			v
_	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			
000	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
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)	availal	ole
	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	financ	cial	
	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			
	HEATH MOORE - (608)332-5140			

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510 SHADY WOOD WAY, MADISON, WI 53714

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Form 990 (2021)

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors Check if Schedule 0 contains a response or note to any line in this Part VII	UNITED S	TATES AU	JSJ	RA	ГI	AN	F	00	TBALL		
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List all of the organization's current officers, directors, trustees (whether individuals or organization, regardiess of amount of compensation. Enter 0. In columns (0), (E), and (F) in compensation was paid. List all of the organization's current key employees, If any. See the instructions for definition of 'key employee, 'No regelived record bill comparisation's four the NSS, and/or tox 1 of form 199-MEQ of more than \$100,000 cords and any related organizations. List all of the organization former diffecers, or trustees that received, in the capacity as a former diffecer, or trustee of the organization and any related organizations. List all of the organization former diffecers, or trustees that received, in the capacity as a former director, or trustee. The organization former diffecers, or trustees that received, in the capacity as a former director, or trustee. The organization former diffecers, or trustees that received, in the capacity as a former director, or trustee. The organization former diffecers, or trustees that received, in the capacity as a former director, or trustee. The organization former diffecers are received and the organization and any related organizations. These this box if neither the organization normal advector trustee of the organization former diffecers are received and the organization former	Section A. Officers, Directors, Trustees, Key	Employees, a	nd H	ligh	est (Com	nper	isat	ed Employees		
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Form **990** (2021)

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Part VII Section A. Officers, Directors, Trus (A)	stees, Key Emp (B)	pioy	ees,		d Hig C)	gnes	st C	ompensated Employee (D)	es <u>(continued)</u> (E)		E)
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c Total from continuation sheets to Part V								0.	0	•	0.
d Total (add lines 1b and 1c)								68,000.	0	•	0.
2 Total number of individuals (including but r	not limited to th	ose	liste	d ab	oove) wh	o re	eceived more than \$100	,000 of reportable		
compensation from the organization											0
										Y	es No
3 Did the organization list any former officer	, director, trust	ee, k	key e	mpl	loye	e, or	hig	hest compensated emp	loyee on		
line 1a? If "Yes," complete Schedule J for s	such individual								-	3	X
4 For any individual listed on line 1a, is the s											
and related organizations greater than \$15									-	4	X
5 Did any person listed on line 1a receive or											
rendered to the organization? If "Yes," con	nplete Schedul	e J fo	or su	ıch ı	oers	on .				5	X
Section B. Independent Contractors											
1 Complete this table for your five highest co	-								· · ·	ation from	
the organization. Report compensation for	the calendar ye	ear e	enain	ig w		or wi	<u>tnin</u>		ear.	(0)	
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		110					-				
							-				
2 Total number of independent contractors (including but n	ot lin	nitec	d to	thos	se lis	ted	above) who received m	ore than		
\$100,000 of compensation from the organ	•				C)					
										00	<u> </u>

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LEAGUE,	INC	C/0	CLARK,	SCHAEFER,	HACKETT	43
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			Statement of Revenue					
			Check if Schedule O contains a response of	or note to any line	e in this Part VIII (A)	(B)	(C)	(D)
					(A) Total revenue	(P) Related or exempt	Unrelated	Revenue excluded
						function revenue	business revenue	from tax under
								sections 512 - 514
nts nts	1 ;		Federated campaigns 1a					
ărai our	1		Membership dues 1b					
s, (Am		С	Fundraising events 1c					
Contributions, Gifts, Grants and Other Similar Amounts		d	Related organizations 1d					
is, (е	Government grants (contributions) 1e					
ri or S	1	f	All other contributions, gifts, grants, and					
Ibu The				111,651.				
a C	9	g	Noncash contributions included in lines 1a-1f					
a C		h	Total. Add lines 1a-1f	>	111,651.			
				Business Code		1.0.0		
ce	2 8		MEMBER DUES	900099	103,430.			
Program Service Revenue	1	b	PLAYER TOURNAMENT FEES	900099	17,100.	17,100.		
יא enu		С						
leve		d						
вo Н		е						
ז	1	f	All other program service revenue					
		g	Total. Add lines 2a-2f	►	120,530.			
	3		Investment income (including dividends, intere					
			other similar amounts)	🕨	1,360.			1,360.
	4		Income from investment of tax-exempt bond p	roceeds 🕨 🕨				
	5		Royalties	>				
			(i) Real	(ii) Personal				
	6 8	а	Gross rents 6a					
	- 1	b	Less: rental expenses 6b					
		С	Rental income or (loss) 6c					
		d	Net rental income or (loss)	🕨				
	7 :	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 30,831.					
	1	b	Less: cost or other basis					
anu			and sales expenses 7b 1,236.					
Revenue			Gain or (loss) 7c 29,595.					
Re			Net gain or (loss)	····· ►	29,595.			29,595.
her	8 8	а	Gross income from fundraising events (not					
Oth			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18					
			Less: direct expenses 8b					
			Net income or (loss) from fundraising events	►				
	9 8	а	Gross income from gaming activities. See					
			Part IV, line 19					
			Less: direct expenses 9b					
			Net income or (loss) from gaming activities	▶				
	10 ;		Gross sales of inventory, less returns					
				42,782.				
		b	Less: cost of goods sold 10b	34,406.				
		с	Net income or (loss) from sales of inventory		8,376.			8,376.
s				Business Code				
e a	11 :	а	MISCELLANEOUS INCOME	900099	9,820.			9,820.
		b						
eve		с						
Miscellaneous Revenue		d	All other revenue					
2		e	Total. Add lines 11a-11d	►	9,820.			
			Total revenue. See instructions		281,332.	120,530.	0.	49,151.

Form 990 (2021)

9

UNITED STATES AUSTRALIAN FOOTBALL 43-1861294 Page 10 LEAGUE INC C/O CLARK, SCHAEFER, HACKETT Form 990 (2021) 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) Χ Check if Schedule O contains a response or note to any line in this Part IX **(D)** Fundraising (B) (C) (A) Do not include amounts reported on lines 6b. Total expenses Program service expenses Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, 51,000. 68,000. 17,000. trustees, and key employees Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 5,203. 3,902. 1,301 10 Payroll taxes Fees for services (nonemployees): 11 Management а b Legal 298. 1,191. 893. С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g 26,016. 19,512. 6,504 column (A), amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 8,080. 6,060. 2,020 Office expenses 13 Information technology 14 Royalties 15 16 Occupancy 385. 289. 96. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 4,449. 3,337. 1,112. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 Depreciation, depletion, and amortization 22 5,837. 4,378. 1,459. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 93,331. 93,331. NATIONALS a WESTERN REGIONAL 9,583. 9,583. b 7,173. 7,173. EASTERN REGIONAL C

10

5,331. 5,331. CENTRAL REGIONAL d 10,873. 10.873. e All other expenses 245,452. 215,662. Total functional expenses. Add lines 1 through 24e 25 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)

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0.

Form 990 (2021)

29,790

UNITED	STATES	AUSTRALIAN	FOOTBALL

	t X	LEAGUE, INC C/O CLARK, SCHAEFER Balance Sheet	, HACKEII	45-	1861294 Page
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	199,537.	1	236,295
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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	
Assels	8	Inventories for sale or use		8	
Ĩ	9	Prepaid expenses and deferred charges		9	
		Land, buildings, and equipment: cost or other		-	
	lou	basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	199,537.	16	236,295
	17	Accounts payable and accrued expenses	1,729.	17	6,612
	18	Grants payable	- 1	18	
	19	Deferred revenue		19	
	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	143,300.	24	143,300
	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	6,991.	25	6,986
	26	Total liabilities. Add lines 17 through 25	152,020.	26	156,898
		Organizations that follow FASB ASC 958, check here 🕨 🔀			
ŝ		and complete lines 27, 28, 32, and 33.			
	27	Net assets without donor restrictions	47,517.	27	79,397
09	28	Net assets with donor restrictions		28	
2		Organizations that do not follow FASB ASC 958, check here 🕨 🗌			
		and complete lines 29 through 33.			
5	29	Capital stock or trust principal, or current funds		29	
241	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ê	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets of Fully Datalices	32	Total net assets or fund balances	47,517.	32	79,397
	33	Total liabilities and net assets/fund balances	199,537.	33	236,295
· -					Form 990 (20

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Forr	UNITED STATES AUSTRALIAN FOOTBALL 1990 (2021) LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT	43-186	1294	Page	e 12
	rt XI Reconciliation of Net Assets			<u> </u>	
	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		<u>1,33</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,45	
3	Revenue less expenses. Subtract line 2 from line 1	3		5,88	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	47	7,51	7.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7		<u>K</u>	
8	Prior period adjustments	8	- 4	1,00	
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	79	9,39	7.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			[
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed				
	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		х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat				
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit			
	Act and OMB Circular A-133?	-	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 (2	:021)

SCHEDULE A	,	Public Cha	rity Status an	d Pub	lic Su	upport		OMB No. 1545-0047	
(Form 990)	Co	omplete if the organ	plete if the organization is a section 501(c)(3) organization or a section						
		49	2021 Open to Public						
Department of the Treasury nternal Revenue Service			Attach to Form 990 or I v/Form990 for instructi			oformation		Inspection	
Name of the organizat			AUSTRALIAN F			inormation.	Employer	r identification number	
			O CLARK, SCH			ኛ ድጥጥ		3-1861294	
Part I Reason			(All organizations must of					5 1001251	
			For lines 1 through 12, c						
Ē.	•		on of churches described		,	1\(A \(i)			
			Attach Schedule E (Forr		11110(b)(•,~,')•			
			anization described in s		(h)(1)(A)(i	;;)			
	•		njunction with a hospital			•	(Viii) Enter	the bosnital's name	
city, and sta	-	ation operated in co	rijunction with a nospital	uescribeu	III Sectio			the hospital's hame,	
5 An organizat	tion operated fo	or the benefit of a co Complete Part II.)	llege or university owned	l or operate	ed by a go	overnmental	unit describe	ed in	
			nental unit described in	section 17	0(h)(1)(A)	(v)			
/	ý	0	ntial part of its support f				he general i	oublic described in	
0		omplete Part II.)		onn a gove	innontai		ne generar j		
			(1)(A)(vi). (Complete Par	+ 11)		\frown			
	•		in section 170(b)(1)(A)	-	d in coni	inction with	land-grant	college	
			ulture (see instructions).						
university:	or a non-land-g	frant college of agric			lame, ony	, and state o	r the college	501	
	tion that normal	lly receives (1) more	than 33 1/3% of its supp	ort from co	ontributio	ns members	nin fees and	d aross receipts from	
			t to certain exceptions;						
			(less section 511 tax) fro						
	509(a)(2). (Cor						gamzatione		
			ively to test for public sa	fety See	section 5	09(a)(4)			
			ively for the benefit of, to				arry out the	nurnoses of one or	
			ed in section 509(a)(1)						
		-	f supporting organization						
	-		upervised, or controlled	-			-	aivina	
			gularly appoint or elect a						
	-	complete Part IV, Se		i majonty o				apporting	
Ē Š			or controlled in connect	tion with ite	support	od organizativ	n(c) by bo	lina	
			anization vested in the s			0		•	
	0	t complete Part IV,		ame persoi	is that co		ige the supp	Joned	
			g organization operated	in connect	ion with	and functions	ulu intograto	od with	
	-). You must complete				iny integrate	ia with,	
	e		· ·		-	•	rtod organi	zation(a)	
	-		porting organization oper zation generally must sat				•	()	
		°	o ,	•			u an allenin	Veness	
			nplete Part IV, Sections						
			written determination fro			турет, туре	п, туре ш		
	-		nally integrated supporti						
f Enter the number		•	d argonization(a)						
(i) Name of sup		about the supporte	(iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount o	of monetary	(vi) Amount of other	
organizatio			(described on lines 1-10	in your governi Yes	ng document? No	support (see	-	support (see instructions	
			above (see instructions))						
Fotal									

Schedule A (Form 990) 2021

LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT 43-1861294 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	175,092.	148,986.	123,088.	82,777.	111,651.	641,594.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	175,092.	148,986.	123,088.	82,777.	111,651.	641,594.
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)						50,212.
6	Public support. Subtract line 5 from line 4.						50,212. 591,382.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	175,092.	148,986.	123,088.	82,777.	111,651.	641,594.
	Gross income from interest,						
-	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources				92.	1,360.	1,452.
q	Net income from unrelated business				, , , , , , , , , , , , , , , , , , , ,		
Ŭ	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	3,539.	11,311.	19,722.		9,820.	44,392.
44	Total support. Add lines 7 through 10	5,555.	11,5110	19,722.		5,020.	687,438.
	Gross receipts from related activities,					12	622,795.
	First 5 years. If the Form 990 is for th			fourth or fifth toy y			022,155.
13	organization, check this box and stop			· · ·			
Sec	ction C. Computation of Publi						
	Public support percentage for 2021 (I			column (f))		14	86.03 %
	Public support percentage from 2020					15	86.89 %
	33 1/3% support test - 2021. If the o						
108	stop here. The organization qualifies						• v
	33 1/3% support test - 2020. If the		-			or more, check thi	
L.		-					
47-	and stop here. The organization qual		•••			nd line 14 is 10%	
1/8	10% -facts-and-circumstances test						
	and if the organization meets the fact			-	-	-	
	meets the facts-and-circumstances te	-			-		
t	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets th				-		. —
	organization meets the facts-and-circu						►
40	Private foundation. If the organization	on did not check a l	box on line 13. 16a	a. 16b. 17a. or 17b	. check this box a	nd see instructions	; ▶

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	UNITED	STATES AU	JSTRALI	AN FOOTBAL	<u>.</u>		
Schedule A (Form 990) 2021					HACKETT	43-1861294	Page 3
Part III Support Schedule for	or Organizati	ons Describe	ed in Section	on 509(a)(2)			
	المرم بدمام مطلا امميا					lf the even even in etic of faile	

(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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 512						
iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disgualified persons						
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			5			
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support					•	
alendar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	C					
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for th	-					
check this box and stop here						
Section C. Computation of Public						
15 Public support percentage for 2021 (li	ine 8, column (f), d	ivided by line 13, c	olumn (f))		15	%
					16	%
16 Public support percentage from 2020					:•	
6 Public support percentage from 2020 Section D. Computation of Inves	tment Income	e Percentage				
 Public support percentage from 2020 Section D. Computation of Inves Investment income percentage for 20 	tment Income 21 (line 10c, colur	Percentage nn (f), divided by lir			17	
 Public support percentage from 2020 Section D. Computation of Inves Investment income percentage for 20 Investment income percentage from 2 	tment Income 21 (line 10c, colur 2020 Schedule A,	Percentage nn (f), divided by lir Part III, line 17	ne 13, column (f))		17 18	% %
 Public support percentage from 2020 Fection D. Computation of Investigation Investment income percentage for 20 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 2 	tment Income 21 (line 10c, colur 2020 Schedule A, organization did n	e Percentage nn (f), divided by lir Part III, line 17 ot check the box c	ne 13, column (f)) on line 14, and line	15 is more than 3	17 18 3 1/3%, and line	9 9
 Public support percentage from 2020 Section D. Computation of Inves Investment income percentage for 20 Investment income percentage from 2 	tment Income 21 (line 10c, colur 2020 Schedule A, organization did n	e Percentage nn (f), divided by lir Part III, line 17 ot check the box c	ne 13, column (f)) on line 14, and line	15 is more than 3	17 18 3 1/3%, and line	9 9
 Public support percentage from 2020 Section D. Computation of Inves Investment income percentage for 20 Investment income percentage from 2 Investment incom	tment Income 21 (line 10c, colur 2020 Schedule A, organization did n organization did n organization did n	Percentage nn (f), divided by lir Part III, line 17 tot check the box c organization qualif tot check a box on	ne 13, column (f)) on line 14, and line ies as a publicly si line 14 or line 19a	15 is more than 3 upported organiza , and line 16 is mo	17 18 3 1/3%, and line tion 	% % 17 is not , and
 Public support percentage from 2020 Section D. Computation of Inves Investment income percentage for 20 Investment income percentage from 2 Investment income percentage from 2 Investment income percentage from 3 Investment income percentage from 3 Investment income percentage from 3 	timent Income 21 (line 10c, colur 2020 Schedule A, organization did n ad stop here. The organization did n ck this box and st	Percentage nn (f), divided by lir Part III, line 17 tot check the box co organization qualif tot check a box on op here. The organ	ne 13, column (f)) on line 14, and line ies as a publicly si line 14 or line 19a nization qualifies a	15 is more than 3 upported organiza , and line 16 is mo s a publicly suppo	17 18 3 1/3%, and line tion re than 33 1/3% organizatio	% % 17 is not , and n ▶ □

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LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT 43-1861294 Page 4

Part IV Supporting Organizations

Schedule A (Form 990) 2021

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

Section A. All Supporting Organizations

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

16

132024 01-04-21

Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

No

TNC C/O CTARK UACKEMM 13-1961301 ΤΕΛΟΠΕ $CCU \lambda \nabla \nabla \nabla D$

	rt IV Supporting Organizations (continued)	0105	<u> </u>	ige o
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		100	110
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
u	11c below, the governing body of a supported organization?	11a		
Ь	A family member of a person described on line 11a above?	11b		-
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			_
U		11c		
Sec	detail in Part VI. tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		163	NU
•	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,			
800	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
0	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	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		
Sec	tion 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))-		
а	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 entity. Describe in Part VI how you supported a governmental entity (see in	struction	s)	
2	Activities Test. Answer lines 2a and 2b below.	2.1 4 0 1 0 1	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			_
	the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify			
	the supported organization (s) to which the organization was responsible: If these (international and and international and internationa			

those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. b Did the activities described 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.

3 Parent of Supported Organizations. Answer lines 3a and 3b below.

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

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. 132025 01-04-22

3b Schedule A (Form 990) 2021

2a

2b

3a

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. .	UNITED STATES AUSTRALIAN			
	dule A (Form 990) 2021 LEAGUE, INC C/O CLARK, SO			3-1861294 Page 6
	t V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying t		•	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must co	omplet	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	_		
-	emergency temporary reduction (see instructions)	6		

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

Schedule A (Form 990) 2021

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Par					-1001294 Page7
	on D - Distributions	<u></u>			Current Year
1	Amounts paid to supported organizations to accomplish exer	mot purposes		1	ourrent real
	Amounts paid to perform activity that directly furthers exemp			<u> </u>	
-	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3	3	1
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.	5		8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributio Pre-2021	ns	Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
с	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2017				
h	Excess from 2018				

Schedule A (Form 990) 2021

132027 01-04-22

c Excess from 2019
d Excess from 2020
e Excess from 2021

Understand A prom 590, 2021 LEAGUE, INC C/O CLARK, SCHAPER, ILACKETT 43-1861254 Page, 2014 Part V, Section A, Ines 1, 2, 8, 56, 40, 45, 56, 56, 56, 56, 56, 56, 56, 56, 56, 5		UNITED STATES AUSTRALIAN FOOTBALL
	Schedule A 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, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
		Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	•	
	r	

132028 01-04-22

LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT

Schedule A

123171 04-01-21

Identification of Excess Contributions Included on Part II, Line 5

43-1861294

2021

** Do Not File ** *** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
COOPERS BREWERY	48,755.	35,006.
MAVERICK SPORT	19,024.	5,275.
HBC EVENT SERVICES	23,680.	9,931.
. ()		
L Total Excess Contributions to Schedule A, Part II, Line 5	1	50,212.

(Form 990)

Department of the Treasury

Internal Revenue Service

**** PUBLIC DISCLOSURE COPY**

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

202

Nama	of tho	orgor	nization	
INALLE		uluai	IZALION	

the organization	Employer identification number
UNITED STATES AUSTRALIAN FOOTBALL	
LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT	43-1861294

43-1861294

Organization type (check o	ne):
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

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

X 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).

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

ame of or	General (2021) ganization			Emplo	Page 2 yer identification number
) STATES AUSTRALIAN FOOTBALL 2, INC C/O CLARK, SCHAEFER, HACKETT			<u>4</u> 3	-1861294
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space	is needed.		
(a) No.	(b) Name, address, and ZIP + 4	-	(c) Fotal contributior	ıs	(d) Type of contribution
_1		\$	83,8	<u>75.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	-	(c) Total contribution	ıs	(d) Type of contribution
2		\$	10,1	71.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Fotal contributior		(d) Type of contribution
3		\$	7,5	<u>52.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	-	(c) Fotal contributior	าร	(d) Type of contribution
		\$			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributior	าร	(d) Type of contribution
		\$			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	-	(c) Total contributior	15	(d) Type of contribution
<u> </u>		\$			Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021)

23

lame of or	3 (Form 990) (2021) ganization		Page 3 Employer identification number
) STATES AUSTRALIAN FOOTBALL E, INC C/O CLARK, SCHAEFER, HACKETT		43-1861294
Part II		if additional approx is possion	
	Noncash Property (see instructions). Use duplicate copies of Part II	If additional space is needed	J.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	Listo received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions	
3453 11-11-		\$	Schedule B (Form 990) (2021)

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AND STATES AUSTRALIAN FOO	ΠΟΛΤΤ	Employer identification number
	IDAUU	
, INC C/O CLARK, SCHAE		43-1861294
from any one contributor. Complete columns (a) through (e) and the following line er	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the yea htry. For organizations
completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or	r less for the year. (Enter this info. once.) 🕨 \$
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of git	ft
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(b) Durpage of gift	(a) Lies of sift	(d) Description of how gift is held
(b) Furpose of gift	(c) Use of gift	(u) Description of now girt is neith
	(e) Transfer of git	ft
Iransferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of di	
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
	[
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gi	ft
Transferee's name, address, a	nd ZI P + 4	Relationship of transferor to transferee
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
	Use duplicate copies of Part III if additional (b) Purpose of gift Transferee's name, address, a (b) Purpose of gift Transferee's name, address, a (b) Purpose of gift	(b) Purpose of gift (c) Use of gift (e) Transferee's name, address, and ZIP + 4 (e) Transfer of git (b) Purpose of gift (c) Use of gift (e) Transfer of git (e) Transferee's name, address, and ZIP + 4 (e) Transfer of git (b) Purpose of gift (c) Use of gif

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	HEDULE D				I Financial				F		545-0047
(Forn	n 990)			6, 7, 8, 9, 10,	11a, 11b, 11c, 11d	, 11e, 1				ZU	<u> </u>
	ment of the Treasury I Revenue Service	Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.								Open to Inspect	o Public ion
-	e of the organizati	T T T T T T T T T			ALIAN FOOT				mployer id		
	-				RK, SCHAEP					-18612	
Par			-		I Funds or Othe	er Sim	nilar Funds or	Acco	unts. Co	mplete if t	he
	organizatio	n answered "Yes	s" on Form 990), Part IV, line				(1) -			
				ŀ	(a) Donor ac	Ivised t	unds	(b) ⊦	unds and c	other accou	unts
1	Total number at er										
2	Aggregate value o										
3 4	Aggregate value o										
4 5	Aggregate value a				riting that the asset	s held i	in donor advised f	unde			
Ŭ	•				exclusive legal contr				Г	Yes	No
6					lvisors in writing that						
	•	•			donor advisor, or fo	Ũ					
	impermissible priv	ate benefit?			·····	·····				Yes	No
Par	t II Conserv	ation Easem	ents. Comple	ete if the org	anization answered	"Yes" o	on Form 990, Part	IV, line			
1	Purpose(s) of cons	ervation easeme	ents held by the	e organizatio	n (check all that app	oly).		\checkmark			
	Preservation	of land for publi	ic use (for exan	nple, recreat	ion or education)	F	Preservation of a h	istorica	ally importar	nt land are	а
	Protection c	f natural habitat				L F	Preservation of a c	ertified	historic str	ucture	
		of open space									
2		-	e organization h	held a qualifi	ed conservation cor	ntributio	on in the form of a	conser			
	day of the tax year									ine End of t	ne Tax Year
a	Total number of co										
b	Total acreage rest										
C A					cture included in (a)			2			
d			· ·	, i	fter 7/25/06, and no			2	4		
3					ased, extinguished,					ne tax	
5	vear ►	valion easements	s mouneu, trai	isierred, reie	ased, extinguished,	or tern	Innated by the org	anzan	on during ti		
4		where property s	ubiect to cons	ervation ease	ement is located						
5		,	,		odic monitoring, ins	pection	n. handling of				
-	violations, and enf				1.1.1.0		.,		Г	Yes	No
6					nandling of violation					uring the y	ear
					Ū		C C			0 ,	
7	Amount of expens	es incurred in mo	onitoring, inspe	ecting, handl	ing of violations, an	d enfor	cing conservation	easem	ents during	the year	
	▶\$										
8	Does each conser	vation easement	reported on lin	ne 2(d) above	e satisfy the requirer	nents o	of section 170(h)(4)	(B)(i)			
	and section 170(h	(4)(B)(ii)?							[Yes	No No
9	In Part XIII, descril	be how the organ	nization reports	conservatio	n easements in its r	evenue	and expense stat	ement	and		
	balance sheet, and	t include, if appli	cable, the text	of the footno	ote to the organizati	on's fin	ancial statements	that de	escribes the	e	
Der	organization's acc				Aut Historiaal'	Tuese				h-a	
Par			-		Art, Historical	reas	ures, or Other	r Simi	lar Asse	lS.	
		-			990, Part IV, line 8.						
1a		· · ·			3, not to report in its					KS	
					lic exhibition, educa			erance	of public		
h					cial statements that					¢	
D					 to report in its revealed in the second se second second sec second second sec						
				-	exhibition, educatio	n, or re	search in furthera	nce or j		ce,	
	provide the followi	•	•						► \$		
	(ii) Assets include										
2	.,				sures, or other simil						
2					SC 958 relating to th			., prov			
а	-	-	-						▶ \$		
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Par	t III Organizations Maintaining C						s (continu	ed)
3	Using the organization's acquisition, accession	on, and other record	ls, check any of the	following that	at make się	gnificant use of its		
	collection items (check all that apply):							
а	Public exhibition	c		change prog				4
b	Scholarly research	e	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co						XIII.	
5	During the year, did the organization solicit o			-			_	
De	to be sold to raise funds rather than to be ma						Yes	No
Par	t IV Escrow and Custodial Arrang		ete if the organizatio	on answered	I "Yes" on	Form 990, Part IV,	line 9, or	
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodi		•				7.4	
	on Form 990, Part X?					L	Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:				A management	
							Amount	
	Beginning balance							
	Additions during the year							
е	Distributions during the year							
f	Ending balance					1f		
	Did the organization include an amount on Fe					ty?L	Yes	No
	If "Yes," explain the arrangement in Part XIII.					-		
Par	t V Endowment Funds. Complete i						()	
		(a) Current year	(b) Prior year	(c) Two ye	ars back	(d) Three years back	(e) Four y	ears back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g, column (a)) held as:				
а	Board designated or quasi-endowment		_%					
b	Permanent endowment	_%						
с	Term endowment	%						
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administe	ered for the	e organization	_	
	by:	, i i i i i i i i i i i i i i i i i i i					<u> </u>	res No
	(i) Unrelated organizations						3a(i)	
	(ii) Related organizations						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	red on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answered	d "Yes" on Form 990	D, Part IV, line 11a. S	See Form 99	0, Part X, I	ine 10.		
	Description of property	(a) Cost or o basis (investr		t or other (other)	1	ccumulated preciation	(d) Book	value
4.	Land	· · · · ·	Jasis	(30101)				
	Land							
b	Buildings							
C	Leasehold improvements							<u> </u>
	Equipment							
	Other							
Tota	. Add lines 1a through 1e. <i>(Column (d) must e</i>	qual Form 990, Part	<u>X. column (B), line 1</u>	0c.)	<u></u>			0.
						Schedule	D (Form	9 90) 2021

(A) (A) (B) (A) (B) (A) (C) (A) (D) (A) (E) (A) (F) (A) (G) (A) (G) (A) (G) (A) (G) (A) (G) (B) (G) (A) (G) (B) (G) (B) (G) (B) (G) (B) (G) (C) (G) (B) (G) (C) (G)			UNITED	STATES	AUSTRALIA	N FO	OTBAI	ЪL			
Complete if the arganization answered "Ves" on Form 980, Part IV, line 110. See Form 980, Part X, line 12. (a) Description of security or category insurance or evening. (b) Book value (c) Method of valuation: Cost or end of year market value 2) Cobey held equity interests (c) Method of valuation: Cost or end of year market value (c) Method of valuation: Cost or end of year market value (a) (c) (c) (c) (c) (d) (c) (c) (c) (c) (d) (c) (c) (c) (c) (d) (c) (c) (c) (c) (e) (c) (c) (c) (c) (f) (c) (c) (c) (c) (g) (c) (c) (c) (c) (g) (c) (c) (c) (c) (g) (c)					O CLARK,	SCHA	EFER,	HACK	\mathbf{ETT}	43-1861294	Page 3
(d) Description of security or display: yeaking wave discuss; (e) Method of valuation: Cost or end of year market value 1) Financial derivatives (e) Method of valuation: Cost or end of year market value 3) Other (e) Method of valuation: Cost or end of year market value 3) Other (f) Method of valuation: Cost or end of year market value (f) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g)	Part VII										
1) Financial derivatives		-			orm 990, Part IV, lin	ne 11b. \$	See Form	990, Part X	 k, line 12. 		
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Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ 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) TAXES PAYABLE 6, 986. (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) Local L (Column (b) must equal Form 990, Part X, col. (B) line 25.)											
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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	Part X	Other Liabilities.	<u>1990, 1 art A, C</u>	<u>оп. (D) піпе то.)</u>							
(a) Description of liability (b) Book value (1) Federal income taxes			ization answere	ed "Yes" on F	orm 990. Part IV. lin	ne 11e o	r 11f. See	e Form 990.	Part X. I	ine 25.	
(1) Federal income taxes 6,986. (2) TAXES PAYABLE 6,986. (3) (4) (4) (5) (6) (7) (7) (8) (9) (6) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 6,986.	1				, , , ,			,	,		<u>e</u>
(2) TAXES PAYABLE 6,986. (3) (4) (4) (5) (5) (6) (7) (8) (9) (9) Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 6,986.			1	,							
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)										6.9	86.
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)											
(5) (6) (7) (8) (9) Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)											
(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)											
(7) (8) (9) (9) Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 6 , 986.)									
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)											
(9) Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.)											
Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 6 , 986 .											
		<i>(</i>) <i>(</i>	000 E		<u> </u>						186
	•			• • • •							

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

Schedule D (Form 990) 2021

132053 10-28-21

UNITED STATES AUSTRALIAN FOOTBAL

<u>.</u>	UNITED STATES AUSTRALIAN FOOTBALL		2 1061201 - 1
_	edule D (Form 990) 2021 LEAGUE, INC C/O CLARK, SCHAEFER, T rt XI Reconciliation of Revenue per Audited Financial Statements With R		<u>3-1861294 Page</u> 4
Iu	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1			1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		·
- a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities 2b		
c	Recoveries of prior year grants		
d			
e		2	e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b			
c	Add lines 4a and 4b	4	c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)		5
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With E	xpenses per Ret	urn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
с	Other losses 2c		
d			
е		2	le
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.) 4b		
с	Add lines 4a and 4b		c
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
_5	rt 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.

132054 10-28-21

SCHEDULE O (Form 990)	Supplemental Information to Form 990 or 990 Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.	-EZ	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	 Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. 		Open to Public Inspection
Name of the organizatior	UNITED STATES AUSTRALIAN FOOTBALL		identification number
	LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT	43-1	861294
FORM 990, PAI	RT I, LINE 1, DESCRIPTION OF ORGANIZATION MISS	ION:	
PARTICIPATIO	I IN AUSTRAILIAN FOOTBALL IN THE UNITED STATES	. THE	USAFL
PROMOTES PART	TICIPATION BY EMPHASIZING AWARENESS AND A SENS	E OF	
COMMUNITY WI	THIN ITS MEMBERS, BY SETTING STANDARDS BY WHIC	н мемв	ER
CLUBS AGREE	TO ABIDE AND BY FOSTERING YOUTH PROGRAMS ACROS	S THE	UNITED
STATES. WE 2	ARE THE SOLE REPRESENTATIVES OF AUSTRALIAN FOO	TBALL	IN THE
UNITED STATE:	5.		
FORM 990, PAI	RT VI, SECTION A, LINE 6:		
THE ORGANIZA	TION HAS MEMBERS.		
IIIE OKGANIZA			
FORM 990, PA	RT VI, SECTION A, LINE 7A:		
THE BOARD IS	ELECTED AT THE ANNUAL GENERAL MEETING EACH OC	TOBER,	AT WHICH
TIME EACH CLU	JB (APPROXIMATELY 40) VOTES FOR EACH POSITION	AS NEC	ESSARY.
FORM 990, PAI	RT VI, SECTION B, LINE 11B:		
THE TREASURED	R REVIEWS THE 990 WITH THE CERTIFIED PUBLIC AC	COUNTA	NT.
FORM 990, PA	RT VI, SECTION B, LINE 12C:		
PERIODIC REV	TEWS ARE PERFORMED AT LEAST ANNUALLY TO MONITO	R AND	ENFORCE
COMPLIANCE W	TH THE CONFLICT OF INTEREST POLICY. AT THIS M	EETING	THE POLICY
IS REVIEWED	IN FULL AND EACH MEMBER SHALL AFFIRM THEY UNDE	RSTAND	THE
POLICY, SUBM	T A DISCLOSURE LIST, AND SIGN A STATEMENT AFF	IRMING	THEY HAVE
READ THE POLT	CY, AGREE TO COMPLY, AND ACKNOWLEDGE THEY ARE	NOT A	WARE OF ANY
VIOLATIONS.	IF A CONFLICT DOES ARISE, THE INTERESTED PERSO	N WILL	LEAVE THE
MEETING IN WI	HICH THE CONFLICT IS DISCLOSED. THE GOVERNING	BOARD	OR
LHA For Paperwork Re	eduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Sche	dule O (Form 990) 2021
102211 11-11-21	30		

Schedule O (Form 990) 2021	Page 2
Name of the organization UNITED STATES AUSTRALIAN FOOTBALL LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT	Employer identification number 43-1861294
COMMITTEE SHALL THEN DETERMINE WHETHER THE USAFL CAN OBTAI	N, WITH
REASONABLE EFFORTS, A MORE ADVANTAGEOUS TRANSACTION OR ARR	ANGEMENT FROM A
PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF	INTEREST. IF A
MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASON	ABLY POSSIBLE
UNDER THE CIRCUMSTANCES, THE REMAINING MEMBERS OF THE GOVE	RNING BOARD OR
COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE WHETHER THE T	RANSACTION OR
ARRANGEMENT IS IN THE USAFL'S BEST INTEREST.	

IF THE GOVERNING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. APPROPRIATE CORRECTIVE OR DISCIPLINARY ACTION MAY BE TAKEN IF NECESSARY.

FORM 990, PART VI, SECTION C, LINE 19:

THESE DOCUMENTS ARE EITHER ON THE WEBSITE OR ARE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

INDEPENDENT CONTRACTORS:

PROGRAM SERVICE EXPENSES	17,114.
MANAGEMENT AND GENERAL EXPENSES	5,705.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	22,819.

COMMISSIONS, DUES & FEES:		
PROGRAM SERVICE EXPENSES		2,398.
MANAGEMENT AND GENERAL EXPENSES		799.
FUNDRAISING EXPENSES		0.
132212 11-11-21	31	Schedule O (Form 990) 202 ⁻

Schedule O (Form 990) 2021 Name of the organization UNITED STATES AUSTRALIAN FOOTBALL	Page 2 Employer identification number
LEAGUE, INC C/O CLARK, SCHAEFER, HACKETT	43-1861294
TOTAL EXPENSES	3,197.
FOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	26,016.
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