Electronic Return Acknowledgement

Tax Year: 2022 **Return No**: 6572VA

Taxpayer: USA CRICKET ID No : 82-3077896

Return Identification Number : 67082420233075000002

Return Type : 990

Filing Type Description : FEDERAL RETURN

Tax Period Beg. Date : 01/01/2022

Tax Period End Date : 12/31/2022

Contained Alerts : Y

IRS Received Date : 11/03/2023

Completed Validation : Y

Electronic Postmark : 11/3/2023 6:07:00 AM

Return Status : ACCEPTED

IRS Processed Date : 11/3/2023 6:07:00 AM

Balance Due :

Expected Refund :

Payment Indicator : N

PIN Code : PRACTITIONER PIN

Debt Code :

Embedded CRC32 : 0X5E952AD

Computed CRC32 : 0X5E952AD

Form 990

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

<u> </u>	or th	ie 2022 caie	endar year, or tax year beginning		and endir	ng	D. F.			
В	Check if a	applicable:	C Name of organization				I D En	nployer i	identification n	umber
	1		USA CRICKET							
X	Addres	ss change	Doing business as					-307		
	Name	change	Number and street (or P.O. box if m	ail is not delivered to street addre	ess)	Room/su	uite E Te	lephone	number	
	Initial		17304 PRESTON RD, SU	ITE 800			(9	72)8	14-3921	
	1	eturn/terminated	City or town, state or province, coul	ntry, and ZIP or foreign postal co	de		G Gr	oss rece	ipts \$	
	1	ded return	DALLAS, TX 75252						3,257,4	37.
	Applica	ation pending	F Name and address of principal office	er: KULJIT SINGH N	IJJAR		H(a) Is this a grou subordinates?		Yes	X No
			17304 PRESTON RD, SU	ITE 800, DALLAS,	TX 75252		H(b) Are all subor		uded? Yes	No.
<u>I</u>	Tax-ex	xempt status:	X 501(c)(3) 501(c) () (insert no.) 4	947(a)(1) or	527	If "No," a	ttach a lis	t. See instructions	
J	Webs	ite: WW	W.USACRICKET.ORG				H(c) Group exen	nption nun	nber	
K	Form	of organization	on: X Corporation Trust	Association Other	ı	L Year of forma	tion: 2017 M	State of	f legal domicile:	CO
P	art I	Summ	ary							
	1	Briefly des	scribe the organization's mission o	or most significant activities:	THE MISS	SION OF U	SA CRICKE	T SH	ALL BE T	 D
9		GOVERN	, REGULATE, DEVELOP A	AND PROMOTE THE S	PORT OF C	CRICKET.				
au										
/eri	2	Check this	s box if the organization	discontinued its operation	s or dispose	d of more	than 25% of	its ne	t assets.	
Governance	3	Number of	f voting members of the governing	body (Part VI, line 1a)				3		10
	4		f independent voting members of					4		10
ţį	5		ber of individuals employed in cale					5		 5
Activities &	6		ber of volunteers (estimate if neces					6		
Ą	7a		elated business revenue from Part V					7a		
			ated business taxable income from					7b		
							Prior Year		Current Y	ear
•	8	Contribution	ons and grants (Part VIII, line 1h)				1,528,2	54.	2,056	,036.
nue	9		service revenue (Part VIII, line 2g)				1,100,8		1,134	
Revenue	10		nt income (Part VIII, column (A), line				-2,9			NONE
ď	11		enue (Part VIII, column (A), lines 5,				5,0		66	5,471.
	12		nue - add lines 8 through 11 (mus				2,631,1		3,257	
	13		d similar amounts paid (Part IX, col					ONE	3,231	NONE
	14				ONE		NONE			
	4.5	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)					1,003,6		1,366	
Expenses	16 a		nal fundraising fees (Part IX, column					ONE	1,300	NONE
beu	h		raising expenses (Part IX, column (NONE		11	OIVE		INOINE
Ĕ	17		enses (Part IX, column (A), lines 11				3,145,7	2.4	2,033	969
	18		enses. Add lines 13-17 (must equa							
	19						4,149,3 -1,518,2		3,400	,463.
- S		Revenue	ess expenses. Subtract line 18 from	II IIII e 12			nning of Current		End of Ye	
ets o	20	Total assa	to (Port V. line 16)				499,4			,154.
Asse Bala	21		its (Part X, line 16) lities (Part X, line 26)				1,139,2		1,200	
Net Assets or Fund Balances	22		s or fund balances. Subtract line 2				-639,8			,330.
	rt II		ture Block	i iioiii iiile 20			-039,0	0 / .	- / 6 3	,330.
			rjury, I declare that I have examined th	is return including accompany	ing schedules ar	nd etatemente	and to the heet o	of my kn	owledge and h	
true	e, corre	ect, and comp	plete. Declaration of preparer (other than	n officer) is based on all informa	tion of which pre	eparer has any k	nowledge.	n iliy Kii	owiedge and b	ellei, it is
							10/	11 /0/	000	
Sig	ın	Signature o	of officer				Date	11/20	023	
He							Duto			
			' SINGH NIJJAR nt name and title		CHAIRMAN					
			preparer's name	Preparer's signature	10	ate		i _f PT	IN .	
Paid	d	1		1 Toparoi 3 Signatule			Check	ן יי ∟		
	parer	SHISHI			[]	L0/11/202	· ·		01445369	
	Only						Firm's EIN		-2751082	
		Firm's add		OND DRIVE NE ATLANTA, GA			Phone no.	67	85841200	
$\overline{}$			iss this return with the prepare		ructions			<u> </u>	X Yes	No
For	Pape	rwork Red	uction Act Notice, see the separa	te instructions.					Form 99 (J (2022)

Form 990 (2022) Page **2**

THE MISSION OF USA CRICKET SHALL BE TO GOVERN, REGULATE, DEVELOP AND PROMOTE THE SPORT OF CRICKET (INCLUDING HARDBALL, SOFTBALL, DISABILITY CRICKET, AND ALL OTHER CATEGORIES AND TYPES OF CRICKET) AT ALL LEVELS IN THE UNITED STATES. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by	Pa	Statement of Program Service Accomplishments	
THE MISSION OF USA CRICKET SHALL BE TO GOVERN, REGULATE, DEVELOP AND PROMOTE THE SPORT OF CRICKET INCLIDING MARDBALL, SOTTERALL, DISABILITY CRICKET, AND ALL OTHER CATEGORIES AND TYPES OF CRICKET) AT ALL LEVELS IN THE INITIES STATES. 2 Did the organization undertake any significant program services during the year which were not listed on the prior form 990 or 990-627. 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 as services?,		Check if Schedule O contains a response or note to any line in this Part III	
PROMOTE THE SPORT OF CRICKET (INCLUDING HARDBALL, SOFTBALL, DISABILITY CRICKET, AND ALL OTHER CATEGORIES AND TYPES OF CRICKET) AT ALL LEVELS 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 of 980-E27. If "Yes, 'describe these new services on Schedule O. 3 Did the organization cases 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(x)) 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. 4 (Code:) (Expenses \$ 1,781,181, including grants of \$) (Revenue \$) HIGH PERFORMANCE MEN: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA MEN'S NATIONAL CRICKET TRAM AND ITS PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4 (Code:) (Expenses \$ 428,446, including grants of \$) (Revenue \$) HIGH PERFORMANCE WOMEN: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA MOMEN'S NATIONAL CRICKET TRAM AND ITS PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4 (Code:) (Expenses \$ 428,446, including grants of \$) (Revenue \$) MEMBERS OF USA CRICKET. THIS INCLUDES EXPENDITURES ON ACTIVITIES INCLUDING THE MAINTENANCE OF THE MEMBERSHIP DATABASE, INSURANCE AND OTHER MEMBER-RELATED SERVICES.	1	Briefly describe the organization's mission:	
DISABILITY CRICKET, AND ALL OTHER CATEGORIES AND TYPES OF CRICKET) AT ALL LEVELS 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-E27. (I "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? II "Yes," describe these changes on Schedule O. 3 Did the organization program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(e)(3) and 501(e)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each organizations for program service reported. 4a (Code:) (Expenses \$ 1,731,191, including grants of \$) (Revenue \$) HIGH PERFORMANCE MENS. THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA MEN'S NATIONAL CRICKET TEAM AND ITS PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4b (Code:) (Expenses \$ 428,446, including grants of \$) (Revenue \$) HIGH PERFORMANCE WOMEN: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA WOMEN'S NATIONAL CRICKET TEAM AND ITS PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4c (Code:) (Expenses \$ 221,194, including grants of \$) (Revenue \$) MEMBERS OF USA CRICKET, THIS INCLUDES EXPENDITURES ASSOCIATED MITH THE MEMBERS OF USA CRICKET, THIS INCLUDES EXPENDITURES ASSOCIATED MITH THE MEMBERS OF USA CRICKET, THIS INCLUDES EXPENDITURES ASSOCIATED MITH THE INCLUDING THE MAINTENANCE OF THE MEMBERSHIP DATABASE, INSURANCE AND OTHER MEMBER-RELATED SERVICES.		THE MISSION OF USA CRICKET SHALL BE TO GOVERN, REGULATE, DEVELOP AND	
ALL LEVELS 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-E27. 3 Did the organization case conducting, or make significant changes in how it conducts, any program services. 3 Did the organization's conducting or make significant changes in how it conducts, any program services. 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)(d) and 501(c)(d) 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. 4 (Code:) (Expenses 1.731.191. including grants of \$) (Revenue \$) HIGH PERFORMANCE MEN: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA MEN'S NATIONAL CRICKET TEAM AND ITS PARTICIPATION IN EVERTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITORES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4b (Code:) (Expenses \$ 425,446, including grants of \$) (Revenue \$) HIGH PERFORMANCE WOMEN: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA MOMEN'S NATIONAL CRICKET TEAM AND ITS PARTICIPATION IN EVERTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITORES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4c (Code:) (Expenses \$ 231.564, including grants of \$) (Revenue \$) MEMBERS OF USA CRICKET, THIS INCLUDES EXPENDITURES ON ACTIVITIES INCLUDING THE MAINTENANCE OF THE MEMBERSHIP DATABASE, INSURANCE AND OTHER MEMBER-RELATED SERVICES.		PROMOTE THE SPORT OF CRICKET (INCLUDING HARDBALL, SOFTBALL,	
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If Yas, 'describe these new services on Schedule 0. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services, on the organization cease conducting, or make significant changes in how it conducts, any program services, on the very conductive of the organizations program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:) (Expenses \$ 1.7.18.1.91. including grants of \$) (Revenue \$) HIGH PERFORMANCE MENT THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA MENTS NATIONAL CRICKET TEAM AND ITS PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4b (Code:) (Expenses \$ 120,445. including grants of \$) (Revenue \$) PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4c (Code:) (Expenses \$ 161,594. including grants of \$) (Revenue \$) MEMBERSHIP: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE MEMBERSHIP: INCLUDING THE MAINTERNANCE OF THE MEMBERSHIP DATABASE, INSURANCE AND OTHER MEMBER-RELATED SERVICES.		DISABILITY CRICKET, AND ALL OTHER CATEGORIES AND TYPES OF CRICKET) AT	
prior Form 990 or 990-E27		ALL LEVELS IN THE UNITED STATES.	
3 Did the organization cease conducting, or make significant changes in how it conducts, any program services conserved		prior Form 990 or 990-EZ?	X No
services?			
4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(s) and 501(c)(d) 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 \$		services?	X No
expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:)(Expenses \$ 1.721,121. including grants of \$)(Revenue \$) HIGH PERFORMANCE MEN: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA MEN'S NATIONAL CRICKET TEAM AND ITS PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4b (Code:)(Expenses \$ 420,446. including grants of \$)(Revenue \$) HIGH PERFORMANCE MOMEN'S NATIONAL CRICKET TEAM AND ITS ASSOCIATED WITH THE USA MOMEN'S NATIONAL CRICKET TEAM AND ITS PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4c (Code:)(Expenses \$ 221,584. including grants of \$)(Revenue \$) MEMBERSHIP: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE MEMBERS OF USA CRICKET. THIS INCLUDES EXPENDITURES ON ACTIVITIES INCLUDION THE MAINTENANCE OF THE MEMBERSHIP DATABASE, INSURANCE AND OTHER MEMBER-RELATED SERVICES.			surad by
HIGH PERFORMANCE MEN: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA MEN'S MATIONAL CRICKET TEAM AND ITS PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 46 (Code:)(Expenses		expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	
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PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 46 (Code:)(Expenses \$ 428,446. including grants of \$)(Revenue \$) HIGH PERFORMANCE WOMEN: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA WOMEN'S NATIONAL CRICKET TEAM AND ITS PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 46 (Code:)(Expenses \$ 201,584. including grants of \$)(Revenue \$) MEMBERSHIP: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE MEMBERS OF USA CRICKET. THIS INCLUDES EXPENDITURES ON ACTIVITIES INCLUDING THE MAINTENANCE OF THE MEMBERSHIP DATABASE, INSURANCE AND OTHER MEMBER-RELATED SERVICES.		HIGH PERFORMANCE MEN: THIS PROGRAM RELATES TO ACTIVITIES	
THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4b (Code:		ASSOCIATED WITH THE USA MEN'S NATIONAL CRICKET TEAM AND ITS	
4b (Code:)(Expenses \$428,446_ including grants of \$) (Revenue \$) HIGH PERFORMANCE WOMEN: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA WOMEN'S NATIONAL CRICKET TEAM AND ITS PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4c (Code:)(Expenses \$201,584_ including grants of \$) (Revenue \$) MEMBERSHIP: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE MEMBERS OF USA CRICKET. THIS INCLUDES EXPENDITURES ON ACTIVITIES INCLUDING THE MAINTENANCE OF THE MEMBERSHIP DATABASE, INSURANCE AND OTHER MEMBER-RELATED SERVICES.		PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY.	
4b (Code:) (Expenses \$		THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT	
HIGH PERFORMANCE WOMEN: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE USA WOMEN'S NATIONAL CRICKET TEAM AND ITS PARTICIPATION IN EVENTS BOTH DOMESTICALLY AND INTERNATIONALLY. THIS INCLUDES EXPENDITURES RELATING TO PLAYERS, COACHES, SUPPORT STAFF, EQUIPMENT AND TRAVEL. 4c (Code:)(Expenses \$ 201,584 including grants of \$)(Revenue \$) MEMBERSHIP: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE MEMBERS OF USA CRICKET. THIS INCLUDES EXPENDITURES ON ACTIVITIES INCLUDING THE MAINTENANCE OF THE MEMBERSHIP DATABASE, INSURANCE AND OTHER MEMBER-RELATED SERVICES.		STAFF, EQUIPMENT AND TRAVEL.	
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	4c	MEMBERSHIP: THIS PROGRAM RELATES TO ACTIVITIES ASSOCIATED WITH THE MEMBERS OF USA CRICKET. THIS INCLUDES EXPENDITURES ON ACTIVITIES INCLUDING THE MAINTENANCE OF THE MEMBERSHIP DATABASE, INSURANCE	
	4d	Other program services (Describe on Schedule O.)	

Form 990 (2022)
Part IV Checklist of Required Schedules

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

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Part	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		Х
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		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			21
LTU	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
C	to defease any tax-exempt bonds?	24c		
4	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
23 a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		v
h		25a		X
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	256		3.7
20	If "Yes," complete Schedule L, Part I	25b		X
26				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			3.7
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	200		v
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		X
·	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			21
00	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i>	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes,"	<u> </u>		
	complete Schedule N, Part II.	32		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
-	or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note : All Form 990 filers are required to complete Schedule O	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

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

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

	Check if Schedule O contains a response or note to any line in this Part VI					
C = = 1						Х
Sect	ion A. Governing Body and Management			1	Yes	No
		ايما	10		162	NO
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10			
	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.	46	1.0			
b	3 · · · · · · · · · · · · · · · · · · ·	1b	10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel		-			37
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or ur					
	supervision of officers, directors, trustees, or key employees to a management company or other p			3		_X_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi			4		_X
5	Did the organization become aware during the year of a significant diversion of the organization's a			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 el			7 .	37	
	one or more members of the governing body?			7a	X	
b		• /		76	τ,	
_	stockholders, or persons other than the governing body?			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions under	ertake	n during			
	the year by the following:			0-	3.5	
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	be re	ached at			37
Cast	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.			9	١	<u>X</u>
Secti	on B. Policies (This Section B requests information about policies not required by the Inte	mair	Revenue	Code.	Yes	No
				100	103	
	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of		-	10h		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt po	•		10b	37	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi	ling the	form? .	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			425	37	
	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 t		ould give	12b	v	
	rise to conflicts?			120	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the p	•	-	120	v	
	describe on Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			14		X 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 an		- 1			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation			15a	Х	
a	The organization's CEO, Executive Director, or top management official			15b	X	
b	Other officers or key employees of the organization			130	Λ	
	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 simila		ngement	16a		X
	with a taxable entity during the year?		 	ıva		Λ
b	If "Yes," did the organization follow a written policy or procedure requiring the organization					
	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?			16b		
Secti	ion C. Disclosure			100		
17 10		000	and 000 T	100-1	ion F	01/c\
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), (3)s only) available for public inspection. Indicate how you made these available. Check all that ap		anu 990-1	(sect	เบท 5	U I (C)
	X Own website Another's website X Upon request Other (explain on Sc	-	· ()			
40			,			a Barr
19	Describe on Schedule O whether (and if so, how) the organization made its governing document from the state of the problem of the state	ients,	conflict of	inter	est p	olicy,
00	and financial statements available to the public during the tax year.			_		
20	State the name, address, and telephone number of the person who possesses the organization's h	OOKS	and record:	s		

KULJIT-SINGH NIJJAR 7511, ABERDON RD DALLAS, TX 75252

972-814-3921

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

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

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

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

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

(A) Name and title	(B) Average hours per week	box,	unle	Pos heck ss pe	erson	e than o	an	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) RICHARD DONE	40.00									
OPERATIONS DIRECTOR	NONE					X		150,000.	NONE	NONE
(2) ARUNKUMAR JAGADEESH	40.00							130,000.	INOINE	NONE
HEAD COACH	NONE					x		140,000.	NONE	NONE
(3) ROBERT HIGGINS	40.00							110,000.	110112	1,01,1
CEO	NONE			X				83,333.	NONE	NONE
(4) PARAAG MARATHE	5.00							,	-	
CHAIRMAN	NONE	Х						NONE	NONE	NONE
(5) AVINASH GAJE	5.00									
INDIVIDUAL DIRECTOR	NONE	Х						NONE	NONE	NONE
(6) VENU PISIKE	5.00									
INDIVIDUAL DIRECTOR	NONE	Х						NONE	NONE	NONE
(7) SURAJ VISWANATHAN	5.00									
INDIVIDUAL DIRECTOR	NONE	Х						NONE	NONE	NONE
(8) AJITH BHASKAR	5.00									
CLUB DIRECTOR	NONE	Х						NONE	NONE	NONE
(9) SUSHIL NADKARNI	5.00									
LEAGUE DIRECTOR	NONE	X						NONE	NONE	NONE
(10) NADIA GRUNY	5.00									
FEMALE PLAYER DIRECTOR	NONE	X						NONE	NONE	NONE
(11) CATHERINE CARLSON	5.00									
INDEPENDENT DIRECTOR	NONE	X						NONE	NONE	NONE
(12) ROHAN SAJDEH	5.00									
INDEPENDENT DIRECTOR	NONE	Х						NONE	NONE	NONE
(13) SRINIVAS SALVAR	5.00									
MALE PLAYER DIRECTOR	NONE	X						NONE	NONE	NONE
<u>(14)</u>										

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Part \	Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	ye	es,	and F	lig	hest Compensat	ed Emplo	yees (c	ontinue	d)
	(A) Name and title	Average hours per week (list any hours for related organizations	rage Position s per (do not check more list any box, unless person officer and a direct					an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)		Esti amo o comp fro	mated punt of ther ensation m the nization
		below dotted line)	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	er	(W-2/1099-MISC)			and	related izations
	b-total							>	373,333.		NONE		NON:
	tal from continuation sheets to Part VII, S tal (add lines 1b and 1c)	_							NONE 373,333.		NONE NONE		NON:
2 Tot	tal number of individuals (including but not portable compensation from the organization	limited to t						re		\$100,000			11011
													Yes No
	If the organization list any former officingly on the second of the seco											3	Х
org	r any individual listed on line 1a, is the spanization and related organizations grafividual	eater than	\$15	0,0	00?	l If	"Yes	,"	complete Schedu	le J for	such	4	X
5 Dic	d any person listed on line 1a receive or services rendered to the organization? If "Yo	accrue co	mpen	sati	on	from	any	un	related organization	on or indiv	idual	5	X
	n B. Independent Contractors	es, comple	16 301	ieut	ile o	1101	Sucri	ρει	3011			3	
1 Co	mplete this table for your five highest commpensation from the organization. Report of												
	(A) Name and business add	dress							(B) Description of se	rvices	С	(C)	ation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► NONE

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Part VIII Statement of Revenue

		Check if Schedule O contains a respor	nse or note to an	y line in this Part V	/III .		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ervice Contributions, Gifts, Grants, and Other Similar Amounts	1a b c d e f	Federated campaigns		2,056,036. 422,000. 459,459.	422,000. 459,459.		Sections 512-514
Program Service Revenue	c d e f g	EDUCATION FEES GENERAL ADMISSION TICKET INCOME All other program service revenue Total. Add lines 2a-2f		170,803. 24,373. 10,217. 48,078. 1,134,930.	170,803. 24,373. 10,217. 48,078.		
	3 4 5 6a b	Investment income (including dividends, other similar amounts)	proceeds	NONE NONE			
Revenue	c d 7a b	Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) NONE (i) Securities 7a 7b		NONE			
Other Re	c d 8a b c	Net gain or (loss) Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	NONE NONE				
	9a b c 10a	Gross income from gaming activities. See Part IV, line 19 9a Less: direct expenses 9b Net income or (loss) from gaming activities. Gross sales of inventory, less returns and allowances	NONE	NONE			
Miscellaneous Revenue	11a b	Less: cost of goods sold	Business Code	NONE 66,471.	66,471.		
Misc Re	c d e 12	All other revenue		66,471. 3,257,437.	1,201,401.		

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a resp	oonse or note to any line	in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				·
	and domestic governments. See Part IV, line 21	NONE			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	NONE			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	NONE			
4	Benefits paid to or for members	NONE			
	Compensation of current officers, directors,				
	trustees, and key employees	NONE			
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	NONE			
7	Other salaries and wages	1,366,931.	891,678.	475,253.	
	Pension plan accruals and contributions (include	NONE			
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	NONE			
10	Payroll taxes	NONE			
11	Fees for services (nonemployees):				
	Management	NONE			
	Legal	NONE			
	Accounting	64,990.		64,990.	
	Lobbying	NONE		01,750.	
	Professional fundraising services. See Part IV, line 17	NONE			
	Investment management fees	NONE			
		SEE SCHE O			
y	Other. (If line 11g amount exceeds 10% of line 25, column	946,450.	642,248.	304,202.	
12	(A), amount, list line 11g expenses on Schedule O.) Advertising and promotion	NONE	012,210.	301,202.	
13		43,349.	3,273.	40,076.	
	Office expenses Information technology	98,534.	8,363.	90,171.	
14		NONE	0,303.	50,171.	
15	Royalties	NONE			
	Occupancy	877,176.	835,659.	41,517.	
	Travel	0//,1/0.	033,039.	41,317.	
ıø	Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
40					
	Conferences, conventions, and meetings	NONE NONE			
	Interest	NONE			
	Payments to affiliates	3,470.		3,470.	
	Depreciation, depletion, and amortization	NONE		3,470.	
	Insurance	NONE			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
d					
	All other expenses	2 400 000	2 201 201	1 010 680	
	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	3,400,900.	2,381,221.	1,019,679.	NONE
20	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)				
	10110Willing 001 30-2 (A00 300-120)				

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Part X Balance Sheet

			(A) Beginning of year	(B) End of year
	1	Cash - non-interest-bearing	. 122,212. 1	232,692.
	2	Savings and temporary cash investments	NONE 2	NONE
	3	Pledges and grants receivable, net	NONE 3	NONI
	4	Accounts receivable, net	. 200,776. 4	142,489.
	5	Loans and other receivables from any current or former officer, director	,	
		trustee, key employee, creator or founder, substantial contributor, or 35%	Ó	
		controlled entity or family member of any of these persons		NON
	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) .		NONI
515	7	Notes and loans receivable, net	. NONE 7	NON
Assers	8	Inventories for sale or use		NON
1	9	Prepaid expenses and deferred charges SEE SCHEDULE .Q	. 116,385. 9	14,058
	10 a	Land, buildings, and equipment: cost or other		
		basis. Complete Part VI of Schedule D 10a 74,77		
	b	Less: accumulated depreciation		3,810.
	11	Investments - publicly traded securities		NON
	12	Investments - other securities. See Part IV, line 11		NONI
	13	Investments - program-related. See Part IV, line 11		NONI
	14	Intangible assets		NON
	15	Other assets. See Part IV, line 11		24,105.
\neg	16	Total assets. Add lines 1 through 15 (must equal line 33)		417,154.
	17	Accounts payable and accrued expenses		310,825.
	18	Grants payable		NONE
	19	Deferred revenue		NONI
	20	Tax-exempt bond liabilities		NONE
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		NONE
Liabilities	22	Loans and other payables to any current or former officer, director		
		trustee, key employee, creator or founder, substantial contributor, or 35%		27027
		controlled entity or family member of any of these persons		NONE
	23	Secured mortgages and notes payable to unrelated third parties		NONE
	24	Unsecured notes and loans payable to unrelated third parties		NONE
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part >		
		of Schedule D		000 650
	26		530,623. 25	889,659.
_	20	Total liabilities. Add lines 17 through 25	1,139,293. 26	1,200,484.
Se		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.		
ā	27	Net assets without donor restrictions	-650,146. 27	-783,330.
ם	28	Net assets with donor restrictions.	·	-783,330. NONE
runa balances	20	Organizations that do not follow FASB ASC 958, check here	10,279. 20	NOM
ב		and complete lines 29 through 33.		
5	29	Capital stock or trust principal, or current funds	. 29	
Assers	30	Paid-in or capital surplus, or land, building, or equipment fund		
25	31	Retained earnings, endowment, accumulated income, or other funds		
4		Total net assets or fund balances		-783,330.
Net	32	Total net assets of tuno balances		

Form **990** (2022)

Form 990 (2022) Page **12**

Part :	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,2	57 <u>,</u>	<u>437</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,4	00,	<u>900</u> .
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>463</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		-6	39,	<u>867</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		<u>-7</u>	83,	<u> 330</u>
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					
			Г		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed o	n a			
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	_				3.7
	the audit, review, or compilation of its financial statements and selection of an independent accounta			2c		_X_
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for		the	_		
_	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	_		26		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	idits .		3b	990	(2022)
				L OIIII	330	(2022)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 82-3077896

USA	A CRICKET					82-3	077896
Pai	t I Reason for Public Cha	arity Status. (All	organizations must	comple	ete this p	oart.) See instruction	is.
The	e organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)						
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).						
2	A school described in section	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	00).)		
3	A hospital or a cooperative	hospital service o	rganization described	in sectio	n 170(b)	(1)(A)(iii).	
4	A medical research organiz	zation operated in	conjunction with a hos	spital de	scribed ir	n section 170(b)(1)(A)	(iii). Enter the
	hospital's name, city, and st	tate:					
5	An organization operated f	for the benefit of	a college or universit	y owned	d or ope	rated by a governme	ental unit described in
	section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6	A federal, state, or local go	vernment or gove	rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).	
7	An organization that norma	ally receives a sub	stantial part of its su	pport fro	om a go	vernmental unit or fro	om the general public
	described in section 170(b)	(1)(A)(vi). (Compl	ete Part II.)				
8	A community trust describe	ed in section 170(b	o)(1)(A)(vi). (Complete	Part II.)			
9	An agricultural research org	ganization describe	ed in section 170(b)(1)(A)(ix) (operated	I in conjunction with a	land-grant college
	or university or a non-land-	grant college of ag	riculture (see instruct	ions). Ei	nter the i	name, city, and state o	f the college or
	university:						
10	X An organization that norma receipts from activities rela support from gross investm acquired by the organizatio	ted to its exempt finent income and union after June 30, 1	unctions, subject to c nrelated business tax 975. See section 509	ertain ex able inco (a)(2). (0	ceptions ome (less Complete	s; and (2) no more than s section 511 tax) from Part III.)	n 331/3 % of its
11	An organization organized a	•	•	•			
12	An organization organized a	•	•				
	one or more publicly suppo	=			-		
	the box on lines 12a throug					•	_
а	Type I. A supporting orga	•	•	-		• , ,	
	the supported organization				ajority of	the directors or truste	es of the
	supporting organization.	-					(-) h h 2
b	Type II. A supporting org	•				• • •	
	control or management o		-	tne sam	e person	is that control or man	age the supported
_	organization(s). You must	-		م ما اممه		n with and functions	الدنمة معمد ما يبيناه
С	Type III functionally integ						ily integrated with,
اہ	its supported organization		· ·				tad arganization(a)
d	that is not functionally			-			
	requirement (see instruction		• •			•	a an altentiveness
•	Check this box if the orga		-				II Type III
е	functionally integrated, or						п, туре ш
f	Enter the number of supported			porting	nyanizai	ion.	
g	Provide the following information	_					
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
	., ., .,		(described on lines 1-10	listed in yo	ur governing	support (see	other support (see
			above (see instructions))	Yes	ment?	instructions)	instructions)
(A)	ļ						
(B)							
(C)							
(D)							
(E)							
Tota	ıl						

Schedule A (Form 990) 2022 Page **2**

Par	Support Schedule for Orga (Complete only if you checked Part III. If the organization fail	d the box on	line 5, 7, or 8	of Part I or if t	he organizatio	n failed to qua	
S00	tion A. Public Support	o to quality u	nder the tests	noted below, p	noase comple	to rait iii.)	
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
Cale	ildar year (or riscaryear beginning in)	(a) 2010	(b) 2019	(6) 2020	(u) 2021	(e) 2022	(i) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	ee instructions)				12	
13	First 5 years. If the Form 990 is for organization, check this box and stop here.						
Sec	tion C. Computation of Public Supp	ort Percenta	age			1	
14	Public support percentage for 2022 (lin	ne 6, column (f	f), divided by lin	e 11, column (f))	14	9
15	Public support percentage from 2021						9
16a	331/3% support test - 2022. If the org						I
	box and stop here. The organization qu	•		•			
b	331/3% support test - 2021. If the org						
	this box and stop here. The organization	•		•			
17a	10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported						
b	organization	2021. If the or cation meets the	ganization did r ne facts-and-ciro	not check a box cumstances test	on line 13, 16, check this bo	sa, 16b, or 17a x and stop her	, and line e. Explain
18	organization						L

Schedule A (Form 990) 2022 Page **3**

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	NONE	3,404,805.	2,209,858.	1,528,254.	2,056,036.	9,198,953.
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose		654,428.	789,611.	1,105,837.	1,201,410.	3,751,286.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						NONE
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						NONE
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						NONE
6	Total. Add lines 1 through 5	NONE	4,059,233.	2,999,469.	2,634,091.	3,257,446.	12,950,239.
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						NONE
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		584,916.	643,111.	799,900.	764,508.	2,792,435.
С	Add lines 7a and 7b		584,916.	643,111.	799,900.	764,508.	2,792,435.
8	Public support. (Subtract line 7c from						
	line 6.)						10,157,804.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	NONE	4,059,233.	2,999,469.	2,634,091.	3,257,446.	12,950,239.
10 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from similar						
	sources						NONE
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						NONE
	Add lines 10a and 10b						NONE
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on.						NONE
12	Other income. Do not include gain or						
	loss from the sale of capital assets						310375
13	(Explain in Part VI.) Total support. (Add lines 9, 10c, 11,						NONE
13		NONE	4 050 222	2 999 469	2 624 001	2 257 446	12 050 220
14	and 12.)		4,059,233.	2,999,469.	2,634,091.	3,257,446.	12,950,239.
14	organization, check this box and stop here .						
Sec	tion C. Computation of Public Supp						
<u> 15</u>	Public support percentage for 2022 (line 8,			nn (f))		15	78.44%
16	Public support percentage from 2021 Sche		•			16	NONE%
	tion D. Computation of Investment						1401417 \0
<u> 17</u>	Investment income percentage for 2022 (lin			3 column (f))		17	NONE%
18	Investment income percentage for 2022 (iii					18	NONE%
	331/3% support tests - 2022. If the or				-		
1 J a	17 is not more than 331/3%, check this	-					
h	331/3% support tests - 2021. If the orga	-	-	•			
J	line 18 is not more than 331/3%, check						
20	Private foundation If the organization		-				

JSA 2E1221 1.000

Page 4 Schedule A (Form 990) 2022

Part IV Supporting Organizations

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

S

	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	100	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b 5c		
С	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.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	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? <i>If "Yes," provide detail in Part VI.</i>	9c		

10b Schedule A (Form 990) 2022

10a

supporting organizations)? If "Yes," answer line 10b below.

determine whether the organization had excess business holdings.)

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

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

82-3077896 USA CRICKET

Schedul	e A (Form 990) 2022		ı	Page 5
Part	V Supporting Organizations (continued)		1	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and	44-		
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above? A 35% controlled entity of a person described on line 11a er 11b chave? If "Yee" to line 11a 11b er 11a	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .	11c		
Section	on B. Type I Supporting Organizations	110		
00011	511 51 Type Toupperting Organizations		Yes	No
4				
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
Soction	on D. All Type III Supporting Organizations	1		
Secur	on b. 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		163	140
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on 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 ins	structi	ions).	
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e instr		
2	Activities Test. Answer lines 2a and 2b below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	·	Za		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
2				
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
~	of its supported organizations? If "Vas " describe in Part VI the role played by the organization in this regard	2 h		

Schedule A (Form 990) 2022 Page **6**

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nization	S	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 (expla	in in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organ			
Secti	on A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1 N	et short-term capital gain	1		
2 R	ecoveries of prior-year distributions	2		
3 0	ther gross income (see instructions)	3		
4 A	dd lines 1 through 3.	4		
5 D	epreciation and depletion	5		
6 P	ortion of operating expenses paid or incurred for production or collection			
Of	f gross income or for management, conservation, or maintenance of			
	roperty held for production of income (see instructions)	6		
	ther expenses (see instructions)	7		
	djusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 A	ggregate fair market value of all non-exempt-use assets (see			
	structions for short tax year or assets held for part of year):			
a A	verage monthly value of securities	1a		
b A	verage monthly cash balances	1b		
c F	air market value of other non-exempt-use assets	1c		
d T	otal (add lines 1a, 1b, and 1c)	1d		
e D	iscount claimed for blockage or other factors			
(ε	explain in detail in Part VI):			
2 A	cquisition indebtedness applicable to non-exempt-use assets	2		
	ubtract line 2 from line 1d.	3		
4 C	ash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	ee instructions).	4		
5 N	et value of non-exempt-use assets (subtract line 4 from line 3)	5		
	lultiply line 5 by 0.035.	6		
7 R	ecoveries of prior-year distributions	7		
8 M	linimum Asset Amount (add line 7 to line 6)	8		
Secti	on C - Distributable Amount			Current Year
1 A	djusted net income for prior year (from Section A, line 8, column A)	1		
	nter 0.85 of line 1.	2		
3 M	linimum asset amount for prior year (from Section B, line 8, column A)	3		
	nter greater of line 2 or line 3.	4		
	come tax imposed in prior year	5		
6 D	istributable Amount. Subtract line 5 from line 4, unless subject to			
	mergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functiona	Illy integra	ted Type III supporting	g organization

Schedule A (Form 990) 2022

(see instructions).

Schedule A (Form 990) 2022 Page **7**

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sect	ion D - Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1		
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed			
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpo	3				
4	Amounts paid to acquire exempt-use assets	4				
5	5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)					
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which	the organization is resp	onsive			
	(provide details in Part VI). See instructions.	8				
9	9 Distributable amount for 2022 from Section C, line 6 9					
10	10 Line 8 amount divided by line 9 amount					
			(ii)		(iii)	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
С	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2018			
b	Excess from 2019			
С	Excess from 2020			
d	Excess from 2021			
е	Excess from 2022			

Schedule A (Form 990) 2022

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

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

Attach to Form 990 or Form 990-PF.

OMB No. 1545-0047

2022

Name of the organization			Employer identification number				
USA CRICKET			82-3077896				
Organization type (check or	9).						
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	a private foun	ndation				
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a pri	ivate foundation	on				
	501(c)(3) taxable private foundation						
Check if your organization is	covered by the General Rule or a Special Rule.						
	7), (8), or (10) organization can check boxes for both the General	Rule and a Sp	pecial Rule. See				
General Rule							
	n filing Form 990, 990-EZ, or 990-PF that received, during the year or property) from any one contributor. Complete Parts I and II. Secontributions.						
Special Rules							
regulations under 16b, and that rece	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.						
contributor, during literary, or educati	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							
_	t isn't covered by the General Rule and/or the Special Rules doe /, line 2, of its Form 990; or check the box on line H of its Form 9		The state of the s				

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

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

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Page **2**

Name of organization
USA CRICKET

Employer identification number
82-3077896

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	ICC PO BOX DUBAI UNITED ARAB EMIRATES	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
USA CRICKET
Employer identification number
82-3077896

art II	Noncash Property	(see instructions)). Use duplicate co	pies of Part II if additiona	I space is needed.

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

Page 3

Schedule B (Form 990) (2022) Page **4**

Name of or	rganization			Employer identification number					
	USA CRICKET			82-3077896					
Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if addit	the year from any of ions completing Part e year. (Enter this int	one contributor. Only enter the total formation once. So	Complete columns (a) through (e) and of exclusively religious, charitable, etc.					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
	Transferee's name, address, a	(e) Transfe	_	ship of transferor to transferee					
(a) No.									
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
	(e) Transfer of gift								
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
	Transferee's name, address, a	(e) Transfe and ZIP + 4	•	gift Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
	(a) Transfer of wife								
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								

Schedule B (Form 990) (2022)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service Name of the organization Employer identification number USA CRICKET 82-3077896 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes Nο Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after July 25, 2006, and not on 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located _ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (ii) Assets included in Form 990, Part X.....\$_ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

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

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 USA CRICKET 82-3077896 Page **2**

 Using the organization's acquisition, accession, and other records, check any of the following that make significant collection items (check all that apply): a Public exhibition b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purp XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar 	ose in Part								
a Public exhibition b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purp XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar	s No								
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purp XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar	es No								
 c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purp XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar 	es No								
 4 Provide a description of the organization's collections and explain how they further the organization's exempt purp XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar 	es No								
XIII.During the year, did the organization solicit or receive donations of art, historical treasures, or other similar	es No								
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar									
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	Form								
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.									
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not									
included on Form 990, Part X?	s No								
b If "Yes," explain the arrangement in Part XIII and complete the following table:									
Amount									
c Beginning balance									
d Additions during the year									
e Distributions during the year									
f Ending balance									
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ye									
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII									
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.									
	our years back								
	— Jears back								
1a Beginning of year balance									
b Contributions									
c Net investment earnings, gains,									
and losses									
d Grants or scholarships									
e Other expenditures for facilities									
and programs									
f Administrative expenses									
g End of year balance									
a Board designated or quasi-endowment %									
b Permanent endowment %									
c Term endowment %									
The percentages on lines 2a, 2b, and 2c should equal 100%.									
3a Are there endowment funds not in the possession of the organization that are held and administered for the									
organization by:	Yes No								
(i) Unrelated organizations)								
(ii) Related organizations	i)								
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?									
4 Describe in Part XIII the intended uses of the organization's endowment funds.									
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X,	ine 10								
Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book									
(investment) (other) depreciation									
1a Land									
b Buildings									
c Leasehold improvements									
d Equipment	3,810.								
e Other 63,851. 63,851. Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	3,810.								

Schedule D (Form 990) 2022

82-3077896 Page **3** Schedule D (Form 990) 2022 USA CRICKET

OSA CRICKET		02 307	7090 Tage
Part VII Investments - Other Securities.	1 "Voo" on Form 00	90, Part IV, line 11b. See Form 990, Part	V line 12
			A, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	ı
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
	"Yes" on Form 99	00, Part IV, line 11c. See Form 990, Part	X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation:	
		Cost or end-of-year market value	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	l "Ves" on Form 90	00, Part IV, line 11d. See Form 990, Part	Y line 15
· • •	scription) Book value
(1)TRAVEL ADVANCES	Comption	υ,	24,105.
(2)DEPOSITS			NONE
(3)			NONE
(4)			
<u>(5)</u>			
<u>(6)</u>			
(7)			
(8)			
(9) Tatal (Column (b) must equal Form 000, Part V and (P) (lino 15 \		04 105
Total. (Column (b) must equal Form 990, Part X, col. (B) I. Part X Other Liabilities.	IIIe 15.)		24,105.
	l "Yes" on Form 90	00, Part IV, line 11e or 11f. See Form 990	Part X
line 25.	1 100 0111 01111 00	or, raitiv, line rie or rin. eee roini oo	, rait X,
	otion of liability	(b) Book value
(1) Federal income taxes	Tion of hability	U)) BOOK VAIGE
(2)ACCRUED LIABILITIES			347,659.
(3)SHORT-TERM NOTE PAYABLE			450,000.
(4)LONG TERM NOTE PAYABLE			92,000.
(5)			92,000.
(6)			
(7)			
(8)			
(9) Total (Column (b) must occup! Form 000. Part V. col. (P) line 25.)			000 (50
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)			889,659.
2. Liability for uncertain tax positions. In Part XIII, provide the	text of the footnote to	the organization's financial statements that repo	orts the

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

JSA
2E1270 1.000

Schedule D (Form 990) 20

Schedule D (Form 990) 2022 USA CRICKET 82-3077896 Page **4**

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	3,257,437.
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		
C	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	3,257,437.
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	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,257,437.
Part		ırn.	_
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	3,400,900.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	3,400,900.
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.)		
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	3,400,900.
	XIII Supplemental Information.		
Provide 2; Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	Part V, nation	line 4; Part X, line

Schedule D (Form 990) 2022 USA CRICKET 82-3077896 Page **5**

Part XIII Supplemental Information (continued)

Schedule D (Form 990) 2022

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

20**22**Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

Employer identification number

USA CRICKET				82-307789	96
General Information o Form 990, Part IV, line 14		Outside the	United States. Comple	ete if the organization a	nswered "Yes" or
1 For grantmakers. Does the or other assistance, the grantees' award the grants or assistance?	eligibility for	the grants or		ction criteria used to	Yes No
2 For grantmakers. Describe in outside the United States.3 Activities per Region. (The follows)				-	d other assistance
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA/CARIBBEAN			COMPETITION	SUPPORT FOR ATHELETES	37,515.
(2) EUROPE			COMPETITION	SUPPORT FOR ATHELETES	98,093.
(3) MIDDLE EAST AND NORTH AFRICA			COMPETITION	SUPPORT FOR ATHELETES	76,212.
(4) SOUTH AMERICA			COMPETITION	SUPPORT FOR ATHELETES	41,861.
(5) SUB-SAHARAN AFRICA			COMPETITION	SUPPORT FOR ATHELETES	235,028.
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal b Total from continuation sheets to Part I					488,709.
c Totals (add lines 3a and 3b)					488,709.

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

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022 USA CRICKET 82-3077896 Page **2**

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990 Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.								
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
exe	er total number of recipient org mpt 501(c)(3) organization by th	ne IRS, or for which th	ne grantee or counsel has	provided a sec	tion 501(c)(3) equiv	alency letter	▶		
3 Ente	er total number of other organiz	ations or entities					▶		

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(47)							
(18)							

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

USA CRICKET

82-3077896

FORM 990, PART I, LINE 1 DESCRIPTION OF ORGANIZATION MISSION:

PROMOTING CRICKET(INCLUDING HARDBALL, SOFTBALL, DISABILITY CRICKET, AND ALL OTHER CATEGORIES AND TYPES OF CRICKET) AT ALL LEVELS IN THE UNITED STATES, AND TO ENABLE UNITED STATES CRICKETERS TO ACHIEVE SUSTAINED COMPETITIVE EXCELLENCE AND SUCCESSFULLY COMPETE IN NATIONAL AND INTERNATIONAL COMPETITION.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS MEMBERS IN ACCORDANCE WITH THE CONSTITUTION OF THE ORGANIZATION. INCLUDES EXPENDITURES RELATING TO ENHANCING THE SKILLS OF COACHES, MATCH OFFICIALS, AND DEVELOPING ENTRY-LEVEL PROGRAMS.

FORM 990, PART VI, SECTION A, LINE 7A:

INDIVIDUALS ARE ELECTED TO THE BOARD OF DIRECTORS (GOVERNING BODY) IN ACCORDANCE WITH THE PROCESS OUTLINED IN THE CONSTITUTION OF THE ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 7B:

SPECIFIC CHANGES TO THE GOVERNING DOCUMENTS OF THE ORGANIZATION MAY REQUIRE APPROVAL FROM THE MEMBERS IN ACCORDANCE WITH THE PROVISIONS OF THE CONSTITUTION.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ORGANIZATION RETAINS THE SERVICES OF AN INDEPENDENT CPA FIRM TO PREPARE THE ORGANIZATION'S FORM 990. MANAGEMENT REVIEWS THE COMPLETED FORM 990 AND PROVIDES A FULL COPY TO ALL MEMBERS OF THE FINANCE & COMMERCIAL AFFAIRS COMMITTEE AND BOARD OF DIRECTORS (GOVERNING BODY) PRIOR TO FILING THE RETURN.

FORM 990, PART VI, SECTION B, LINE 12C:

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

USA CRICKET

82-3077896

DECLARATIONS ARE SOUGHT, RECEIVED AND ADDRESSED IN ACCORDANCE WITH THE CODE OF ETHICS.

FORM 990, PART VI, SECTION B, LINE 15:

THE SALARY OF THE CEO AND KEY EMPLOYEES WAS DETERMINED BY THE BOARD OF DIRECTORS, WHO CONSIDERED ALL RELEVANT INFORMATION INCLUDING BUT NOT LIMITED TO THE ORGANIZATION'S FINANCIAL POSITION AND THE PREVAILING INDUSTRY & ECONOMIC CONDITIONS.

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

GOVERNING DOCUMENTS AND OTHER RELEVANT INFORMATION IS AVAILABLE ON THE USA CRICKET 82-3077896 ORGANIZATION'S WEBSITE, OR UPON REQUEST.

Name of the organization	Employer identificatio	Employer identification number		
USA CRICKET	82-3077896	82-3077896		
FORM 990, PART IX - OTHER FEES				
	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM	MANAGEMENT	FUNDRAISING
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES
PROFESSIONAL FEES	342,991.	257,787.	85,204.	
EVENT COSTS	314,006.	309,929.	4,077.	
INSURANCE	192,384.	4,700.	187,684.	
OTHER COST	97,069.	69,832.	27,237.	
TOTALS				
	946,450.	642,248.	304,202.	

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14,058.

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TOTALS