9	0
	9

Department of the Treasury

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.

Open to Public Inspection

OMB No. 1545-0047

		enue Service				-	nyyu tor insi	tructions and				ation.			•	cetton	
	For th	e 2022 calen		tax ye	ear begi	nning		, 20)22, ar	nd endii	ıg				, 20		
В	Check if	applicable:	С									D	Employ	er ident	tification nu	nber	
	Add	dress change	Avout R										46-	4016	5716		
	Nar	me change	5420 S									E	Telepho	one num	iber		
	Init	ial return	Greenwo	od V	/illaq	ge, CO	80111						303	-378	-6417		
	Fina	al return/terminated															
	Am	nended return										G	Gross r	eceipts	\$	267,	519.
	App	plication pending	F Name and	address	of princip	al officer:					H(a)	Is this a gro	oup retur	n for sul	bordinates?	Yes	X _{No}
			Same As	СА	bove						H(b)	Are all sub If "No," atta	ordinates	include	ed?	Yes	No
I	Tax-e	exempt status:	X 501(c)(3)	1	501(c) ()	(insert no.)	4947(a)(1) or	527	1	II INO, alla	acii a list	. See m	structions.		
J	Web	site: N/			.,		. ,		· .		H(c)	Group exer	nption nu	umber			
κ	Form	of organization:	X Corporation	1	Trust	Associatio	n Other		L Yea	r of forma		2013	-		legal domicil	e: CO	
	rt I	Summar										2010				00	
	1	Briefly descri	be the organ	izatio	n's mis	sion or mo	st significar	nt activities:	Prom	otion	of	cvcl	ina	for	intere	ested	
0		individu															
nc.																	
Activities & Governance																	
OVE		Check this bo						erations or c						net as	ssets.		
а С		Number of vo												3			4
es é		Number of in Total number												4 5			0
viti		Total number												5 6			0
\cti		Total unrelate												0 7a			0.
4		Net unrelated												7ŭ 7b			0.
											T		r Year		Curr	ent Ye	
	8	Contributions	and grants	(Part)	VIII, line	e 1h)							58,9	75			248.
Revenue		Program service revenue (Part VIII, line 2g)									1	.63,2			207,		
vel		Investment in														- /	
Å	11 (Other revenu	e (Part VIII,	colum	nn (A), I	ines 5, 6d	8c, 9c, 10c	c, and 11e)									
	12	Total revenue	e – add lines	s 8 thr	rough 1	1 (must eq	ual Part VII	I, column (A), line	12)		2	222,2	224.		267,	519.
	13 (Grants and s	imilar amour	nts pai	id (Part	IX, colum	n (A), lines	1-3)									
	14	Benefits paid	to or for me	mbers	s (Part	IX, columr	n (A), line 4)									
<i>"</i>	15	Salaries, oth	er compensa	tion, e	employe	ee benefits	(Part IX, c	olumn (A), li	nes 5	-10)			45,4	44.		64,	590.
ses	16a	Professional	fundraising f	ees (F	Part IX,	column (A	A), line 11e)										
Expenses	b	Total fundrais	sina expense	s (Pa	rt IX. co	olumn (D).	line 25)		1	,650.							
ы		Other expens)		•	-		82,3	200		137,	291
		Total expension	-					-				1	27,7			201,	
		Revenue less										1	94,4				648.
28			, expenseer									eginning o	,		Fnc	of Yea	
Net Assets or Fund Balances	20	Total assets	(Part X, line	16)									.59,3			229,	
Ass Bal	21	Total liabilitie	•											82.			735.
Vet.	22	Net assets or										1	.56,8			222,	
	rt II	Signatur		.03. 01	abtract							L	.50,0	500.		222,	554.
				ovomin	and this ro	turn including	accomponying	cohoduloc and c	tatomo	ate and to	the he	oct of my kn	owlodgo	and hal	liof it is true	corroct	and
comp	plete. De	ies of perjury, I de claration of prepa	irer (other than o	fficer) is	s based or	n all information	on of which pre	barer has any kn	owledge	nts, anu tu).	the be	SE OF THY KI	lowieuge	anu bei	ner, it is true	conect,	anu
Sic	ın	Signature of	officer								[Date					
Sig He	re	Barry	Wiehe							ſ	hai	irman					
	-		t name and title								- <u></u>	LTMUII					
		Print/Type p	preparer's name			Preparer's	signature		0	Date		Che	eck	if	PTIN		
Pai	Ы	Mark (Geris			Mark	Geris						f-employe	_	P00942	2353	
	io epare			zen (CPA	mark	00110		I			501	. cpioy		1 00 7 42		
Us	e Onl	y Firm's addre				ec St S	te 206					Firr	n's EIN	26	-29422	76	
		-	5420		Zucuc									20			

May the IRS discuss this return with the preparer shown above? See instructions .

Greenwood Village, CO 80111

Phone no.

303-933-8646

Form	n 990 (2	2022) Avou	t Racino	g Inc.					46-4	01671	6	P	age 2
Par	t III	Statement	of Progra	m Serv	ice Accomp								
						to any line in this l	Part III						
1	-	y describe the c	-										
	Pro	motion_of	cycling	<u>for</u> i	interested	<u>l individuals</u>	<u>through</u>	a racing	<u>team.</u>	· ·			
										· ·			
										· ·			
2	Did th	e organization u	ndertake any	significar	nt program servi	ces during the year v	which were not	listed on the prio	r				
	Form	990 or 990-EZ?	?							🗌	Yes	Х	No
	lf "Yes	s," describe thes	e new servic	es on Sch	nedule O.								
3						ant changes in how	it conducts, a	any program serv	vices?		Yes	Х	No
_		s," describe thes	0										
4	Sectio	ibe the organization 501(c)(3) and evenue, if any,	d 501(c)(4)	organizat	tions are requir	ments for each of it red to report the am	ts three large nount of grant	st program servions s and allocations	ces, as i s to othe	measure rs, the f	ed by e total ex	xpens (pens	ses. es,
4a	(Code	e:)	(Expenses	\$	193,250.	including grants of	\$) (Re	evenue	\$	20	7,27	1.)
	<u>Cyc</u>	<u>le_racing</u>	<u>team</u>										
										· ·			
										· - ·			
										· ·			
										· - ·			
46	Code	<u>, , , , , , , , , , , , , , , , , , , </u>	(Evpapage	<u>خ</u>		including grants of	Ċ			ć			
40	(Code)	(Expenses	ې 		including grants of	မှ) (Re	evenue	ېې)
										· – – – ·			
										· - ·			
										· ·			
										· ·			
										· - ·			
4c	(Code	<u>. </u>	(Expenses	Ś		including grants of	Ś) (Re	evenue	Ś)
-0	(0000)	(Expenses	т		inolaanig grante of	+	/(100		т			/
										· ·			
4d	Other	program servic	ces (Describ	e on Sch	edule O.)								
	(Expe	enses \$		i	including grant) (Revenue \$)	
4e	Total	program servic	e expenses		193,	250.					Form		

Form 990 (2022) Avout Racing Inc.

Par	τιν	Checklist of Required Schedules			
1		e organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete edule A	1	Yes X	No
2	Is the	e organization required to complete Schedule B, Schedule of Contributors? See instructions	2		Х
3	Did th for p	ne organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates ublic office? <i>If "Yes," complete Schedule C, Part I</i>	3		Х
4	Secti in eff	ion 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election fect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the asse	e organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, ssments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		Х
6	to pro	ne organization maintain any donor advised funds or any similar funds or accounts for which donors have the right ovide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, I	6		х
7	Did th envir	he organization receive or hold a conservation easement, including easements to preserve open space, the conment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8		ne organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," blete Schedule D, Part III.	8		Х
9	for ar	ne organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian mounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation ces? If "Yes," complete Schedule D, Part IV.	9		Х
10	Did ti or in	he organization, directly or through a related organization, hold assets in donor-restricted endowments quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		Х
11	If the or X,	organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, as applicable.			
а		ne organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule art VI.	11a	Х	
b		ne organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total ts reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		Х
С	Did th asset	ne organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total ts reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
d	Did th in Pa	ne organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported art X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did t	he organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did th the o	ne organization's separate or consolidated financial statements for the tax year include a footnote that addresses organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
	Sche	ne organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete edule D, Parts XI and XII	12a		Х
b		the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the	e organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did t	he organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	husin	ne organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, ness, investment, and program service activities outside the United States, or aggregate foreign investments valued 00,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did ti foreig	he organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any gn organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did th or for	ne organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to r foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did th colur	ne organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, nn (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did th lines	ne organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		Х
19		ne organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes,"</i> Delete Schedule G, Part III	19		Х
20a	Did t	he organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	lf "Ye	es" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did t dome	he organization report more than \$5,000 of grants or other assistance to any domestic organization or estic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

Form 990 (2022)Avout Racing Inc.Part IVChecklist of Required Schedules (continued)

BAA

16-	101	671	6	
40-	401	-0/1	.0	

Ì	Pa	n	Р	Δ
	- a	u	5	-

			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	Tes	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .	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? <i>If "Yes," complete Schedule R, Part I.</i>	33		Х
	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
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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		Х
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? <i>If "Yes," complete Schedule R, Part VI.</i>	37		Х
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	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a		res	No
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

Form	n 990 (2022) Avout Racing Inc. 46-401	6716	F	Page 5
Parl	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 State- ments, filed for the calendar year ending with or within the year covered by this return 2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
3a	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).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			Х
	: If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	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
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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?	-		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
	I 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?			X X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
	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?			
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?			
9	Sponsoring organizations maintaining donor advised funds.	· · · · O		
	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?			
	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 12b			
	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.			
	• 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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?			Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>
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
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that wou			
17	result in the imposition of an excise tax under section 4951, 4952, or 4953?			
				4

	rt VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b b a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char	elow	, and	d for					
	Schedule O. See instructions.	iges	011						
_	Check if Schedule O contains a response or note to any line in this Part VI.		<u></u>	. Х					
Sec	ction A. Governing Body and Management		V						
1a	a Enter the number of voting members of the governing body at the end of the tax year1a4If 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.1a		Yes	No					
ł	b Enter the number of voting members included on line 1a, above, who are independent 1b								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х					
4									
	since the prior Form 990 was filed?	4 5		X X					
5 6									
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?								
ł	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
	a The governing body?	8a		Х					
	b Each committee with authority to act on behalf of the governing body?	8b		Х					
9	organization's mailing address? If "Yes," provide the names and addresses on Schedule O.	9		Х					
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	ue Co Yes	· · ·					
10;	a Did the organization have local chapters, branches, or affiliates?	10a	Tes	No X					
	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х					
ł	b Describe on Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O								
-									
12a	a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х					
12a 1	 a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a 12b		Х					
12a 1	 a Did the organization have a written conflict of interest policy? If "No," go to line 13. b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. 	12b 12c							
12a b 0 13	 a Did the organization have a written conflict of interest policy? If "No," go to line 13. b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. Did the organization have a written whistleblower policy? 	12b 12c 13		X					
12a t 0 13 14	 a Did the organization have a written conflict of interest policy? If "No," go to line 13. b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 	12b 12c							
12a t (13 14 15	 a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12b 12c 13 14		X X					
12a t (13 14 15	 a Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a		X X X					
12a t (13 14 15	 a Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14		X X					
12a t 13 14 15 a t	 a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12b 12c 13 14 15a 15b		X X X X X					
12a t 13 14 15 t 16a	 a Did the organization have a written conflict of interest policy? If "No," go to line 13	12b 12c 13 14 15a		X X X					
122 t 13 14 15 t 162 t	 a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12b 12c 13 14 15a 15b		X X X X X					
122 13 14 15 16a 16a	 a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12b 12c 13 14 15a 15b 16a		X X X X					
122 13 14 15 16a 16a	 a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12b 12c 13 14 15a 15b 16a 16b							
122 13 14 15 162 162 17 18	 a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12b 12c 13 14 15a 15b 16a 16b							
122 13 14 15 162 1 162 17 18 19	 a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12b 12c 13 14 15a 15b 16a 16b							
122 13 14 15 162 162 17 18	 a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12b 12c 13 14 15a 15b 16a 16b							

Form 990 (2022) Avout Racing Inc.

46-4016716

Page 6

Form 990 (2022) Avout Racing Inc.	46-4016716	Page 7							
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest C Independent Contractors	Compensated Employe	es, and							
Check if Schedule O contains a response or note to any line in this Part VII	<u></u>								
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending w organization's tax year.	ith or within the								
• List all of the organization's current officers, directors, trustees (whether individuals or organization compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	ns), regardless of amount of								

• 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.

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

		(C)								
(A) Name and title	(B) Average hours per	Pos thar is	s both dire	ector	officer /truste	-		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) Barry Wiebe Chairman	$\frac{10}{0}$	х						0.	0.	0.
(2) Jessica Mullins Executive Dir.	_ <u>20</u>	Х						0.	0.	0.
(3) Becca Blay Director	<u>2</u>	Х						0.	0.	0.
_(4)_Scott_Musgrave Director	<u>8</u>	Х						0.	0.	0.
(6)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
BAA	TEEA0	107L	09/01	1/22				1		Form 990 (2022)

Form 990 (2022) Avout Racing Inc.

Form 990 (2022) Avout Racing Inc. Part VII Section A. Officers, Directors, Tru	istees.	Kev	Em	ola	ove	es. ai	nd Highest Co	46-401671 mpensated Emp	
(A) Name and title	(B) Average hours per week	(do box,	not ch unles	C Pos neck is pe	ition more erson	than on is both a pr/trustee	e (D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	(list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
<u>(15)</u>									
(16)									
(17)									
(18)									
(19)									
(20)									
(21)									
(22)									
(23)									
(24)									
(25)									
1b Subtotal									0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)									0.
2 Total number of individuals (including but not limited from the organization 0								000 of reportable com	
						I-1			Yes No
3 Did the organization list any former officer, direct on line 1a? <i>If "Yes,"complete Schedule J for such</i>	h individu	al							. 3 X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	er than \$1	50,00)0'? /	f "γ	es,	" сотр	olete Schedule J fo	n from or	. 4 X
5 Did any person listed on line 1a receive or accruding for services rendered to the organization? If "Yes	e comper s," comple	isatio e <i>te S</i>	n fro ched	om a lule	any <i>J fc</i>	unrela or such	ted organization o	r individual	. 5 X
Section B. Independent Contractors 1 Complete this table for your five highest compen-	sated ind	enen	dent	cor	ntrac	tors th	nat received more	than \$100,000 of	
compensation from the organization. Report compen	sation for	the ca	alend	lar y	/ear	ending	with or within the o	organization's tax yea	
(A) Name and business addr	ress						(E Description	of services	(C) Compensation
2 Total number of independent contractors (including b \$100,000 of compensation from the organization	out not lim 0	ited to	o thos	se li	isted	above) who received mor	e than	

Form 990 (2022) Avout Racing Inc. Part VIII Statement of Revenue

Page 9

Par	t VI	Statement of Revenue Check if Schedule O contains	a resi	oonse or note to any	/ line in this Part V			П
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ស្ត	1a	Federated campaigns	1a					
Tan Tan	b	Membership dues	1b					
Ū	с	Fundraising events	1c					
ar /	d	Related organizations	1d					
s, s	e	Government grants (contributions)	1e					
Contributions, Gifts, Grants, and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	1f	60,248.				
d di	g	Noncash contributions included in lines 1a-1f	1g					
	h	Total. Add lines 1a-1f			60,248.			
Program Service Revenue	_	_		Business Code				
eve		<u>Race team</u>			207,271.	207,271.		
ě	b							
Nic	C L							
Se	a							
ram	e f	All other program service revenu						
log		Total. Add lines 2a-2f			207 271			
<u> </u>	9 3	Investment income (including divide			207,271.			
	3	other similar amounts)						
	4	Income from investment of tax-e	xemp	t bond proceeds				
	5	Royalties						
		(i) R	eal	(ii) Personal				
	6a	Gross rents 6a						
		Less: rental expenses 6b						
		Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7a	Gross amount from (i) Secu	irities	(ii) Other				
		sales of assets other than inventory 7a						
	b	Less: cost or other basis						
		and sales expenses 7b Gain or (loss) 7c						
		Net gain or (loss)						
-			г					
Other Revenue	8a	Gross income from fundraising events (not including \$						
Vel		of contributions reported on line 1c).	-					
ĥ		See Part IV, line 18	8	a				
Ter	b	Less: direct expenses	8	b				
Ð	С	Net income or (loss) from fundra	ising	events				
	9a	Gross income from gaming activities. See Part IV, line 19	9	a				
	h	Less: direct expenses	9					
		Net income or (loss) from gamin	-					
		Gross sales of inventory, less	Γ					
	1.04	returns and allowances.	10	a				
		Less: cost of goods sold	10					
	С	Net income or (loss) from sales	of inve					
S				Business Code				
e e	11a	·						
lan en	b	'						
scellaneo Revenue	C							
Miscellaneous Revenue	u	All other revenue		L				
		Total revenue. See instructions.			267 510	207 271		0
	14	i otal revenue. See instructions.			267,519.	207,271.	0.	0.

000	tion 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a r				
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			5	
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	60,000.	53,500.	5,000.	1,500.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	4,590.	4,090.	350.	150.
	Fees for services (nonemployees):				
	Management				
	Legal				
	Accounting.				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	51.	51.		
12	Advertising and promotion.	12,566.	12,566.		
13	Office expenses	1,287.	1,287.		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,093.	4,093.		
23		3,323.	3,323.		
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.)				
а	Program Services	65,112.	65,112.		
	Racing costs and supplies	43,355.	43,355.		
c		7,014.	5,873.	1,141.	
d	LICENSES	480.	.,	480.	
	All other expenses.				
	Total functional expenses. Add lines 1 through 24e	201,871.	193,250.	6,971.	1,650.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

BAA

Form 990 (2022) Avout Racing Inc.

46-401	6716
--------	------

Page 11

Part X Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash – non-interest-bearing	159,368.	1	212,897.
2	Savings and temporary cash investments.		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
7	Notes and loans receivable, net		7	
	Inventories for sale or use		8	
Assets 6 8	Prepaid expenses and deferred charges.		9	
a ₹ 10a	Land, buildings, and equipment: cost or other basis.			
	Complete Part VI of Schedule D 10a 20, 465.			
b	Less: accumulated depreciation 10b 4,093.		10c	16,372.
11	Investments – publicly traded securities.		11	
12	Investments – other securities. See Part IV, line 11		12	
13	Investments – program-related. See Part IV, line 11		13	
14	Intangible assets.		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	159,368.	16	229,269
17	Accounts payable and accrued expenses	2,482.	17	4,841
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
<u>o</u> 21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22 22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	Secured mortgages and notes payable to unrelated third parties		22	
23			23 24	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		25	1,894
26	Total liabilities. Add lines 17 through 25.	2,482.	26	6,735
Net Assets or Fund Balances E 2 10 05 67 82 27 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions	156,886.	27	222,534
n 28	Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
6 29	Capital stock or trust principal, or current funds		29	
2 30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
30 31	Retained earnings, endowment, accumulated income, or other funds		30	
32	Total net assets or fund balances	156,886.	32	222,534
N 33	Total liabilities and net assets/fund balances.		33	229,269
Z 33 3AA		159,368.	55	Eorm 990 (2022

		016716		Pa	ge 12	
Par						
	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	2	67,5	519.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	01,8	371.	
3	Revenue less expenses. Subtract line 2 from line 1	3		65,6	548.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	1.	56,8	386.	
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			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	10				
D		10	22	22,5	534.	
Par	t XII Financial Statements and Reporting				_	
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. </u>	
				Yes	No	
1	Accounting method used to prepare the Form 990: X Cash Cash Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	d on a				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х	
-	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separar basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c			
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the U Guidance, 2 C.F.R Part 200, Subpart F?		3a		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			
BAA	TEEA0112L 09/01/22		Form	99 0 ((2022)	

SCHEDULE A (Form 990)

Total

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. 2022 Open to Public

OMB No. 1545-0047

	Attach to Form 990 or Form 990-EZ. Open to Pu						Open to Public		
					Inspection				
Name	Name of the organization Employer identification number						ation number		
	Avout Racing Inc. 46-4016716								
Par				rganizations must				ctions.	
-	<u> </u>		`	For lines 1 through 12,		,	,		
1 2				nurches described in sec t ach Schedule E (Form		b)(1)(A)((1).		
2				ization described in sec		061111	1)/iii)		
4		•		unction with a hospital				Enter the hospital's	
	name, city, a	-							
5	An organizat section 170(I	ion operated for b)(1)(A)(iv). (Co		ge or university owned				escribed in	
6	A federal, sta	ate, or local gov	ernment or governme	ntal unit described in s	ection 1	70(b)(1))(A)(v).		
7			receives a substantial p Complete Part II.)	part of its support from a	governm	ental un	it or from the general pu	blic described	
8	A community	trust described	l in section 170(b)(1)(A)(vi). (Complete Part I	l.)				
9	or university o	r a non-land-gra	nt college of agriculture	tion 170(b)(1)(A)(ix) oper (see instructions). Enter	the nan	ne, city,			
10	X An organizati from activitie investment ir	ion that normall s related to its o come and unre	y receives (1) more the exempt functions, sub	nan 33-1/3% of its supp oject to certain exceptio e income (less section	ort from ns: and	n contrib (2) no r	nore than 33-1/3% of	its support from gross	
11	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).								
12	or more publ	icly supported o	organizations describe	ely for the benefit of, to d in section 509(a)(1) of upporting organization	or sectio	n 509(a)(2). See section 509(a	out the purposes of one a)(3). Check the box on	
а	Type I. A support		on operated, supervise	d, or controlled by its sup a majority of the directo				g the supported ion. You must	
b	Type II. A sum management	pporting organiz	zation supervised or c organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), by the supported organiza	having control or tion(s). You	
c	Type III function	onally integrated s) (see instructi	. A supporting organizations). You must comp	ion operated in connectio	n with, ai A, D, an	nd functi d E.	onally integrated with, its	supported	
d	functionally in	ntegrated. The o	organization generally	anization operated in cor must satisfy a distribu s A and D, and Part V.	nnection tion req	with its s uiremen	supported organization(s t and an attentiveness	;) that is not requirement (see	
e	Check this bo integrated, or	ox if the organiz r Type III non-fu	ation received a writte	en determination from supporting organization	ı.			e III functionally	
f			organizations n about the supported	d organization(c)					
	(i) Name of supported	5	(ii) EIN	(iii) Type of organization	6.0	s the	(v) Amount of monetary	(vi) Amount of other	
·	()			(described on lines 1-10 above (see instructions))	organizat in your g	ion listed overning ment?	support (see instructions)	support (see instructions)	
					Yes	No			
(A)									
(B)									
(C)									
(D)									
(E)									

Part III Support Schedule for Organizations Described in Sections 170(b)(1)A)(i) and 170(b)(1)A(A)(i)	Sche	dule A (Form 990) 2022	Avout Ra	acing Inc.			46-401671	6 Page 2
organization fails to quality under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or facal year for facal year	Par	t II Support Schedule for	Organizations	s Described in	Sections 170	(b)(1)(A)(iv) ar	id 170(b)(1)(A)	(vi)
Section A. Public Support Calendary year (or fiscal year beginning in) 1 minute start revenues level for the organization's benefit and organization's		(Complete only if you checked	the box on line 5,	7, or 8 of Part I or	if the organization	failed to qualify ur	ider Part III. If the	
Calendar year of riscal year memory in the received memory in the re			under the tests is	sted below, pleas	e complete Part II			
beginning in joint (a) all by any control basis and any control basis of the speeded speeded of the speeded speeded of the speeded speeded t	Sec	tion A. Public Support	1	1	1		1	1
millet ary functions benefit and on its behalf. its revenues leved of the organizations benefit and on its behalf. 3 The value of services or facilities through 3 its revenues and organization without charge 4 Total. Add lines 1 through 3 its revenues and organization without charge 5 The portion of total contributions by each person of the portion of total contributions by each person of the portion of total contributions by each person of the portion of total contributions by each person of the portion of total contribution of total contributions by each person of the portion of total contribution of total contributions by each person of the portion of total contribution of total contributions from line 4	Cale begi	nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
organization's benefit and effer paid to or expended on its behalt. Image: services or governmental unit to the organization without charge. 4 Total. Add lines 1 through 3. Image: services or governmental unit to the organization without charge. Image: services or governmental unit to the organization without charge. 4 Total. Add lines 1 through 3. Image: services or governmental unit to the organization of total contributions by each person (offer thrat governmental arganization) included on line 1 that exceeds 2% of the amount shown on line 11, column (0). 6 Public support. Subtract line 5 Section B. Total Support Calendar year or fiscal year beginning in (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 7 Annouts from line 4. Image: section B. Total Support dudients, payments received on securities loars, rents, stimilar sources, rents, dudients, payments received on securities loars, rents, stimilar sources, rents, dudients, securities loars, rents, stimilar sources, rents, dudients, securities loars, rents, stimilar sources, rents, dudients, securities loars, rents, stimilar sources	1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
Total. Add lines 1 through 3	2	organization's benefit and either paid to or expended						
5 The portion of total contributions by each person (other than a governmental unit or publicly support and unit or publicly support built or support support. Subtract line 5 6 Public support. Subtract line 5 7 Amounts from line 4	3	facilities furnished by a governmental unit to the						
contributions by each person (other than a governmental unit or publicly supported that exceeds 2% of the amount shown on line 11, column (0). 6 Public support. Subtract line 5 Section B. Total Support Calendar year (or fiscal year legiming in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 Amounts from line 4.	4	Total. Add lines 1 through 3						
Gettion B. Total Support Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 Amounts from line 4	5	contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 Amounts from line 4		from line 4						
beginning in) Image: Construction of public Support Percentage 7 Amounts from line 4	Sec	tion B. Total Support					•	•
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources. 9 9 Net income from unrelated business activities, whether or not the business is regularly carried on. 9 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). 1 11 Total support. Add lines 7 through 10 1 12 Gross receipts from related activities, etc. (see instructions). 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. 14 2 Gross receipts from related activities, etc. (see instructions). 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. 14 % 14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)). 14 % 15 Public support percentage form 2021 Schedule A, Part II, line 14. 15 % 16 33-1/3% support test-2022. If the organization did not check ab ox on line 13, and line 14 is 33-1/3% or more, check this box and stop here. 13 17a 10%-facts-and-cincumstances test-2021. If the or			(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
dividends, payments received on securities loans, rents, royalties, and income from similar sources	7	Amounts from line 4						
business activities, whether or not the business is regularly carried on	8	dividends, payments received on securities loans, rents, royalties, and income from						
gain or loss from the sale of capital assets (Explain in Part VI.). Image: Computation of Part VI.) 11 Total support. Add lines 7 through 10. Image: Computation of Part VI.) 12 Gross receipts from related activities, etc. (see instructions). Image: Computation of Part VI.) 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(C)(3) organization, check this box and stop here. Image: Computation of Public Support Percentage 14 % 15 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)). Image: Computation of Public Support Percentage 16a 33-1/3% support test-2022. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. Image: Computation of Part VI.) 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 organization qualifies as a publicly supported organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization for the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization meets the fa	9	business activities, whether or not the business is regularly						
through 10 12 12 Gross receipts from related activities, etc. (see instructions). 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	10	gain or loss from the sale of capital assets (Explain in						
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)	11							
organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)). 14 % 15 Public support percentage from 2021 Schedule A, Part II, line 14 15 % 16a 33-1/3% support test-2022. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. □ b 33-1/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization □ b 33-1/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization □ b 33-1/3% support 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 organization. □ b 10%-facts-and-circumstances test. The organization qualifies as a publicly supported organization. □ b 10%-facts-and-circumstances test. The organization qualifies as a publicly	12	Gross receipts from related activ	vities, etc. (see in	structions)			12	
14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) 14 % 15 Public support percentage from 2021 Schedule A, Part II, line 14 15 % 16a 33-1/3% support test-2022. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. □ b 33-1/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization □ 17a 10%-facts-and-circumstances test-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 organization qualifies as a publicly supported organization qualifies as a publicly supported 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 organization. □ b 10%-facts-and-circumstances test-2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more,	13							
15 Public support percentage from 2021 Schedule A, Part II, line 14 15 % 16a 33-1/3% support test-2022. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. □ b 33-1/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization □ 17a 10%-facts-and-circumstances test-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 organization qualifies as a publicly supported organization qualifies as a publicly supported organization. b 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. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test-2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.	Sec	tion C. Computation of Pu	blic Support F	Percentage				
 and stop here. The organization qualifies as a publicly supported organization. b 33-1/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test-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 organization. b 10%-facts-and-circumstances test-2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how 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, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. 								
 b 33-1/3% support test-2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-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 organization. b 10%-facts-and-circumstances test-2021. If the organization did not check a box on line 13, 16a, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. 	16a	33-1/3% support test – 2022. If t and stop here. The organization	he organization c	lid not check the l	box on line 13, an	nd line 14 is 33-1/3	3% or more, chec	k this box
 or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	b	33-1/3% support test–2021. If th	ne organization di	d not check a bo	k on line 13 or 16	a, and line 15 is 3	3-1/3% or more,	check this box
or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	17a	or more, and if the organization	meets the facts-a	and-circumstance	s test. check this	box and stop her	e. Éxplain in Part	VI how
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	b	or more, and if the organization	meets the facts-a	and-circumstance	s test. check this	box and stop her	e. Explain in Part	VI how the
	18	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a	a, or 17b, check th	is box and see in	structions

Schedule A (Form 990) 2022

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

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

Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2018 (c) 2020 (b) 2019 (d) 2021 (e) 2022 (f) Total Gifts, grants, contributions, 1 and membership fees received. (Do not include any "unusual grants.")... 73,338 132,824 222,224 267,519 695,905. 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... 0. 3 Gross receipts from activities that are not an unrelated trade or business under section 513. 0. Tax revenues levied for the organization's benefit and either paid to or expended on 0. its behalf.... The value of services or facilities furnished by a governmental unit to the organization without charge ... Ω Total. Add lines 1 through 5... 0 73,338 132,824 222,224 267,519 695 905. Amounts included on lines 1, 7a 2, and 3 received from disqualified persons... 0 0 0 0 0 0. **b** Amounts included on lines 2 and 3 received from other than disgualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year..... 0 0 0 0 0 Ω c Add lines 7a and 7b.... 0 0 0 0 0 0. 8 Public support. (Subtract line 7c from line 6.). 695,905. Section B. Total Support (c) 2020 (e) 2022 (f) Total (a) 2018 (b) 2019 (d) 2021 Calendar year (or fiscal year beginning in) 9 Amounts from line 6..... 0 73,338 132,824 222,224 267,519 695,905. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . 0. b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975... c Add lines 10a and 10b 0 0 0. 0. 0 0. Net income from unrelated business 11 activities not included on line 10b. whether or not the business is regularly carried on 0. 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in 0. Part VI.)... 13 Total support. (Add lines 9, 10c, 11, and 12)..... 132,824. 222,224. 267,519. 695,905. 0 73,338. First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 Х organization, check this box and stop here. Section C. Computation of Public Support Percentage **15** Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))..... % 15 16 Public support percentage from 2021 Schedule A, Part III, line 15. Ŷ 16 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))..... 17 ە/ە 0\0 18 Investment income percentage from 2021 Schedule A, Part III, line 17..... 18 19a 33-1/3% support tests-2022. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **b** 33-1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization gualifies as a publicly supported organization ... Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions..... 20

Page 4

 Part IV
 Supporting Organizations

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

Section A. All Supporting Organizations

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

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

Section B. Type I Supporting Organizations

Schedule A (Form 990) 2022

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.

Avout Racing Inc.

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.*

Section C. Type II Supporting Organizations

 Yes
 No

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

Section D. All Type III Supporting Organizations

		Yes	No		
Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the					
organization's governing documents in effect on the date of notification, to the extent not previously provided?	1				
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).					
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 tay year? If "Yes," describe in Part VI the role the organization's supported organizations played					
in this regard.					
	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? 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i> By reason of the relationship described on line 2, above, did the organization's supported organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played</i>	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 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 By reason of the relationship described on line 2, above, did the organization's supported 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	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i> By reason of the relationship described on line 2, above, did the organization's supported organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played</i>		

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - a The organization satisfied the Activities Test. Complete line 2 below.
 - **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
 - c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of 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.
- **b** Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

2a

2b

3a

No

Yes

46-4016716

Page 5

Yes

1

2

No

rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	tions	
Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No ns mus	ov. 20, 1970 (explain ir st complete Sections A	n Part VI). See through E.
tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
Net short-term capital gain	1		
Recoveries of prior-year distributions	2		
Other gross income (see instructions)	3		
Add lines 1 through 3.	4		
Depreciation and depletion	5		
Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
Other expenses (see instructions)	7		
Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
Average monthly value of securities	1a		
Average monthly cash balances	1b		
: Fair market value of other non-exempt-use assets	1c		
1 Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt-use assets	2		
Subtract line 2 from line 1d.	3		
Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by 0.035.	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
tion C – Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, column A)	1		
Enter 0.85 of line 1.	2		
Minimum asset amount for prior year (from Section B, line 8, column A)	3		
	4		
	5		
Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization tetion A - Adjusted Net Income Net short-term capital gain Recoveries of prior-year distributions Other gross income (see instructions) Add lines 1 through 3. Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) tion B - Minimum Asset Amount Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets a Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>): Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Multiply line 5 by 0.035. Recoveries of prior-year distributions Minimum Asset Amount Adjusted net income for prior year (from Section A, line 8, column A) Enter 0.85 of line 1. Minimum asset amount for prior year (from Section B, line 8, column A) Enter greater of line 2 or line 3. Income tax imposed in prior year	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nurstructions. All other Type III non-functionally integrated supporting organizations mustriction A - Adjusted Net Income Net short-term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3. 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of properly held for production of income (see instructions) 7 Adjusted Net Income 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 ettion B - Minimum Asset Amount 7 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 a Average monthly value of securities 1a Decount claimed for blockage or other factors 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Muitiply line 5 by 0.035. 6	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A tition A - Adjusted Net Income (A) Prior Year Net short-term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3. 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 6 Other expenses (see instructions) 7 4 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 A varage monthly cash balances 1 1 Fair market value of other non-exempt-use assets 1 1 Poisount clauded fines 1a, 1b, and 1c) 1 1 Discount claude for bourter factors (explain in detail in Part V): 3 2 Acquisition indebtedness applicable to non-exempt-use assets 2 2 S

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

BAA

Schedule A (Form 990) 2022

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	upporting Organiza	tions (continue	d)	
Sec	Current Year				
1	Amounts paid to supported organizations to accomplish exempt pu	1			
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	e details in Part VI)		5	
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 organizati in Part VI). See instructions.	on is responsive (provide	details	8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributic Pre-2022	ons	(iii) Distributable Amount for 2022
-	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2022				
-	From 2017				
b	P From 2018				
	: From 2019				
	From 2020				
	Prom 2021				
1	f Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
	Distributions for 2022 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	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, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
Ŀ	Excess from 2019				
	Excess from 2020				
c	Excess from 2021				
e	Excess from 2022				

BAA

Schedule A (Form 990) 2022

Schedule A (For	m 990) 2022	Avout R	acing Inc.	46-4016716	Page 8
Part VI	III, Iine 12; Part IV B, Iines 1 and 2; I 3a, and 3b; Part V	/, Section A, lines Part IV, Section C, /, line 1; Part V, Se	1, 2, 3b, 3c, 4b, 4c, line 1; Part IV, Sec ction B, line 1e; Pa	tions required by Part II, line 10; Part II, line 17a or 17b; Part 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section on D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, t V, Section D, lines 5, 6, and 8; and Part V, Section E, nal information. (See instructions.)	

	Sun	nlomontal Einancial Statom	antc			. 1040	0047
SCHEDULE D (Form 990)		plemental Financial Stateme e if the organization answered "Yes" on F 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 1			20)22	2
Department of the Treasury Internal Revenue Service		Attach to Form 990. gov/Form990 for instructions and the late			Open f		blic
Name of the organization				Employer id	lentification		r
Arrout Decina	Tna			46 401	C71 C		
Avout Racing Avout Racing Part I Organ		nor Advised Funds or Other Simi	lar Funds or A	46-401			
		"Yes" on Form 990, Part IV, line 6.		looounto			
		(a) Donor advised funds	(b) F	unds and o	other acco	ounts	
	end of year						
55 5	rants from (during year)						
	e at end of year						
		nor advisors in writing that the assets held organization's exclusive legal control?			Yes		No
6 Did the organiza	ation inform all grantees, dong	ors, and donor advisors in writing that grar	nt funds can be us	ed only	1		
for charitable pu	irposes and not for the benefi	t of the donor or donor advisor, or for any	other purpose cor	nferring	Yes		No
	ervation Easements.			L_	<u></u>		
		"Yes" on Form 990, Part IV, line 7.					
		y the organization (check all that apply).					
	of land for public use (for exam		ervation of a histo	5 1			а
	of natural habitat n of open space	Pres	ervation of a certi	fied historic	: structure	3	
		held a qualified conservation contribution in tl	he form of a conser	vation ease	ment on th	۱e	
last day of the t							
				Held at the	End of the	e Tax	Year
		ments					
		ified historic structure included in (a)					
		in (c) acquired after July 25, 2006 and not					
historic structure	e listed in the National Regist	er	2d				
3 Number of conse tax year	rvation easements modified, tra	nsferred, released, extinguished, or terminate	d by the organization	on during the	e		
4 Number of state	s where property subject to c	onservation easement is located					
		egarding the periodic monitoring, inspection nts it holds?			Yes		No
6 Staff and volunte	er hours devoted to monitoring,	inspecting, handling of violations, and enforc	ing conservation ea	sements du	ring the ye	ear	
7 Amount of expen	ses incurred in monitoring, insp	ecting, handling of violations, and enforcing c	onservation easem	ents during	the year		
8 Does each cons	ervation easement reported c	n line 2(d) above satisfy the requirements	of section 170(h)	(4)(B)(i) _	7.4		N
		ante concorruction accomente in ite reveni			Yes		No ot and
include, if applic conservation ea	cable, the text of the footnote sements.	to the organization's financial statements	that describes the	e organizati	on's accoi	unting	g for
Part III Organ Complet	izations Maintaining Co e if the organization answered	Ilections of Art, Historical Treasu "Yes" on Form 990, Part IV, line 8.	res, or Other S	Similar A	ssets.		
historical treasu	res, or other similar assets he	er FASB ASC 958, not to report in its rever and for public exhibition, education, or rese al statements that describes these items.	nue statement and arch in furtheranc	l balance s e of public	heet work service, p	s of a provid	art, le in
historical treasure following amour	es, or other similar assets held t nts relating to these items:	r FASB ASC 958, to report in its revenue or public exhibition, education, or research in	furtherance of pub	lic service, p	provide the	e	
(i) Revenue ind	cluded on Form 990, Part VIII	line 1		\$			
(ii) Assets inclu	ided in Form 990, Part X			\$ <u>.</u>			
2 If the organizatio amounts require	n received or held works of art, ed to be reported under FASB	historical treasures, or other similar assets for ASC 958 relating to these items:	r financial gain, pro	vide the foll	owing		
a Revenue include	ed on Form 990, Part VIII, line	• 1		\$			

pplemental Financial Statements	oplementa	l Financial	Statements
---------------------------------	-----------	-------------	------------

1

OMB No	1545-0047

T

 b Assets included in Form 990, Part X

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

 TEEA3301L
 07/06/22

Schedule D (Form 990) 2022

\$

Schedule D (Form 990) 2022 Avout R	acing Inc.			46-401		Page 2
Part III Organizations Maintain	ning Collection	ons of Art, His	torical Treasures, o	or Other Similar A	ssets (cont	tinued)
3 Using the organization's acquisition, ac items (check all that apply):	cession, and othe	r records, check ar	ny of the following that ma	ake significant use of its	collection	
a Public exhibition			or exchange program			
b Scholarly research		e Other				
c Preservation for future generatio						
4 Provide a description of the organizatio Part XIII.						
5 During the year, did the organization to be sold to raise funds rather than	solicit or receive	e donations of art t as part of the o	t, historical treasures, or reanization's collection?	r other similar assets	Yes	No
Part IV Escrow and Custodial reported an amount on Form	Arrangement	s. Complete if th				
1 a Is the organization an agent, trustee	, custodian or ot	her intermediary	for contributions or othe	er assets not included	Yes	No
on Form 990, Part X? b If "Yes," explain the arrangement in Pa					les	
2 ,					Amount	
c Beginning balance				1c		
d Additions during the year				1d		
e Distributions during the year				1e		
f Ending balance				1f		
2 a Did the organization include an amo	unt on Form 990	, Part X, line 21,	for escrow or custodial	account liability?	Yes	No
b If "Yes," explain the arrangement in	Part XIII. Check	here if the explan	nation has been provide	d on Part XIII		
				- 10		
Part V Endowment Funds. Cor					(-) [h l.
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four yea	ars back
1 a Beginning of year balance						
-					+	
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 balance2 Provide the estimated percentage of	the current year	end balance (lin		201		
a Board designated or guasi-endowme	-		e rg, column (a)) neid a			
b Permanent endowment	8	0				
c Term endowment						
The percentages on lines 2a, 2b, and 2	c should equal 10	0%.				
			and the state of the state of the state of the	f 11		
3a Are there endowment funds not in the p organization by:	ossession of the	organization that a	ire held and administered	for the	Yes	No
(i) Unrelated organizations					. 3a(i)	
(ii) Related organizations					3a(ii)	
b If "Yes" on line 3a(ii), are the related	l organizations li	sted as required	on Schedule R?		. 3b	
4 Describe in Part XIII the intended us	es of the organiz	ation's endowme	ent funds.			
Part VI Land, Buildings, and E	quipment.					
Complete if the organization a	answered "Yes" o	n Form 990, Part	IV, line 11a. See Form 99	90, Part X, line 10.		
Description of property	(a) Cos (ii	st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	value
1 a Land	· · · · · · · · · · · · · · · · · · ·					
b Buildings						
c Leasehold improvements						
d Equipment			20,465.	4,093.	16	6,372.
e Other						
Total. Add lines 1a through 1e. (Column (d	d) must equal Fo	rm 990, Part X, c	column (B), line 10c.)		16	6,372.

Schedule D (Form 990) 2022

BAA

Schedule D	(Form 990) 2022 Avout Racing Inc.			46-4016716	Page 3
Part VII	Investments – Other Securities.		N/A		
	Complete if the organization answered "Yes" or				
	otion of security or category (including name of security)	(b) Book value	(c) Method of valuation	n: Cost or end-of-year market va	alue
	I derivatives				
	held equity interests				
(3) Other					
(A)					
(B)					
(D)					
<u>(E)</u>					
$\frac{(G)}{(U)}$					
(H) (I)					
	(h) must agual Farm 000 Part V salumn (P) ling 12)				
Part VIII	(b) must equal Form 990, Part X, column (B) line 12.) Investments – Program Related.		N/A		
r art vill	Complete if the organization answered "Yes" or	n Form 990. Part IV. line	11c. See Form 990. Part X.	line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation:		ket value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
	(b) must equal Form 990, Part X, column (B) line 13.)				
Part IX	Other Assets. Complete if the organization answered "Yes" or	N/A Form 990 Part IV line		lino 15	
		escription		(b) Book	value
(1)		•			
(2)					
(3)					
(4)					
(5)					
(6) (7)					
(8)					
(9)					
(10)					
	ımn (b) must equal Form 990, Part X, column (B) line 15.)			
Part X	Other Liabilities.				
	Complete if the organization answered "Yes" or		11e or 11f. See Form 990, F		
1.		ription of liability		(b) Book	value
	al income taxes				1 004
(2) payr (3)	oll liabilities				1,894.
(3)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
	(b) must equal Form 990, Part X, column (B) line 25.)				1,894.
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the fo	notnote to the organization's fi	nancial statements that reports the	organization's liability for unce	rtain

tatements that reports the orga tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.....

Schedule D (Form 990) 2022 Avout Racing Inc.	46	-4016716	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statement	s With Revenue per Re	eturn. N/A	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2 a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b.	4 a		
b Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b		4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Part XII Reconciliation of Expenses per Audited Financial Statemen	ts With Expenses per	Return. N/A	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2 a		
b Prior year adjustments	2 b		
c Other losses.	2c		
d Other (Describe in Part XIII.)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b.			
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b		4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
Part XIII Supplemental Information.			

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

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Avout Racing Inc

Employer identification number 46-4016716

Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.