

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2022

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the **2022** calendar year, or tax year beginning and ending

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC.		D Employer identification number 22-1668879
	Doing business as		E Telephone number 908-234-1251
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 21,575,562.
	1040 POTTERSVILLE ROAD, PO BOX 355		H(a) Is this a group return for subordinates? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	City or town, state or province, country, and ZIP or foreign postal code GLADSTONE, NJ 07934		H(b) Are all subordinates included? Yes <input type="checkbox"/> No <input type="checkbox"/>
F Name and address of principal officer: BONNIE B. JENKINS 1040 POTTERSVILLE ROAD, GLADSTONE, NJ 07934			H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527			
J Website: WWW.USET.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other			L Year of formation: 1950 M State of legal domicile: NJ

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SUPPORT THE NEEDS OF AMERICA'S HIGH PERFORMANCE HORSES AND ATHLETES WITH US EQUESTRIAN FEDERATION.		
	2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	45
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	45
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	10
	6 Total number of volunteers (estimate if necessary)	6	16
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	6,820,989.	9,431,023.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,042,002.	528,083.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	70,476.	37,854.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,933,467.	9,996,960.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,201,884.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,424,679.	1,432,276.
16a Professional fundraising fees (Part IX, column (A), line 11e)		136,756.	83,256.
b Total fundraising expenses (Part IX, column (D), line 25)		748,800.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,559,438.	1,480,447.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	7,322,757.	6,030,979.	
19 Revenue less expenses. Subtract line 18 from line 12	1,610,710.	3,965,981.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 32,097,058.	End of Year 32,205,633.
	21 Total liabilities (Part X, line 26)	68,081.	98,839.
	22 Net assets or fund balances. Subtract line 21 from line 20	32,028,977.	32,106,794.

Part II Signature Block

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

Sign Here	Signature of officer <i>Bonnie B. Jenkins</i>	Date 7/10/2023
	BONNIE B. JENKINS, EXECUTIVE DIRECTOR Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name WILLIAM EPSTEIN	Preparer's signature <i>William Epstein</i>
	Firm's name EISNER ADVISORY GROUP LLC	Date 7/10/2023
	Firm's address 733 THIRD AVENUE NEW YORK, NY 10017-2703	Check if self-employed <input type="checkbox"/> PTIN P01307171
		Firm's EIN 87-1353108
		Phone no. 212-949-8700

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

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2022

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

Part I Summary: A For the 2022 calendar year, or tax year beginning and ending; B Check if applicable; C Name of organization UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC.; D Employer identification number 22-1668879; E Telephone number 908-234-1251; F Name and address of principal officer: BONNIE B. JENKINS; G Gross receipts \$ 21,575,562; H(a) Is this a group return for subordinates? Yes No; H(b) Are all subordinates included? Yes No; H(c) Group exemption number; I Tax-exempt status; J Website: WWW.USET.ORG; K Form of organization; L Year of formation: 1950; M State of legal domicile: NJ

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1-7a Activities & Governance; 8-12 Revenue; 13-19 Expenses; 20-22 Net Assets or Fund Balances.

Part II Signature Block

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

Signature Block: Sign Here: Signature of officer BONNIE B. JENKINS, EXECUTIVE DIRECTOR; Date; Preparer: WILLIAM EPSTEIN; Date; Check if self-employed; PTIN P01307171; Firm's name EISNER ADVISORY GROUP LLC; Firm's EIN 87-1353108; Firm's address 733 THIRD AVENUE, NEW YORK, NY 10017-2703; Phone no. 212-949-8700

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

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC.	Taxpayer identification number (TIN) 22-1668879
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1040 POTTERSVILLE ROAD, PO BOX 355	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. GLADSTONE, NJ 07934	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

MARK P. PIOWAR

- The books are in the care of ▶ **1040 POTTERSVILLE ROAD, PO BOX 355 - GLADSTONE, NJ 07934**

Telephone No. ▶ **908-234-1251** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2022** or
▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.

Form 990 (2022)

22-1668879 Page 2

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
**THE USET FOUNDATION SUPPORTS THE COMPETITION, TRAINING, COACHING,
TRAVEL & EDUCATIONAL NEEDS OF AMERICA'S ELITE & DEVELOPING
INTERNATIONAL HIGH PERFORMANCE HORSES & ATHLETES IN PARTNERSHIP WITH
THE U.S. EQUESTRIAN FEDERATION.**

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

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

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

4a (Code: _____) (Expenses \$ 4,695,549. including grants of \$ 3,035,000.) (Revenue \$ _____)
SEE SCHEDULE O.

4b (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4c (Code: _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services (Describe on Schedule O.)
(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses 4,695,549.

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

Part IV Checklist of Required Schedules

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

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

Part IV Checklist of Required Schedules (continued)

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

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	26
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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

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

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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

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

Section A. Governing Body and Management

			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	1a	45		
b Enter the number of voting members included on line 1a, above, who are independent	1b	45		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6			X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9			X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
MARK P. PIWOWAR - 908-234-1251
1040 POTTERSVILLE ROAD, PO BOX 355, GLADSTONE, NJ 07934

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BONNIE B. JENKINS EXECUTIVE DIRECTOR	40.00 0.00			X			304,111.	0.	51,663.	
(2) MARK P. PIOWAR CHIEF FINANCIAL OFFICER	40.00 0.00			X			214,409.	0.	51,663.	
(3) CLIFTON J COTTER JR. DIRECTOR OF FACILITIES	40.00 0.00				X		100,863.	0.	15,688.	
(4) W. JAMES MCNERNEY, JR. CHAIRMAN, PRESIDENT, & CEO	1.00 0.00	X		X			0.	0.	0.	
(5) AKIKO YAMAZAKI SECRETARY	1.00 0.00	X		X			0.	0.	0.	
(6) PHILIP E. RICHTER TREASURER	1.00 0.00	X		X			0.	0.	0.	
(7) WILLIAM H. WEEKS VICE PRESIDENT	1.00 0.00	X		X			0.	0.	0.	
(8) SLOAN LINDEMANN BARNETT TRUSTEE	1.00 0.00	X					0.	0.	0.	
(9) GEORGINA BLOOMBERG TRUSTEE	1.00 0.00	X					0.	0.	0.	
(10) ALEX BOONE TRUSTEE	1.00 0.00	X					0.	0.	0.	
(11) GLORIA CALLEN TRUSTEE	1.00 0.00	X					0.	0.	0.	
(12) JANE FORBES CLARK TRUSTEE	1.00 0.00	X					0.	0.	0.	
(13) GEORGE H. DAVIS, JR TRUSTEE	1.00 0.00	X					0.	0.	0.	
(14) LISA T. DESLAURIERS TRUSTEE	1.00 0.00	X					0.	0.	0.	
(15) WILLIAM CRAIG DOBBS TRUSTEE	1.00 0.00	X					0.	0.	0.	
(16) MARGARET H. DUPREY TRUSTEE	1.00 0.00	X					0.	0.	0.	
(17) JENNIFER GATES TRUSTEE	1.00 0.00	X					0.	0.	0.	

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ELIZABETH FATH TRUSTEE	1.00 0.00	X						0.	0.	0.
(19) LOUIS M. JACOBS TRUSTEE	1.00 0.00	X						0.	0.	0.
(20) ELIZABETH L. JOHNSON TRUSTEE	1.00 0.00	X						0.	0.	0.
(21) S. TUCKER S. JOHNSON TRUSTEE	1.00 0.00	X						0.	0.	0.
(22) CAYCE HARRISON JUDGE TRUSTEE	1.00 0.00	X						0.	0.	0.
(23) ELIZABETH B. JULIANO TRUSTEE	1.00 0.00	X						0.	0.	0.
(24) HOWARD KEENAN TRUSTEE	1.00 0.00	X						0.	0.	0.
(25) FRITZ KUNDRUN TRUSTEE	1.00 0.00	X						0.	0.	0.
(26) ANNE KURSINSKI TRUSTEE	1.00 0.00	X						0.	0.	0.
1b Subtotal								619,383.	0.	119,014.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								619,383.	0.	119,014.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 3

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

SEE PART VII, SECTION A CONTINUATION SHEETS

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

Form 990

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) BEEZIE MADDEN TRUSTEE	1.00 0.00	X						0.	0.	0.
(28) MARY ANNE MCPHAIL TRUSTEE	1.00 0.00	X						0.	0.	0.
(29) FRANK G. MERRILL TRUSTEE	1.00 0.00	X						0.	0.	0.
(30) ELIZABETH MEYER TRUSTEE	1.00 0.00	X						0.	0.	0.
(31) ELIZABETH MILLER TRUSTEE	1.00 0.00	X						0.	0.	0.
(32) MIDSEE WRIGLEY MILLER TRUSTEE	1.00 0.00	X						0.	0.	0.
(33) CAROLINE MORAN TRUSTEE	1.00 0.00	X						0.	0.	0.
(34) KAREN O'CONNOR TRUSTEE	1.00 0.00	X						0.	0.	0.
(35) THOMAS FX. O'MARA TRUSTEE	1.00 0.00	X						0.	0.	0.
(36) SIGNE OSTBY TRUSTEE	1.00 0.00	X						0.	0.	0.
(37) ROBIN PARSKY TRUSTEE	1.00 0.00	X						0.	0.	0.
(38) SUZANNE THOMAS PORTER TRUSTEE	1.00 0.00	X						0.	0.	0.
(39) JULIET REID TRUSTEE	1.00 0.00	X						0.	0.	0.
(40) REBECCA RENO TRUSTEE	1.00 0.00	X						0.	0.	0.
(41) PATTI SCIALFA TRUSTEE	1.00 0.00	X						0.	0.	0.
(42) DIANE THOMAS TRUSTEE	1.00 0.00	X						0.	0.	0.
(43) ANN THOMPSON TRUSTEE	1.00 0.00	X						0.	0.	0.
(44) ZACHARIE VINIOS TRUSTEE	1.00 0.00	X						0.	0.	0.
(45) LAURA Z. WASSERMAN TRUSTEE	1.00 0.00	X						0.	0.	0.
(46) CHESTER C. WEBER TRUSTEE	1.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	20,382.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	9,410,641.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 233,466.				
	h Total. Add lines 1a-1f		9,431,023.				
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		385,343.			385,343.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real	37,695.			
			(ii) Personal				
				0.			
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c	37,695.				
	d Net rental income or (loss)		37,695.			37,695.	
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	11,647,064.			
			(ii) Other				
				11,504,324.			
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c	142,740.				
d Net gain or (loss)		142,740.			142,740.		
8 a Gross income from fundraising events (not including \$ 20,382. of contributions reported on line 1c). See Part IV, line 18	8a		74,278.				
			74,278.				
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events		0.					
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a MISC. INCOME	Business Code	900099	159.		159.	
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d		159.				
12 Total revenue. See instructions		9,996,960.	0.	0.	565,937.		

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	3,000,000.	3,000,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	35,000.	35,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	621,846.	453,948.	43,529.	124,369.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	519,162.	349,715.	26,835.	142,612.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	15,280.	5,727.	7,580.	1,973.
9 Other employee benefits	208,304.	130,987.	39,862.	37,455.
10 Payroll taxes	67,684.	43,922.	11,320.	12,442.
11 Fees for services (nonemployees):				
a Management				
b Legal	12,553.		12,553.	
c Accounting	38,000.		38,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	83,256.			83,256.
f Investment management fees	135,920.		135,920.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	28,250.		28,250.	
12 Advertising and promotion				
13 Office expenses	101,841.	30,130.	64,240.	7,471.
14 Information technology	85,443.	42,722.	42,721.	
15 Royalties				
16 Occupancy	89,134.	22,284.	66,850.	
17 Travel	19,756.	19,163.	198.	395.
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	106,264.	80,761.	9,563.	15,940.
23 Insurance	162,629.	156,124.	6,505.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a COMM. & PUBLIC REL.	516,529.	191,116.	36,157.	289,256.
b REPAIRS & MAINTENANCE	133,950.	133,950.		
c MISCELLANEOUS	50,178.		16,547.	33,631.
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	6,030,979.	4,695,549.	586,630.	748,800.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing		1		
	2 Savings and temporary cash investments	4,188,828.	2	4,190,280.	
	3 Pledges and grants receivable, net	4,552,679.	3	7,327,267.	
	4 Accounts receivable, net	32,816.	4	32,467.	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	60,339.	9	386,334.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,593,220.			
	b Less: accumulated depreciation	10b 4,832,143.	867,341.	10c	761,077.
	11 Investments - publicly traded securities	21,811,572.	11	17,192,286.	
	12 Investments - other securities. See Part IV, line 11	583,483.	12	2,234,642.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	0.	15	81,280.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	32,097,058.	16	32,205,633.		
Liabilities	17 Accounts payable and accrued expenses	68,081.	17	17,559.	
	18 Grants payable		18		
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		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	0.	25	81,280.	
	26 Total liabilities. Add lines 17 through 25	68,081.	26	98,839.	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27 Net assets without donor restrictions	9,884,966.	27	8,904,613.	
	28 Net assets with donor restrictions	22,144,011.	28	23,202,181.	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29 Capital stock or trust principal, or current funds		29		
	30 Paid-in or capital surplus, or land, building, or equipment fund		30		
	31 Retained earnings, endowment, accumulated income, or other funds		31		
	32 Total net assets or fund balances	32,028,977.	32	32,106,794.	
	33 Total liabilities and net assets/fund balances	32,097,058.	33	32,205,633.	

Form **990** (2022)

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

Part XI Reconciliation of Net Assets

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

1 Total revenue (must equal Part VIII, column (A), line 12)	1	9,996,960.
2 Total expenses (must equal Part IX, column (A), line 25)	2	6,030,979.
3 Revenue less expenses. Subtract line 2 from line 1	3	3,965,981.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	32,028,977.
5 Net unrealized gains (losses) on investments	5	-3,811,863.
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	-76,301.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	32,106,794.

Part XII Financial Statements and Reporting

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

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

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7859764.	7017619.	4822896.	6820989.	9431023.	35952291.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	7859764.	7017619.	4822896.	6820989.	9431023.	35952291.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6563513.
6 Public support. Subtract line 5 from line 4.						29388778.

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	7859764.	7017619.	4822896.	6820989.	9431023.	35952291.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	300,444.	354,821.	363,236.	357,814.	385,343.	1761658.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	40,441.	46,755.	33,254.			120,450.
11 Total support. Add lines 7 through 10						37834399.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	77.68 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	75.85 %
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		<input checked="" type="checkbox"/>
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		<input type="checkbox"/>
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		<input type="checkbox"/>
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		<input type="checkbox"/>
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		<input type="checkbox"/>

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	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	%
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 qualifies as a publicly supported organization

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

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
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>		
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? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>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.</i>		
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? <i>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.</i>		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		
1		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> 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? <i>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.</i>			
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? <i>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.</i>			
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? <i>If "Yes" or "No" provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
2a			
2b			
3a			
3b			

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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

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

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

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

Section C - Distributable Amount		(A) Prior Year	(B) Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)		Current Year
2	Enter 0.85 of line 1.		
3	Minimum asset amount for prior year (from Section B, line 8, column A)		
4	Enter greater of line 2 or line 3.		
5	Income tax imposed in prior year		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).		
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC. Employer identification number 22-1668879

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number and acreage, number of easements on historic structures, number of modified easements, number of states, monitoring policy, staff hours, expenses, and requirements for section 170(h)(4)(B)(i).

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures, and amounts for revenue and assets.

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) REAL ESTATE INV. TRUSTS	1,356,415.	END-OF-YEAR MARKET VALUE
(B) PRIVATE CREDIT FUNDS	878,227.	END-OF-YEAR MARKET VALUE
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	2,234,642.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITY	81,280.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	81,280.

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

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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

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

1	Total revenue, gains, and other support per audited financial statements	1	6,049,177.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-3,811,863.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	-3,811,863.
3	Subtract line 2e from line 1	3	9,861,040.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	135,920.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	135,920.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	9,996,960.

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

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

1	Total expenses and losses per audited financial statements	1	5,971,360.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	76,301.
e	Add lines 2a through 2d	2e	76,301.
3	Subtract line 2e from line 1	3	5,895,059.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	135,920.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	135,920.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	6,030,979.

Part XIII Supplemental Information.

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

PART II, LINE 9:

IN FEBRUARY 2001, THE FOUNDATION WAS GRANTED AN EASEMENT FOR APPROXIMATELY 120 ACRES OF THE LAND AND BUILDINGS THAT HAD PREVIOUSLY BEEN SET ASIDE FOR THE FOUNDATION'S USE. THIS CONVEYANCE PROVIDES FOR THE USE OF THE LAND AND BUILDINGS IN PERPETUITY, AT NO COST TO THE FOUNDATION OTHER THAN FOR RELATED MAINTENANCE AND REPAIRS. THE FOUNDATION DOES NOT HAVE TITLE TO THE LAND OR BUILDINGS AND, ACCORDINGLY, DOES NOT HAVE ANY RIGHTS ASSOCIATED WITH OWNERSHIP. THE FOUNDATION MAY ONLY USE THE LAND AND BUILDINGS FOR EQUESTRIAN PURPOSES; THE CHARACTER OF THE PROPERTY IS TO REMAIN AS IT WAS AT THE DATE OF THE GRANT, AND ANY ALTERATIONS OR MODIFICATIONS TO THE EXISTING LANDSCAPE MUST BE APPROVED BY THE GRANTOR. THIS CONVEYANCE IS NOT INCLUDED AS A CONTRIBUTION OR AN ASSET IN THE FINANCIAL STATEMENTS.

Part XIII Supplemental Information (continued)

PART V, LINE 4:

ENDOWMENT:

THE FOUNDATION'S ENDOWMENT WAS ESTABLISHED BASED ON ITS MISSION AND
CONSISTS OF BOTH ONE DONOR RESTRICTED ENDOWMENT FUND AND FOUR FUNDS
DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENT. DONORS MAY
DIRECT THAT THE INVESTMENT INCOME ON THEIR GIFTS BE WITHOUT DONOR
RESTRICTION OR DESIGNATED FOR A PARTICULAR DISCIPLINE OR PURPOSE.

PART X, LINE 2:

THE FOUNDATION IS SUBJECT TO THE PROVISIONS OF THE FINANCIAL ACCOUNTING
STANDARDS BOARD'S ASC TOPIC 740, INCOME TAXES, AS IT RELATES TO ACCOUNTING
AND REPORTING FOR UNCERTAINTY IN INCOME TAXES. FOR THE FOUNDATION, THESE
PROVISIONS COULD BE APPLICABLE TO THE INCURRENCE OF UNRELATED BUSINESS
INCOME TAX ("UBIT"). BECAUSE OF THE FOUNDATION'S GENERAL TAX-EXEMPT
STATUS, ASC TOPIC 740 HAS NOT HAD, AND IS NOT ANTICIPATED TO HAVE, A
MATERIAL IMPACT ON THE FOUNDATION'S FINANCIAL STATEMENTS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

LOSS ON UNCOLLECTIBLE PLEDGES OF \$76,301.

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		CLUB 10 - PRATONI ITAL (event type)	PARAGOLD MOVIE PREMIE (event type)	4 (total number)		
Revenue	1	Gross receipts	49,200.	15,800.	29,660.	94,660.
	2	Less: Contributions	2,051.	6,940.	11,391.	20,382.
	3	Gross income (line 1 minus line 2)	47,149.	8,860.	18,269.	74,278.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	8,910.	5,260.	777.	14,947.
	7	Food and beverages	18,000.	3,600.	4,862.	26,462.
	8	Entertainment				
	9	Other direct expenses	20,239.		12,630.	32,869.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				74,278.
11	Net income summary. Subtract line 10 from line 3, column (d)				0.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No
 b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____
- c If "Yes," enter name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: DONORVOICE LLC

(I) ADDRESS OF FUNDRAISER:

11710 PLAZA AMERICA DR, SUITE 2000, RESTON, VA 20190

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

**Employer identification number
22-1668879**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
US EQUESTRIAN FEDERATION, INC. 4047 IRON WORKS PARKWAY LEXINGTON, KY 40511	56-2350714	501C3	3,000,000.	0.			EQUESTRIAN GRANTS

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

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

Schedule I (Form 990) 2022

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CONNAUGHT AWARD	1	25,000.	0.		
AMANDA PIRIE-WARRINGTON RIDER GRANT	1	10,000.	0.		

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

PART I, LINE 2:

UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC. BOARD MEMBERS, WHO ARE ALSO
ON SEVERAL OF THE UNITED STATES EQUESTRIAN FEDERATION FINANCIAL COMMITTEES,
MONITOR THE USE OF GRANT FUNDS VIA A YEAR-END REPORT AS WELL AS MONITOR THE
OUTSIDE ORGANIZATION'S BUDGETS AND EXPENSE RECEIPTS. ADDITIONAL ANALYSIS
INCLUDES COMPARING ACTUAL TO ESTIMATED AMOUNTS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization **UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC.** Employer identification number **22-1668879**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2022

**UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.**

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) BONNIE B. JENKINS EXECUTIVE DIRECTOR	(i)	239,111.	65,000.	0.	13,500.	38,163.	355,774.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARK P. PIWOWAR CHIEF FINANCIAL OFFICER	(i)	182,409.	32,000.	0.	13,500.	38,163.	266,072.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

UNITED STATES EQUESTRIAN TEAM
FOUNDATION, INC.

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

A COMPENSATION COMMITTEE CONSISTING OF THE OFFICERS AND THE EXECUTIVE
COMMITTEE REVIEWS THE PERFORMANCE OF THE EXECUTIVE DIRECTOR, OFFICERS AND
KEY EMPLOYEES DURING THE YEAR AND BASE THE COMPENSATION INCREASE ON THEIR
PERFORMANCE.

PART I, LINE 7:

AT EACH YEAR-END, AN ANNUAL PERFORMANCE REVIEW IS PERFORMED. THE BOARD, IN
CONJUNCTION WITH THE COMPENSATION COMMITTEE, SHALL CONSIDER PAYING
DISCRETIONARY PERFORMANCE BONUSES.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization **UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC.** Employer identification number **22-1668879**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	8	233,466.	COMPARABLE SALES
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? **X**

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **X**

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **X**

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a		X

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

Schedule M (Form 990) 2022

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE AMOUNT REPORTED REPRESENTS THE NUMBER OF CONTRIBUTIONS.

SCHEDULE M, LINE 33:

THE FOUNDATION USES A THIRD PARTY BROKER TO SELL GIFTED SECURITIES.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization	UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC.	Employer identification number	22-1668879
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FORM 990, PART III, LINE 4A

THE VISION

TO PROMOTE INTERNATIONAL RELATIONSHIPS, GOODWILL AND BETTER
UNDERSTANDING OF THE UNITED STATES THROUGH COMPETITION OF EQUESTRIAN
TEAMS AND INDIVIDUALS OF THE UNITED STATES WITH SIMILAR TEAMS AND
INDIVIDUALS FROM OTHER NATIONS IN THE OLYMPIC GAMES, PARALYMPIC GAMES,
PAN AMERICAN GAMES, WORLD CHAMPIONSHIPS AND OTHER INTERNATIONAL
EQUESTRIAN COMPETITIONS WHILE FOSTERING THE HIGHEST IDEALS OF
HORSEMANSHIP AND THE WELFARE OF THE HORSE.

THE MISSION

THE USET FOUNDATION SUPPORTS THE COMPETITION, TRAINING, COACHING,
TRAVEL AND EDUCATIONAL NEEDS OF AMERICA'S ELITE AND DEVELOPING
INTERNATIONAL HIGH PERFORMANCE HORSES AND ATHLETES IN PARTNERSHIP WITH
US EQUESTRIAN.

THE GOALS

SUPPORTING ATHLETES
PROMOTING INTERNATIONAL EXCELLENCE
BUILDING FOR THE FUTURE

YEAR IN REVIEW

THE USET FOUNDATION PROVIDED GRANTS IN SUPPORT OF US EQUESTRIAN HIGH
PERFORMANCE PROGRAMS TOTALING \$3,035,000 DURING THE FISCAL YEAR ENDING
DECEMBER 31, 2022.

Name of the organization	UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC.	Employer identification number	22-1668879
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DRESSAGE

TEAM SILVER, CDIO5 * ROTTERDAM NATIONS CUP ROTTERDAM, NED

- KATIE DUERRHAMMER AND PAXTON OWNER: KYLEE LOURIE

- BEN EBELING AND ILLUSTER VAN DE KAMPERT OWNER: ACR ENTERPRISES, INC.

- ASHLEY HOLZER AND VALENTINE OWNER: ASHLEY HOLZER

- ALICE TARJAN AND SERENADE MF OWNER: ALICE TARJAN

TEAM SILVER, CDIO3* NATIONS CUP WELLINGTON, USA

- BIANCA BERKTOLD AND IMPERIAL OWNER: BIANCA BERKTOLD

- KATIE DUERRHAMMER AND QUARTETT OWNER: KYLEE LOURIE

- SUSIE DUTTA AND DON DESIGN DC OWNER: SUSAN DUTTA

- BEN EBELING AND INDEED OWNER: VANTAGE EQUESTRIAN GROUP II, LLC

TEAM SILVER, FEI NATIONS CUP CDIO-U25 WELLINGTON, USA

- KAYLEE CHRISTENSEN AND CHATEAU 28 OWNER: KATE AND KAYLEE CHRISTENSEN

- QUINN IVERSON AND BECKHAM 19 OWNER: BILLE DAVIDSON

- NICOLE SCARPINO AND LAMBADA 224 OWNERS: NICOLE AND JENNIFER SCARPINO

7TH PLACE, CDIO5* AACHEN NATIONS CUP AACHEN, GER

- KATIE DUERRHAMMER AND QUARTETT OWNER: KYLEE LOURIE

- BEN EBELING AND INDEED OWNER: VANTAGE EQUESTRIAN GROUP II, LLC

- CHARLOTTE JORST AND KASTEL'S NINTENDO OWNER: KASTEL DENMARK

- STEFFEN PETERS AND SUPPENKASPER OWNERS: AKIKO YAMAZAKI AND FOUR

WINDS FARM

8TH PLACE, HAGEN CDIO-Y "FUTURE CHAMPIONS" NATIONS CUP HAGEN, GER

- CHRISTIAN SIMONSON AND SON OF A LADY OWNER: CHRISTINA MORGAN

- ERIN NICHOLS AND HANDSOME ROB AR OWNER: DIANE NICHOLS

- MACKENZIE PEER AND ANSGAR OWNER: LANE PEERS

CDI4* AACHEN WORLD EQUESTRIAN FESTIVAL AACHEN, GER

Name of the organization	UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC.	Employer identification number	22-1668879
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- ADRIENNE LYLE AND SALVINO OWNER: BETSY JULIANO, LLC

- SARAH TUBMAN AND FIRST APPLE OWNER: SUMMIT FARMS

CDIO COMPIEGNE NATIONS CUP COMPIEGNE, FRA

- SUSAN DUTTA AND DON DESIGN DC OWNER: SUSAN DUTTA

- BEN EBELING AND INDEED OWNER: VANTAGE EQUESTRIAN GROUP II, LLC

- JAN EBELING AND BELLENA OWNER: ANN ROMNEY

FEI DRESSAGE WORLD CUP LEIPZIG, GER

- ANNA BUFFINI AND FRH DAVINIA LA DOUCE OWNER: ANNA BUFFINI

- ASHLEY HOLZER AND HAVANNA 145 OWNER: DIANE FELLOWS

FEI WORLD BREEDING CHAMPIONSHIPS ERMELO, NED

- JENNIFER HOFFMANN AND MANI'S ENDEAVOR OWNER: NASRIN MANI

- SABINE SCHUT-KERY AND GORGEOUS LATINO OWNER: SANDY MANCINI

FEI WORLD CHAMPIONSHIPS HERNING, DEN 2024 PARIS OLYMPIC

QUALIFICATION

- KATIE DUERRHAMMER AND QUARTETT OWNER: KYLEE LOURIE

- ASHLEY HOLZER AND VALENTINE OWNER: ASHLEY HOLZER

- ADRIENNE LYLE AND SALVINO OWNER: BETSY JULIANO, LLC

- STEFFEN PETERS AND SUPPENKASPER OWNERS: AKIKO YAMAZAKI AND FOUR

WINDS FARM

FESTIVAL OF CHAMPIONS, WAYNE, USA

MARKEL/USEF YOUNG HORSE CHAMPIONSHIPS FOUR-YEAR OLD:

- CHAMPION: ADRIENNE LYLE AND FURST DREAM OWNER: BETSY JULIANO, LLC

- RESERVE CHAMPION: ALICE TARJAN AND ICE PRINCESS OWNER: ALICE TARJAN

MARKEL/USEF YOUNG HORSE CHAMPIONSHIPS FIVE-YEAR OLD:

- CHAMPION: ADRIENNE LYLE AND VALOR OWNER: KYLEE LOURIE

- RESERVE CHAMPION: ALICE TARJAN AND IERLAND'S EDEN OWNER: ALICE

TARJAN

MARKEL/USEF YOUNG HORSE CHAMPIONSHIPS SIX-YEAR-OLD:

Name of the organization	UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC.	Employer identification number	22-1668879
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- CHAMPION: CESAR PARRA AND MOLLEGARDENS FASHION OWNER: CESAR PARRA
AND MARCELA PARRA BAUTISTA

- RESERVE CHAMPION: REBECCA RIGDON AND LIONELL VE OWNER: LAUREN FISHER
MARKEL/USEF YOUNG HORSE CHAMPIONSHIPS SEVEN-YEAR-OLD:

- CHAMPION: ENDEL OTS AND KINGS PLEASURE OWNER: HEIDI HUMPHRIES

- RESERVE CHAMPION: CESAR PARRA AND FANTA 4 OWNERS: CESAR PARRA AND
GINA RAFUL

MARKEL/USEF DEVELOPING HORSE DRESSAGE NATIONAL CHAMPIONSHIPS,
DEVELOPING HORSE PRIX ST. GEORGES:

- CHAMPION: OLIVIA LAGOY-WELTZ AND JOHNNY BE GOODE OWNER: FRITZ
KUNDRUN

- RESERVE CHAMPION: MARTIN KUHN AND RONIN OWNER: KATHRYN FLEMING-KUHN

MARKEL/USEF DEVELOPING HORSE DRESSAGE NATIONAL CHAMPIONSHIPS,
DEVELOPING HORSE GRAND PRIX:

- CHAMPION: CLAIRE DARNELL AND HARROLD S OWNER: CLAIRE DARNELL

- RESERVE CHAMPION: ALICE TARJAN AND JANE OWNER: ALICE TARJAN

ADEQUAN/USEF JUNIOR DRESSAGE NATIONAL CHAMPIONSHIP:

- CHAMPION: ELLA FRUCHTERMAN AND HOLTS LE'MANS OWNERS: TODD

FRUCHTERMAN AND ELLA FRUCHTERMAN

- RESERVE CHAMPION: MADISON SUMNER AND BRIAR OWNERS: WAYNE SUMNER AND
MADISON SUMNER

HORSEWARE IRELAND/USEF YOUNG RIDER DRESSAGE NATIONAL CHAMPIONSHIP:

- CHAMPION: AVERI ALLEN AND SUPERMAN OWNER: JONNI ALLEN

- RESERVE CHAMPION: ELLANOR BOEHNING AND SIR JUNIOR OWNERS: ANN

BOEHNING AND ELLANOR BOEHNING

USEF CHILDREN DRESSAGE NATIONAL CHAMPIONSHIP:

- CHAMPION: AUTUMN VAVRICK AND DANTE OWNER: AUTUMN VAVRICK

- RESERVE CHAMPION: VIRGINIA WOODCOCK AND THE SAFARI PARTY OWNERS:

Name of the organization	UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC.	Employer identification number	22-1668879
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ELIZABETH WOODCOCK AND VIRGINIA WOODCOCK

USEF DRESSAGE SEAT MEDAL FINALS, 13 & UNDER:

- CHAMPION: M.K. CONNATSER AND DONAU HIT OWNER: M.K. CONNATSER

- RESERVE CHAMPION: KOREY DENNY AND HEMINGWAY KW OWNER: AMY DENNY

USEF DRESSAGE SEAT MEDAL FINALS, 14-18:

- CHAMPION: KAYLEY KNOLLMAN AND JP ZEPPELIN OWNER: REBECCA STROMATT

- RESERVE CHAMPION: MARIN ROTH AND ERIN MEADOWS JAGERMEISTER OWNER:

MARIN ROTH

USEF PONY RIDER DRESSAGE NATIONAL CHAMPIONSHIP:

- CHAMPION: M.K. CONNATSER AND BLITZ UND DONNER OWNER: LINDA GRAVES

- RESERVE CHAMPION: MARYN GECK AND WHINNY OWNER: LAURA GECK

USEF INTERMEDIAIRE I NATIONAL CHAMPIONSHIP:

- CHAMPION: LAURA GRAVES AND SENSATION HW OWNERS: CAROL MCPHEE AND

SCOTT MCPHEE

- RESERVE CHAMPION: EMILY MILES AND DAILY SHOW OWNER: LESLIE WATERMAN

USEF GRAND PRIX NATIONAL CHAMPIONSHIP:

- CHAMPION: ALICE TARJAN AND SERENADE MF OWNER: ALICE TARJAN

- RESERVE CHAMPION: KATIE DUERRHAMMER AND PAXTON OWNER: KYLEE LOURIE

ADEQUAN/USEF YOUNG ADULT 'BRENTINA CUP' NATIONAL CHAMPIONSHIP:

- CHAMPION: QUINN IVERSON AND BECKHAM 19 OWNER: BILLE DAVIDSON

- RESERVE CHAMPION: CALLIE JONES AND DON PHILIPPO OWNER: CALLIE JONES

FORM 990, PART III, LINE 4A (CONTINUED)

DRIVING

FEI DRIVING WORLD CHAMPIONSHIP FOR YOUNG HORSES, 7YR OLDS, SZILVSVRAD,

HUN

- 2ND PLACE, LESLIE BERNDL AND KARELTJE OWNER: TOORPAPA DRIVING TEAM

FEI DRIVING WORLD CHAMPIONSHIP FOR SINGLES, LE PIN AU HARAS, FRA

Name of the organization	UNITED STATES EQUESTRIAN TEAM FOUNDATION, INC.	Employer identification number	22-1668879
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TEAM 7TH PLACE

- TAYLOR BRADISH AND KATYDID DUCHESS OWNER: JENNIFER MATHESON

- CARRIE OSTROWSKI-PLACE AND GELLERDUHT OWNER: CARRIE OSTROWSKI

- RAYMOND HELMUTH AND KENDRO OWNER: HELMUTH EQUINE

FEI DRIVING WORLD CHAMPIONSHIP FOR FOUR-IN-HAND HORSES, INDIVIDUALS,
PRATONI DEL VIVARO, ITA

- 8TH PLACE, CHESTER WEBER AND AMADEUS, BORIS W, FIRST EDITION,

GOUVENEUR, JULIUS V OWNER: CHESTER WEBER

KENTUCKY CLASSIC AT HERMITAGE FARM, GOSHEN, USA

ADVANCED HORSE NATIONAL FOUR-IN-HAND

- 1ST PLACE, CHESTER WEBER AND BORIS W, FIRST EDITION, JAKE, KASPER D

OWNER: CHESTER WEBER

CAI 3*, LIVE OAK, USA

ADVANCED HORSE PAIRS NATIONAL CHAMPIONSHIP

- 1ST PLACE, JACOB ARNOLD AND KENJI V, KENZO, KIAN OWNER: STEVE WILSON

- 2ND PLACE, PAUL MAYE AND HARMONY'S DOMONIC, HARMONY'S JAGWIRE,

HARMONY'S ZIEZO

OWNER: HARMONY'S AMATEUR SPORTS FOUNDATION

ADVANCED PONY SINGLES NATIONAL CHAMPIONSHIP

- 1ST PLACE, JENNIFER KEELER AND ZEPPU OWNER: JENNIFER KEELER

- 2ND PLACE, DANA DIEMER AND CLARWOOD MACK THE KNIFE OWNER: DANA

DIEMER

- 3RD PLACE, DEBORAH LAWRENCE AND TOP SECRET 53 OWNER: DEBORAH

LAWRENCE

- 4TH PLACE, HILARY MROZ-BLYTHE AND BIJOU OWNER: HILARY MROZ-BLYTHE

ADVANCED PONY PAIRS NATIONAL CHAMPIONSHIP

- 1ST PLACE, KATIE WHALEY AND CLANFAIR SUNGLOW, TOMMY, TIMMY OWNERS:

GAIL RILEY AND KATIE WHALEY

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ADVANCED PONY FOUR-IN-HAND NATIONAL CHAMPIONSHIP

- 1ST PLACE, MARY PHELPS AND AL CAPONY, BUGS MALONY, KIMBA, PENOLWYN

SILVER ROSA, TONY DA PONY OWNER: MARY PHELPS

KATYDID CDE, MILL SPRINGS, USA

ADVANCED SINGLE HORSE NATIONAL CHAMPIONSHIP

- 1ST PLACE, TAYLOR BRADISH AND KATYDID DUCHESS OWNER: JENNIFER

MATHESON

- 2ND PLACE, RAYMOND HELMUTH AND KENDRO OWNER: HELMUTH EQUINE

- 3RD PLACE, CARRIE OSTROWSKI-PLACE AND GELLERDUHT OWNER: CARRIE

OSTROWSKI-PLACE

- 4TH PLACE, NATALIE WILKIE AND VAN DYK 4 OWNER: NATALIE WILKIE

- 5TH PLACE, DONNA CROOKSTON AND VIKTOR OWNER: DONNA CROOKSTON

TRYON FALL CDE, MILL SPRING, USA

INTERMEDIATE PAIR HORSE NATIONAL CHAMPIONSHIP

- 1ST PLACE, JENNIFER COYLE JOHNSON AND JC ESPIRITAL, JC PLUMONA

OWNER: JENNIFER COYLE JOHNSON

INTERMEDIATE PAIR PONY NATIONAL CHAMPIONSHIP

- 1ST PLACE, MEGAN FULLGRAF AND BAYSHORE PASTIME OWNER: MEGAN FULLGRAF

INTERMEDIATE SINGLE HORSE NATIONAL CHAMPIONSHIP

- 1ST PLACE, ALLISON STROUD AND ISTVAN E Z OWNER: ALLISON STROUD

- 2ND PLACE, BETTINA SCHERER AND VIOLA V OWNER: BETTINA SCHERER

- 3RD PLACE, MARGARET SHENKER AND HEARTLAND FLASH BACK OWNER: MARGARET

SHENKER

- 4TH PLACE, WILLIAM ALLEN AND FRESNO'S COMMANDER MARK OWNER: WILLIAM

ALLEN

INTERMEDIATE SINGLE PONY NATIONAL CHAMPIONSHIP

- 1ST PLACE, ANNA KOOPMAN AND CHANDLER CREEK ECLIPSE OWNER: ANNA

KOOPMAN

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- 2ND PLACE, KAREN CHERRY AND SIR NOBLE OWNER: KAREN CHERRY

GARDEN STATE CDE, ALLENTOWN, USA

PRELIMINARY SINGLE PONY NATIONAL CHAMPIONSHIP

- 1ST PLACE, SARAH REITZ AND FFERM GWENFFRWD ONYX STAR OWNER: SARAH

REITZ

- 2ND PLACE, LESLIE BERNDL AND SWEETWATER'S MARMADUKE OWNER: TERESSA

KANDIANIS

- 3RD PLACE, DENISE LOEWE AND STEPPY IK OWNER: DENISE LOEWE

PRELIMINARY SINGLE HORSE NATIONAL CHAMPIONSHIP

- 1ST PLACE, SONIA WILLIAMS AND ROBIN OF LOCKSLEY OWNER: SONIA

WILLIAMS

- 2ND PLACE, LAURA DE FAZIO AND SPLASH OF CHROME OWNER: CINDY BUCHANAN

- 3RD PLACE, KIMBERLY MOORE AND LORIANNA OWNER: KIMBERLY MOORE

- 4TH PLACE, SUZANN JOHNSON AND THORNLEA ROCK STEADY OWNER: SUZANN

JOHNSON

- 5TH PLACE, RYLEY MILLER AND SUNRISES COMMANDER OWNER: MARY BALDWIN

- 6TH PLACE, RICHARD FORFA AND MOSSWOODS APOLLO OWNER: RICHARD FORFA

ENDURANCE

CEI3*, WILLISTON, USA

- 1ST PLACE, CHERYL VAN DEUSEN AND JG GENERAL OWNER: CHERYL VAN DEUSEN

CEI3*, LODGE, USA

- 1ST PLACE, CHERYL VAN DEUSEN AND JG GENERAL OWNER: CHERYL VAN DEUSEN

CEI3*, EHRHARDT, USA

- 1ST PLACE, CHERYL VAN DEUSEN AND JG GENERAL OWNER: CHERYL VAN DEUSEN

- 2ND PLACE, KELSEY RUSSELL AND CRUZIN FOR GOLD OWNER: VALERIE KANAVY

CEI3*, EHRHARDT, USA

- 1ST PLACE, JEREMY REYNOLDS AND TREASURED MOMENTS OWNER: HEATHER

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REYNOLDS

- 2ND PLACE, HOLLY CORCORAN AND LORIENN OWNER: HOLLY CORCORAN

- 4TH PLACE, CHERYL VAN DEUSEN AND TRU BEAU SARDI OWNER: CHERYL VAN

DEUSEN

CEI3*, PATRICK, USA

- 1ST PLACE, HOLLY CORCORAN AND POETE OWNER: HOLLY CORCORAN

CEI3*, SOCORRO, USA

- 1ST PLACE, JESSICA DICAMILLO AND I REMEMBER SEPTEMBER OWNER: JESSICA

DICAMILLO

- 2ND PLACE, KAREN BINNS-DICAMILLO AND JUST BELIEVE OWNER: JESSICA

DICAMILLO

CEI3*, SOCORRO, USA

- 1ST PLACE, MARISSA BARTMANN AND RGS ROLLO ZE MONARCH OWNER: JESSICA

DICAMILLO

CEI3*, SOCORRO, USA

- 1ST PLACE, KAREN BINNS-DICAMILLO AND RGS RAGNAR ZE MONARCH OWNER:

KAREN BINNS-DICAMILLO

- 2ND PLACE, JESSICA DICAMILLO AND RGS AZRAK BANDOS OWNER: KAREN

BINNS-DICAMILLO

EVENTING

TEAM SILVER 2022 FEI EVENTING WORLD CHAMPIONSHIPS, PRATONI DEL

VIVARO, ITA

- WILL COLEMAN AND OFF THE RECORD OWNERS: OFF THE RECORD SYNDICATE

- TAMRA SMITH AND MAI BAUM OWNERS: ALEX AHEARN, ELLEN AHEARN, AND ERIC

MARKELL

- LAUREN NICHOLSON AND VERMICULUS OWNER: JACQUELINE MARS

- BOYD MARTING AND TSETSERLEG TS OWNERS: CHRISTINE, TOMMIE, AND THOMAS

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TURNER

TEAM GOLD CCIO4*-S, BROMONT, CAN

- LIZ HALLIDAY-SHARP AND MIKS MASTER C OWNERS: DEBORAH PALMER AND

OCALA HORSE PROPERTIES

- LILLIAN HEARD-WOOD AND DASSETT OLYMPUS OWNER: LILLIAN HEARD-WOOD

- ANDREW MCCONNON AND FERRIE'S CELLO OWNER: JEANNE SHIGO

- COLLEEN RUTLEDGE AND COVERT RIGHTS OWNERS: COLLEEN RUTLEDGE AND FGS

INC.

TEAM SILVER CCIO4*-S, HOUGHTON, GBR

- ISABELLE BOSLEY AND NIGHT QUALITY OWNER: ISABELLE BOSLEY

- CORNELIA DORR AND DAYTONA BEACH 8 OWNERS: HCS SYNDICATE

- ALLIE KNOWLES AND MS. POPPINS OWNER: KATHERINE O'BRIEN

- CAROLINE MARTIN AND ISLANDWOOD CAPTAIN JACK OWNERS: CAROLINE AND

SHERRIE MARTIN

LAND ROVER/USEF CCI5*-L EVENTING NATIONAL CHAMPIONSHIP PRESENTED BY

MARS EQUESTRIAN, LEXINGTON, USA

- 1ST PLACE, DOUG PAYNE AND QUANTUM LEAP OWNERS: DOUG AND JESSICA

PAYNE

- 2ND PLACE, BOYD MARTIN AND TSETSERLEG TSF OWNERS: CHRISTINE, THOMAS,

AND TOMMIE TURNER

- 3RD PLACE, BUCK DAVIDSON AND CARLEVO OWNER: KATHERINE O'BRIEN

MARYLAND CCI5*-L, FAIR HILL, USA

- 2ND PLACE, TAMRA SMITH AND DANITO OWNER: RUTH BLEY

- 4TH PLACE, PHILLIP DUTTON AND Z OWNERS: EVIE DUTTON, ANN JONES,

SUZANNE LACY, CAROLINE MORAN, THOMAS TIERNEY, DAVID VOS, AND PATRICIA

VOS

- 5TH PLACE, JENNIE BRANNIGAN AND FE LIFESTYLE OWNERS: NINA AND TIM

GARDNER

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USEF CCI2*-L EVENTING NATIONAL CHAMPIONSHIPS, LEXINGTON, USA

- 1ST PLACE, CHRISTINA HENRIKSEN AND CISCO'S CALOR Z OWNER: CHRISTINA
HENRIKSEN

- 2ND PLACE, JULIE WOLFERT AND HSH BITCOIN OWNER: MEAGHAN
MARINOVICH-BURDICK

- 3RD PLACE, MARLEY STONE BOURKE AND KUNG FU QUALITY OWNER: SHARON
CHURCH

USEF CCI3*-L EVENTING NATIONAL CHAMPIONSHIP, ELKTON, USA

- 1ST PLACE, ELISA WALLACE AND RENKUM CORSAIR OWNERS: CORSAIR
SYNDICATE, LLC

- 2ND PLACE, JENNIFER CARAS AND SOMMERSBY OWNERS: JENNIFER CARAS AND
JERRY HOLLIS

- 3RD PLACE, CASSIE SANGER AND FERNHILL ZORO OWNER: NINA SANGER

THE DUTTA CORP./USEF CCI4*-L EVENTING NATIONAL CHAMPIONSHIP,
MILL SPRING, USA

- 1ST PLACE, DAN KREITL AND CARMANGO OWNER: KAY DIXON

- 2ND PLACE, LIZ HALLIDAY-SHARP AND DENIRO Z OWNERS: OCALA HORSE
PROPERTIES

- 3RD PLACE, PHILLIP DUTTON AND AZURE OWNERS: ANNE MORAN, MICHAEL
MORAN, AND CAROLINE MORAN

USEF EVENTING YOUNG RIDER CHAMPIONSHIPS PRESENTED BY USEA, MILLS
SPRING, USA

CCI3*-L INDIVIDUAL RESULTS

- 1ST PLACE, JORDAN RISKE AND REDEMPTION SONG OWNER: JORDAN RISKE

- 2ND PLACE, JANELLE FLEMING AND FLY ME COURAGEOUS OWNER: EDITH

RAMEIKA

- 3RD PLACE, SAMANTHA TINNEY AND CUTTY SARK OWNER: SAMANTHA TINNEY

TEAM GOLD CCI3*-L AREA 5/8

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- JORDAN RISKE AND REDEMPTION SONG OWNER: JORDAN RISKE

- JANELLE FLEMING AND FLY ME COURAGEOUS OWNER: EDITH RAMEIKA

- SAMANTHA TINNEY AND CUTTY SARK OWNER: SAMANTHA TINNEY

- KIT FERGUSON AND CILLBHRID TOM OWNER: KIT FERGUSON

CCI2*-L INDIVIDUAL RESULTS

- 1ST PLACE, MEG PELLEGRINI AND GLOBAL NAXOS OWNER: MEG PELLEGRINI

- 2ND PLACE, ALEXIS LARSON AND PL DIAMOND'S INSPIRATION OWNER: MALIA
LARSON

- 3RD PLACE, CASSANDRE LEBLANC AND RIFFEL OWNER: CASSANDRE LEBLANC

FORM 990, PART III, LINE 4A (CONTINUED)

TEAM GOLD CCI2*-L AREA 2/4/6

- MEG PELLEGRINI AND GLOBAL NAXOS OWNER: MEG PELLEGRINI

- SISSY SUGARMAN AND CARMANI OWNER: SISSY SUGARMAN

- AUDREY OGAN AND REVITAVET ALWAYS COOLEY OWNER: KIM SEVERSON

- MYA POULOS AND CORNFIRE OWNER: MYA POULOS

CCI1*-L INDIVIDUAL RESULTS

- 1ST PLACE, LIZZIE HOFF AND HSH LIMITED EDITION OWNER: CAROLINE

MARTIN

- 2ND PLACE, MEG PELLEGRINI AND CASILIO G OWNER: MEG PELLEGRINI

- 3RD PLACE, ISABELLA NOVAK AND DREAMLINER OWNER: ISABELLA NOVAK

TEAM GOLD CCI1*-L AREA 2/7

- LIZZIE HOFF AND HSH LIMITED EDITION OWNER: CAROLINE MARTIN

- MEG PELLEGRINI AND CASILIO G OWNER: MEG PELLEGRINI

- NOAH STANLASKE AND CHESTERLAND OWNER: NOAH STANLASKE

JUMPING

TEAM GOLD FEI YOUTH EQUESTRIAN GAMES, AACHEN, GER

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- MIMI GOCHMAN (TEAM NORTH AMERICA) AND MERINO VAN DE ACHTERHOEK

OWNER: DERFALLER SPORTPFERDE

INDIVIDUAL BRONZE FEI YOUTH EQUESTRIAN GAMES, AACHEN, GER

- MIMI GOCHMAN AND MERINO VAN DE ACHTERHOEK OWNER: DERFALLER

SPORTPFERDE

1ST PLACE, CSIOJ NATIONS CUP FINAL CHALLENGE CUP, KRONENBERG, NED

- ELISA BROZ AND TINKERBELL OWNER: HIDALGO, LLC

- ALEXA LEONG AND CARLSSON 72 OWNER: ALEXA LEONG

- CAROLINE MAWHINNEY AND STELLA LEVISTA OWNER: CAROLINE MAWHINNEY

- HAILEY ROYCE AND SONIC BOOM OWNER: DOUBLE CLEAR LLC

- DELLA WHITE & GIGGS OWNER: DELLA WHITE

2ND PLACE, CSIO3* NATIONS CUP, VILAMOURA, POR

- KELLY ARANI AND IMPOSSIBLE DREAM OWNER: MARIGOT BAY FARM, LLC

- CATHLEEN DRISCOLL AND AROME OWNER: PLAIN BAY FARM

- MIMI GOCHMAN AND CELINA BH OWNER: GOCHMAN SPORT HORSE LLC

- MAVIS SPENCER AND CARISSIMO 25 OWNER: GEORGY MASKREY-SEGESMAN

3RD PLACE, CSIO4* NATIONS CUP, WELLINGTON, USA

- NATALIE DEAN AND CHANCE STE HERMELLE OWNER: MARIGOLD SPORHORSES,

LLC

- LILLIE KEENAN AND ARGAN DE BELIARD OWNER: CHANSONETTE FARM LLC

- TANNER KOROTKIN AND VOLO'S DIAMOND OWNER: SANDALWOOD FARMS

- SPENCER SMITH AND QUIBELLE OWNER: GOTHAM ENTERPRIZES LLC

3RD PLACE, CSIOJ NATIONS CUP, LANGLEY, CAN

- LEILA DIAB AND MATAHARI HL OWNER: LEILA DIAB

- SAHANA GANESAN AND FAST LUCCA OWNER: SAHANA GANESAN

- ALEXA LEONG AND CARLSSON 72 OWNER: ALEXA LEONG

- ANDREW LOPEZ AND GEORGE Z.G. OWNER: ANDREW LOPEZ

4TH PLACE, CSIO5* NATIONS CUP, ROME, ITA

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- LILLIE KEENAN AND ARGAN DE BELIARD OWNER: CHANSONETTE FARM LLC

- LAURA KRAUT AND CONFU OWNER: ST BRIDE'S FARM

- BRIAN MOGGRE AND BALOU DU REVENTON OWNER: ANN THOMPSON

- CHLOE REID AND SOUPER SHUTTLE OWNER: LIVE OAK PLANTATION LLC

5TH PLACE CSIOY NATIONS CUP FINAL, KRONENBERG, NED

- ALEXANDER ALSTON AND PRESTIGIOUS OWNER: ALSTON ALLIANCE, LLC

- CHARLISE CASAS AND MUSTIQUE VZ OWNER: ALWAYS FAITHFUL EQUINE, LLC

- ZAYNA RIZVI AND EXQUISE DU PACHIS OWNER: OPTIMUS AGRO NV

- AUDREY SCHULZE AND DARQUITO OWNER: RIVERBROOK SPORT HORSES, LLC

5TH PLACE, CSIO5* NATIONS CUP, LANGLEY, CAN

- KARL COOK AND COACHELLA 4 OWNER: SIGNE OSTBY

- AILISH CUNNIFFE AND VIVALDI DU THEIL OWNER: GRAYLISH LLC

- KENT FARRINGTON AND LANDON OWNER: HAITY MCNERNEY

- HUNTER HOLLOWAY AND PEPITA CON SPITA OWNER: HAYS INVESTMENT CORP.

6TH PLACE, CSIO5* NATIONS CUP, AACHEN, GER

- LILLIE KEENAN AND ARGAN DE BELIARD OWNER: CHANSONETTE FARM LLC

- CHLOE REID AND SOUPER SHUTTLE OWNER: LIVE OAK PLANTATION LLC

- ADRIENNE STERNLICHT AND CRISTALLINE OWNER: STARLIGHT FARMS 1 LLC

- MCLAIN WARD AND KASPER VAN HET HELLEHOF OWNER: THE KASPER GROUP LLC

6TH PLACE, CSIO3* NATIONS CUP, LISBON, POR

- DAISY FARISH AND GERKO OWNER: LANES END

- CHARLOTTE JACOBS AND EDOCENTA OWNER: NORTH STAR

- ALEX MATZ AND CASHEW CR OWNER: DOROTHY MATZ

- JULIE WELLES AND CONSTABLE II OWNER: CHERRY KNOLL FARM

6TH PLACE, CSIO3* NATIONS CUP, MADRID, ESP

- REBECCA CONWAY AND CON COLEUR OWNER: BLUE HILL FARM LLC

- DAISY FARISH AND GERKO OWNER: LANES END

- CHARLOTTE JACOBS AND EDOCENTA OWNER: NORTH STAR

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- ALEX MATZ AND CASHEW CR OWNER: DOROTHY MATZ
6TH PLACE, CSIO5* NATIONS CUP, DUBLIN, IRE
- KATIE DINAN AND BREGO R'N B OWNER: GRANT ROAD PARTNERS LLC
- LILLIE KEENAN AND QUEENSLAND E OWNER: CHANSONETTE FARM LLC
- LAURA KRAUT AND CONFU OWNER: ST BRIDE'S FARM
- SPENCER SMITH AND UNTOUCHABLE 32 OWNER: SPENCER SMITH
7TH PLACE, CSIO5* SPRUCE MEADOWS 'MASTERS', CAN
- NICHOLAS DELLO JOIO AND CORNET'S CAMBRIDGE OWNER: THE BERRY GROUP
- KENT FARRINGTON AND LANDON OWNER: HAITY MCNERNEY
- GIAVANNA RINALDI AND COSMONA OWNER: ANTON MARANO
- MCLAIN WARD AND KASPER VAN HET HELLEHOF OWNER: THE KASPER GROUP
8TH PLACE, CSIO5* NATIONS CUP, KNOKKE, BEL
- BLISS HEERS AND ANTIDOTE DE MARS OWNER: BRIDGESIDE FARMS LLC
- MICHAEL HUGHES AND KASHMIR VAN D'OUDE PASTORY OWNER: STEPHEX STABLES
AND VITAL VAN HAM
- BRIAN MOGGRE AND BALOU DU REVENTON OWNER: ANN THOMPSON
- JESSICA SPRINGSTEEN AND RMF ZECILIE OWNER: RUSHY MARSH FARM
11TH PLACE, 2022 FEI JUMPING WORLD CHAMPIONSHIPS, HERNING, DEN
- LILLIE KEENAN AND ARGAN DE BELIARD OWNER: CHANSONETTE FARM LLC
- BRIAN MOGGRE AND BALOU DU REVENTON OWNER: ANN THOMPSON
- ADRIENNE STERNLICHT AND CRISTALLINE OWNER: STARLIGHT FARMS 1 LLC
- MCLAIN WARD AND CONTAGIOUS OWNER: BEECHWOOD FARMS
15TH PLACE, CSIO3* NATIONS CUP VEJER DE LA FRONTERA, ESP
- CATHLEEN DRISCOLL AND AROME OWNER: PLAIN BAY FARM
- MIMI GOCHMAN AND CELINA BH OWNER: GOCHMAN SPORT HORSE LLC
- GRANT SEGER AND CANTUCCHINI OWNER: GREY FOX CROSSING
- MAVIS SPENCER AND CARISSIMO 25 OWNER: GEORGY MASKREY-SEGESMAN

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PARA DRESSAGE

TEAM GOLD CPEDI3*, WELLINGTON, USA

- BEATRICE DE LAVALETTE AND CLARC OWNERS: ELIZABETH AND NICOLAS DE

LAVALETTE

- REBECCA HART AND FORTUNE 500 OWNER: ROWAN O'RILEY

- KATE SHOEMAKER AND SOLITAER 40 OWNERS: KATE, CRAIG AND DEENA

SHOEMAKER

- ROXANNE TRUNNELL AND DOLTON OWNER: KARIN FLINT

TEAM GOLD CPEDI3*, TRYON, USA

- BEATRICE DE LAVALETTE AND CLARC OWNERS: ELIZABETH AND NICOLAS DE

LAVALETTE

- CHARLOTTE MERLE-SMITH AND GUATA OWNERS: CHARLOTTE AND SUSAN

MERLE-SMITH

- KATE SHOEMAKER AND SOLITAER 40 OWNERS: KATE, CRAIG AND DEENA

SHOEMAKER

TEAM GOLD CPEDI3* TRYON, USA

- FIONA HOWARD AND JAGGER OWNER: FIONA HOWARD

- GENEVIEVE ROHNER AND SOLITAER 40 OWNERS: KATE, CRAIG AND DEENA

SHOEMAKER

- ANDIE SUE ROTH AND ANIKO OWNER: LISA HELLMER

- CYNTHIA SCRENCI AND SIR CHIPOLI OWNERS: CYNTHIA SCRENCI AND VOLADO

FARMS

TEAM SILVER CPEDI3*, DOHA, QAT

- REBECCA HART AND EL CORONA TEXEL OWNER: ROWAN O'RILEY

- CYNTHIA SCRENCI AND WEST SIDE OWNER: SELECT EQUINE INTERNATIONAL

- KATE SHOEMAKER AND QUIANA OWNERS: KATE, CRAIG AND DEENA SHOEMAKER

TEAM BRONZE 2022 WORLD CHAMPIONSHIPS, HERNING, DEN

- BEATRICE DE LAVALETTE AND SIXTH SENSE OWNERS: ELIZABETH AND NICOLAS

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DE LAVALETTE

- REBECCA HART AND EL CORONA TEXEL OWNER: ROWAN O'RILEY
- KATE SHOEMAKER AND QUIANA OWNERS: KATE, CRAIG AND DEENA SHOEMAKER
- ROXANNE TRUNNELL AND FORTUNATO H2O OWNER: LEHUA CUSTER

FORM 990, PART III, LINE 4A (CONTINUED)

VAULTING

WORLD CUP FINAL, LEIPZIG, GER

INDIVIDUAL FEMALE

- BRONZE, KIMBERLY PALMER WITH ROSENSTOLZ 99 OWNER: CLUB IPPICO

MONZESE A.S.D.

- 7TH PLACE, KALYN NOAH WITH COROCORO 2 OWNER: GUDRUN LENZ

WORLD CHAMPIONSHIPS FOR SENIORS, HERNING, DEN

INDIVIDUAL FEMALE

- 5TH PLACE, KIMBERLY PALMER WITH ROSENSTOLZ 99 OWNER: CLUB IPPICO

MONZESE A.S.D.

- 9TH PLACE, TESSA DIVITA WITH SUNDAY SONG OWNER: LASSE KRISTENSEN
- 25TH PLACE, EMILY ROSE WITH EL DOCTRO OWNERS: EMILY ROSE AND CAROLYN

BLAND

INDIVIDUAL MALE

- 14TH PLACE, DANIEL JANES WITH CHRISTMAS PS Z OWNERS: DE WOLFF

VAULTING HORSES AND NIENKE DE WOLFF

- 17TH PLACE, JACE BROOKS WITH DWIGHT OWNER: C. KAAG

PAS DE DEUX 6TH PLACE

- CALLE DAVIS/TODD GRIFFITHS WITH LIGHTNING JACK 12 OWNER: THORDIS

THOROE

SQUAD 6TH PLACE

- CALLE DAVIS, MIRIAM GRIFFITHS, TODD GRIFFITHS, PAULA HAMPSHIRE,

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JAYNEE MEYER, ALYSSA STODDARD WITH DRILLIAN OWNERS: REITCLUB BLAU-WEI
LWENSTEDT

NATIONS TEAM 5TH PLACE

- KIMBERLY PALMER WITH ROSENSTOLZ 99 OWNERS: CLUB IPPICO MONZESE
A.S.D.

- TESSA DIVITA WITH SUNDAY SONG OWNER: LASSE KRISTENSEN

- CALLE DAVIS, MIRIAM GRIFFITHS, TODD GRIFFITHS, PAULA HAMPSHIRE,

JAYNEE MEYER, ALYSSA STODDARD WITH DRILLIAN OWNERS: REITCLUB BLAU-WEI
LWENSTEDT

CHIO AACHEN, AACHEN, GER

INDIVIDUAL FEMALE

- 11TH PLACE, TESSA DIVITA WITH SUNDAY SONG OWNER: LASSE KRISTENSEN

- 12TH PLACE, ANA SCHULT WITH QUALIMERO OLD OWNERS: ANA SCHULT AND

DONNA SCHULT

- 16TH PLACE, EMILY ROSE WITH EL DOCTRO OWNERS: EMILY ROSE AND CAROLYN

BLAND

INDIVIDUAL MALE

- 10TH PLACE, DANIEL JANES WITH CHRISTMAS PS Z OWNERS: DE WOLFF

VAULTING HORSES AND NIENKE DE WOLFF

CVI3* STADL PAURA, AUT

INDIVIDUAL FEMALE

- 1ST PLACE, KIMBERLY PALMER WITH ROSENSTOLZ 99 OWNER: CLUB IPPICO

MONZESE A.S.D.

CVI3* FLYINGE, SWE

INDIVIDUAL FEMALE

- 1ST PLACE, TESSA DIVITA WITH SUNDAY SONG OWNER: LASSE KRISTENSEN

- 3RD PLACE, EMILY ROSE WITH EL DOCTRO OWNERS: EMILY ROSE AND CAROLYN

BLAND

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INDIVIDUAL MALE

- 1ST PLACE, DANIEL JANES WITH CHRISTMAS PS Z OWNERS: DE WOLFF

VAULTING HORSES AND NIENKE DE WOLFF

PAS DE DEUX

- 3RD PLACE, CALLE DAVIS/TODD GRIFFITHS WITH LIGHTNING JACK 12 OWNER:

THORDIS THOROE

SQUAD

- 2ND PLACE, CALLE DAVIS, MIRIAM GRIFFITHS, TODD GRIFFITHS,

PAULA HAMPSHIRE, JAYNEE MEYER, ALYSSA STODDARD WITH DRILLIAN OWNER:

REITCLUB BLAU-WEI LWENSTEDT

CVIY2*, FLYINGE, SWE

INDIVIDUAL FEMALE

- 2ND PLACE, EMMA MILITO WITH EL DOCTRO OWNERS: EMILY ROSE AND CAROLYN

BLAND

- 4TH PLACE, NAOMI MORGANTHALER WITH CHRISTMAS PS Z OWNERS: DE WOLFF

VAULTING HORSES AND NIENKE DE WOLFF

- 8TH PLACE, LILLIAN KUHL WITH ICARUS OWNER: NIENKE DE WOLFF

CVIJ2*, FLYING SWE

INDIVIDUAL FEMALE

- 7TH PLACE, HANNAH WILDERMUTH WITH BAKKEGAARDENS CHARLIE OWNERS:

AMANDA STAALSO AND TRINE STAALSO

CVI3*, WOODSIDE, USA

INDIVIDUAL FEMALE

- 1ST PLACE, KIMBERLY PALMER WITH ZYGO OWNERS: J. PALMER AND K. PALMER

- 2ND PLACE, TESSA DIVITA WITH PINO DEL RIO OWNERS: EDWARD DIVITA AND

JULIE DIVITA

- 4TH PLACE, EMILY ROSE WITH EL DOCTRO OWNERS: EMILY ROSE AND CAROLYN

BLAND

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- 5TH PLACE, DUSTI HAUSMAN WITH PINO DEL RIO OWNERS: EDWARD DIVITA AND
JULIE DIVITA

INDIVIDUAL MALE

- 1ST PLACE, DANIEL JANES WITH DIVA 506 OWNER: PACIFIC COAST VAULTING
CLUB

- 3RD PLACE, GABE ANIELLO WITH DONDERKLAP OWNERS: EDWARD DIVITA AND
JULIE DIVITA

- 4TH PLACE, JACE BROOKS WITH TOUCH OF GUINNESS BLUES OWNER: JACE
BROOKS

CVIY2*, LOVELAND, USA

INDIVIDUAL FEMALE

- 1ST PLACE, EMMA MILITO WITH FERNANDO 675 OWNER: JANE KOPPERL

- 2ND PLACE, LILLY BELINSKI WITH FERNANDO 675 OWNER: JANE KOPPERL

- 3RD PLACE, MELANIE FORD WITH CHARLES THE GREAT OWNER: AMY EDWARDS

- 4TH PLACE, LILLIAN KUHL WITH GARTH ISF OWNER: JODI RINARD

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

REVIEW OF FORM 990:

THE UNITED STATES EQUESTRIAN TEAM FOUNDATION HELD A BOARD OF TRUSTEES
MEETING IN JUNE, AT THE FOUNDATION HEADQUARTERS IN GLADSTONE, NJ. ONE OF
THE AGENDA ITEMS INCLUDED A DETAILED DISCUSSION PRESENTING COMPONENTS OF
FEDERAL FORM 990. ADDITIONALLY, THE DISCUSSIONS INCLUDED CHANGES TO THE TAX
CODE, INDIVIDUAL STATE REQUIREMENTS AND THE NEED FOR THE PUBLIC TO BE WELL
INFORMED OF ANY ORGANIZATION THEY ARE CONSIDERING DONATING TO. THE BOARD
REVIEWED FORM 990 AND UNANIMOUSLY AUTHORIZED A JOINT MEETING OF THE
EXECUTIVE AND FINANCE COMMITTEES IN JUNE. AT THAT JOINT MEETING, THE
FEDERAL FORM 990 WAS APPROVED FOR FILING.

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

MONITORING OF CONFLICT OF INTEREST POLICY:

THE CONFLICT OF INTEREST POLICY IS UPDATED AND REVIEWED EACH YEAR. THE BOARD OF TRUSTEES AND STAFF ARE REQUIRED TO SIGN A NEW POLICY EVERY YEAR ENSURING THEY ARE STILL IN COMPLIANCE.

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

COMPENSATION PRACTICES:

A COMPENSATION COMMITTEE CONSISTING OF THE OFFICERS AND THE EXECUTIVE COMMITTEE REVIEW THE PERFORMANCE OF THE EXECUTIVE DIRECTOR, OFFICERS AND KEY EMPLOYEES DURING THE YEAR AND BASE THE COMPENSATION INCREASE ON THEIR PERFORMANCE.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS
MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI,
WY

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

AVAILABILITY OF GOVERNING DOCUMENTS:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

LOSS ON UNCOLLECTIBLE PLEDGES -76,301.