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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2008

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements

**Open to Public
Inspection**

A For the 2008 calendar year, or tax year beginning 07/01, 2008, and ending 06/30/2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization		D Employer identification number
		REINING HORSE SPORTS FOUNDATION, INC.		73-1575062
		Number and street (or P O box, if mail is not delivered to street address) Room/suite		E Telephone number
		3000 N.W. 10TH STREET City or town, state or country, and ZIP + 4		(405) 946-7400
		OKLAHOMA CITY, OK 73107-5302		F Group Exemption Number . . . ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method Cash Accrual
Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ WWW.REININGHORSESPORTSFOUNDATION.ORG

J Organization type (check only one) - 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ . . . ▶ \$ 235,624.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

		1	2	3	4	5c	6c	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
Revenue	1	Contributions, gifts, grants, and similar amounts received																					
	2	Program service revenue including government fees and contracts																					
	3	Membership dues and assessments																					
	4	Investment income		STMT 1																			
	5a	Gross amount from sale of assets other than inventory		5a																			
	5b	Less cost or other basis and sales expenses		5b																			
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)																					
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming check here <input type="checkbox"/>																					
	6a	Gross revenue (not including \$ 12,018. of contributions reported on line 1)		6a		148,027.																	
	6b	Less direct expenses other than fundraising expenses		6b		36,135.																	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)																						
7a	Gross sales of inventory, less returns and allowances		7a																				
7b	Less cost of goods sold		7b																				
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)																						
8	Other revenue (describe ▶)																						
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8																						
Expenses	10	Grants and similar amounts paid (attach schedule)		STMT 2																			
	11	Benefits paid to or for members																					
	12	Salaries, other compensation, and employee benefits																					
	13	Professional fees and other payments to independent contractors																					
	14	Occupancy, rent, utilities, and maintenance																					
	15	Printing, publications, postage, and shipping																					
	16	Other expenses (describe ▶)		STMT 3																			
17	Total expenses. Add lines 10 through 16																						
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)																					
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)																					
	20	Other changes in net assets or fund balances (attach explanation)		STMT 4																			
	21	Net assets or fund balances at end of year. Combine lines 18 through 20																					

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	515,008.	435,231.
23	Land and buildings		
24	Other assets (describe ▶)	8,348.	4,854.
25	Total assets	523,356.	440,085.
26	Total liabilities (describe ▶)	8,528.	1,902.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	514,828.	438,183.

For Privacy Act and Paperwork Reduction Act Notice, see the Instruction for Form 990.

Form **990-EZ** (2008)

SCANNED JUN 30 2010

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Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

Expenses
(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

What is the organization's primary exempt purpose? STMT 8

Describe what was achieved in carrying out the organization's exempt purposes in a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

28 SEE STATEMENT 15

(Grants \$ 164,603.) If this amount includes foreign grants, check here

28a 204,652.

29

(Grants \$) If this amount includes foreign grants, check here

29a

30

(Grants \$) If this amount includes foreign grants, check here

30a

31 Other program services (attach schedule)

(Grants \$) If this amount includes foreign grants, check here

31a

32 Total program service expenses (add lines 28a through 31a)

32 204,652.

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SEE STATEMENT 9-13		-0-	-0-	-0-

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
35a	a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
35b	b If "Yes," has it filed a tax return on Form 990-T for this year?		
36	36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		X
37a	37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ NONE		
37b	b Did the organization file Form 1120-POL for this year?		X
38a	38a Did the organization borrow from or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
38b	b If "Yes," complete Schedule L, Part II and enter the total amount involved		
39	39 Section 501(c)(7) organizations Enter		
39a	a Initiation fees and capital contributions included on line 9		
39b	b Gross receipts, included on line 9, for public use of club facilities		
40a	40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ NONE, section 4912 ▶ NONE, section 4955 ▶ NONE		
40b	b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		X
40c	c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ NONE		
40d	d Enter amount of tax on line 40c reimbursed by the organization ▶ NONE		
40e	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	41 List the states with which a copy of this return is filed. ▶ SEE STATEMENT 14		
42a	42a The books are in care of ▶ JOHN FOY Telephone no ▶ (405) 946-7400 Located at ▶ 3000 N.W. 10TH ST., OKLAHOMA CITY, OK ZIP + 4 ▶ 73107-5302		
42b	b 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)? If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
42c	c At any time during the calendar year, did the organization maintain an office outside of the U.S ? If "Yes," enter the name of the foreign country ▶		X
43	43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		

		Yes	No
44	44. Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45	45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	46	X
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	X
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	X
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	X
b If "Yes," was the related organization(s) a section 527 organization?	49b	

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$100,000 ▶ NONE				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		
Total number of other independent contractors receiving over \$100,000 ▶ NONE		

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: *[Signature]* Date: *5/10/10*
 Type or print name and title: *DAN WALL Executive Director*

Paid Preparer's Use Only
 Preparer's signature: *Sarah M. Meron, CPA* Date: *4/27/10*
 Firm's name (or yours if self-employed), address, and ZIP + 4: *KPMG LLP 210 PARK AVE., SUITE 2850 OKLAHOMA CITY, OK 73102*
 EIN: *13-5565207* Phone no: *405-239-6411*
 Check if self-employed:

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

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Name of the organization

Employer identification number

REINING HORSE SPORTS FOUNDATION, INC.

73-1575062

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

The organization is not a private foundation because it is (Please check only one organization.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)
10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). (see instructions)
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
a [] Type I b [] Type II c [] Type III - Functionally Integrated d [] Type III - Other
e [] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box []
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
(ii) A family member of a person described in (i) above?
(iii) A 35% controlled entity of a person described in (i) or (ii) above?

Table with 2 columns: Yes, No. Rows: 11g(I), 11g(II), 11g(III)

h Provide the following information about the organizations the organization supports

Table with 7 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization in col (i) listed in your governing document?, (v) Did you notify the organization in col (i) of your support?, (vi) Is the organization in col (i) organized in the US?, (vii) Amount of support. Includes sub-columns for Yes/No for (iv) and (vi).

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

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.)

Section A. Public Support

Table with 7 columns: (a) 2004, (b) 2005, (c) 2006, (d) 2007, (e) 2008, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1-3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2004, (b) 2005, (c) 2006, (d) 2007, (e) 2008, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc; 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 82.16%; 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 62.75%; 16a 33 1/3% support test - 2008. 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 [X]; 16b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization []; 17a 10%-facts-and-circumstances test - 2008. 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 "fact-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization []; 17b 10%-facts-and-circumstances test - 2007. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization []; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions [].

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Table with 7 columns: (a) 2004, (b) 2005, (c) 2006, (d) 2007, (e) 2008, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1-5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2004, (b) 2005, (c) 2006, (d) 2007, (e) 2008, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV); 13 Total support. (Add lines 9, 10c, 11, and 12).

14 First five 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

Table with 3 columns: Description, Line Number, Percentage. Row 15: Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) - 15 - %; Row 16: Public support percentage from 2007 Schedule A, Part IV-A, line 27g - 16 - %

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Line Number, Percentage. Row 17: Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) - 17 - %; Row 18: Investment income percentage from 2007 Schedule A, Part IV-A, line 27h - 18 - %

19a 33 1/3% support tests - 2008. 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 - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here The organization qualifies as a publicly supported organization []

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

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2004	2005	2006	2007	2008	TOTAL
MISC. INCOME	NONE	70.	6,041.	2.	NONE	6,113.
TOTALS	NONE	70.	6,041.	2.	NONE	6,113.

**Supplemental Information Regarding
Fundraising or Gaming Activities**

▶ Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a

Name of the organization: REINING HORSE SPORTS FOUNDATION, INC. Employer identification number: 73-1575062

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | | | |
|---|--|---|--|
| a | <input type="checkbox"/> Mail solicitations | e | <input type="checkbox"/> Solicitation of non-government grants |
| b | <input type="checkbox"/> Email solicitations | f | <input type="checkbox"/> Solicitation of government grants |
| c | <input type="checkbox"/> Phone solicitations | g | <input checked="" type="checkbox"/> Special fundraising events |
| d | <input type="checkbox"/> In-person solicitations | | |
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? Yes No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. 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))	
		YOUTH RAFFLE (event type)	YOUTH AUCTION (event type)	6 (total number)		
Revenue	1	Gross receipts	45,543.	33,559.	80,943.	160,045.
	2	Less Charitable contributions		2,018.	10,000.	12,018.
	3	Gross revenue (line 1 minus line 2)	45,543.	31,541.	70,943.	148,027.
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes	2,033.			2,033.
	6	Rent/facility costs				
	7	Other direct expenses	8,050.		26,052.	34,102.
	8	Direct expense summary Add lines 4 through 7 in column (d)				(36,135.)
	9	Net income summary. Combine lines 3 and 8 in column (d)				111,892.

Part III Gaming. Complete if the organization answered "Yes" to 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				
Direct Expenses	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes _____ % No	Yes _____ % No	Yes _____ % No	
	7	Direct expense summary Add lines 2 through 5 in column (d)				()
	8	Net gaming income summary Combine lines 1 and 7 in column (d)				

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities _____		
a Is the organization licensed to operate gaming activities in each of these states? _____	9a	
b If "No," Explain _____		
10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? _____	10a	
b If "Yes," Explain _____		
11 Does the organization operate gaming activities with nonmembers? _____	11	
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? _____	12	

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a %		
b	An outside facility 13b %		
14	Provide the name and address of the person who prepares the organization's gaming/special event books and records		
	Name ▶ _____		
	Address ▶ _____		
15 a	Does the organization have a contract with a third party from whom the organization receives gaming revenue? 15a		
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		
	Name ▶ _____		
	Address ▶ _____		
16	Gaming manager information		
	Name ▶ _____		
	Gaming manager compensation ▶ \$ _____		
	Description of services provided ▶ _____		
	<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> 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? 17a		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$		

FORM 990EZ, PART I - INVESTMENT INCOME
=====

DESCRIPTION -----	AMOUNT -----
DIVIDEND INCOME	4,878.
INTEREST INCOME	2,748.
TOTAL	----- 7,626. =====

FORM 990EZ, PART I - GRANTS AND SIMILAR AMOUNTS PAID
IN EXCESS OF \$5000

=====

RECIPIENT NAME AND ADDRESS

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

GRANTS PAID

OKLAHOMA REINING HORSE ASSOC
P.O BOX 2120
OWASSO, OK 74055

NONE

TULSA REINING CLASSIC EDUCATION

8,450.

NATIONAL REINING HORSE ASSOC
3000 N.W. 10TH OKLAHOMA CITY
OKLAHOMA CITY, OK 73107

RELATED ORGANIZATION
501(C)(5)

SUPPORT NRHA YOUTH PROGRAM AND WORLD REINING
MASTERS

87,426.

MAKE A WISH FOUNDATION
5201 N. SHARTEL AVE
OKLAHOMA CITY, OK 73118

NONE
509(A)(1)/170(B)(1)(A)(VI)

GENERAL SUPPORT

16,676.

CRISIS FUND PAYMENT

NONE

LIVING EXPENSES - FINANCIAL HARDSHIP

10,000.

CRISIS FUND PAYMENT

NONE

MEDICAL EXPENSES

7,500.

TOTAL CONTRIBUTIONS PAID

130,052

FORM 990EZ, PART I - OTHER EXPENSES

=====

TRAVEL	27,637.
CONFERENCES, CONVENTIONS	250.
OTHER PROFESSIONAL FEES	300.
ADVERTISING	555.
OFFICE EXPENSES	3,205.
INSURANCE	2,851.
BANK SERVICE CHARGES	5,145.
PRINTING	7,696.
OTHER TAXES, LICENSES, & FEES	6,813.
AWARDS & PRIZES	2,650.
YOUTH REGIONAL CLINIC SERIES EXPENSES	9,257.
MISCELLANEOUS EXPENSES	2,600.

TOTAL	68,959.
	=====

FORM 990EZ, PART I - OTHER CHANGES IN FUND BALANCES
=====

DECREASES IN FUND BALANCES

UNREALIZED LOSS ON INVESTMENTS

33,530.

TOTAL

33,530.
=====

FORM 990EZ, PART II - CASH, SAVINGS AND INVESTMENTS

=====

DESCRIPTION -----	BEGINNING OF YEAR -----	END OF YEAR -----
CASH	347,020.	296,168.
INVESTMENTS - SECURITIES	167,988.	139,063.
TOTALS	----- 515,008. =====	----- 435,231. =====

FORM 990EZ, PART II - OTHER ASSETS

=====

DESCRIPTION	BEGINNING OF YEAR	END OF YEAR
-----	-----	-----
ACCOUNTS RECEIVABLE	8,048.	4,654.
PLEDGES RECEIVABLE	300.	200.
TOTALS	8,348.	4,854.
	=====	=====

FORM 990EZ, PART II - TOTAL LIABILITIES

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DESCRIPTION -----	BEGINNING OF YEAR -----	END OF YEAR -----
ACCOUNTS PAYABLE	8,528.	1,902.
TOTALS	8,528.	1,902.

=====

FORM 990EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE
=====

DEVELOPING AND ENHANCING THE SPORT OF REINING WORLDWIDE INCLUDING
SUPPORT OF NATIONAL REINING HORSE ASSOCIATION.

FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION
BILL PEEL 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	PRESIDENT 4.	NONE
JERRY KIMMEL 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	VICE PRESIDENT 4.	NONE
TRACY LYNCH 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	SECRETARY 4.	NONE
ANNE-MARIE BURNS 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	TREASURER 4.	NONE
MIKE BOYLE 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
DOUG CARPENTER 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	VICE PRESIDENT 4.	NONE
KIT COSPER	DIRECTOR 4.	NONE

FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION
3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302		
FRANK COSTANTINI 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	PRESIDENT 4.	NONE
GREG HILL 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
DALE LOPP 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
ALLEN MITCHELS 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
COLLEEN MCQUAY 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
DR. KIM SLOAN 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE

FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION
RICK WEAVER 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
SHERRY ADAMS 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
ELEUTERIO ARCESE 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
WALTER FUCHS 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
MANDY MCCUTCHEON 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
D. WAYNE MCDONNELL 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE

FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION
DOUG MCCLELLAND 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
DON TREADWAY 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
VAUGHN ZIMMERMAN 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
MIKE HANCOCK 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	TREASURER 4.	NONE
BETH HIMES 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
WILLIAM BRADLEY 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
LEONARDO ARCESE	DIRECTOR 4.	NONE

FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION
3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302		
CORINNA SCHUMACHER 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
ANDRE DEBELLEFEUILLE 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
MARK SCHOLS 3000 N.W. 10TH STREET OKLAHOMA CITY, OK 73107-5302	DIRECTOR 4.	NONE
GRAND TOTALS		NONE

FORM 990EZ, PART V, LINE 41 - STATES
=====

AK, AZ, AR, CA, CO, CT, FL,
GA, ID, IL, IA, KS, KY, LA, ME, MD, MA, MI, MN,
MS, MO, NH, NM, NY, NC, OH, OK, OR, PA,
RI, SC, TN, UT, VA, WA, WV, WI,

Program Service Accomplishments

YOUTH

The Youth Team Tournament Program offers over \$43,200 in scholarship awards each year, these tournaments are held at the 12 National Reining Horse Association (NRHA) regional affiliate championship shows. The Youth program also offers the Paul Horn Youth Memorial Scholarship and the John McQuay memorial scholarship. In fiscal year 2009, \$49,950 in scholarships were awarded (not paid) on a national basis at regional reining competitions for youth riders.

Also of interest to youth is the creation of the new Reining Horse Sports Foundation Academic Scholarships. Beginning in 2002, the scholarships were available to support the education of NRHA and National Reining Horse Youth Association (NRHyA) members. Scholarships are awarded based on financial need, academic achievement, career paths, NRHA involvement and references. In fiscal year 2009, \$5,000 in Academic Scholarships were awarded by the Foundation.

Individuals that are awarded scholarships are eligible to claim their scholarship as they enter college, in fiscal year 2009 the Foundation paid out \$19,550 in scholarships.

YOUTH LEADERSHIP & OFFICER

“Educating the Future of Reining”

The National Reining Horse Youth Association (NRHyA) is a leadership organization supported by the Foundation, open to all youth members of the Association. NRHyA elects four delegates in each region of NRHA competition and has five elected National officer positions - President, Vice-President, Treasurer, Secretary and Historian.

The NRHyA has initiated a youth leadership and educational program titled the Varsity Reining Club that is supported by the Foundation and is open to all youth members of the

Association. The Varsity Reining Club ("VRC") was established to engage youth members and encourage them to become more active at both the local and national levels. This program offers NRHyA members opportunities to contribute to the youth association in addition to developing valuable life skills that will allow them to be successful contributing members of society.

In addition to the youth members interacting with one another and participating in the program, the Foundation wants to provide life skills that will help them grow and mature. Stressing the importance of community service, being an active member in a group and learning to work with others, public speaking, written communications skills and creativity are all important skills that can be further developed by participating in this program.

NRHyA members are awarded points for participating in the following leadership and educational type activities of the Varsity Reining Club: Community service, volunteering and assisting at approved NRHA events, assisting with fundraising activities of local clubs, photography of equine related activities, creative writing concerning equine events (fictional or non-fictional), a news style article reporting on factual events that is equine related, arts and crafts with an equine based theme, and holding and organizing an NRHyA meeting. The Foundation provides 10 scholarships totaling \$3,000 in total awards to the VRC program each year, and the scholarships are awarded based on the points earned by the VRC participants.

INTERNATIONAL DEVELOPMENT

"There are no boundaries in the sport of Reining."

The Foundation promotes and develops the sport of reining worldwide by providing assistance to significant international events, such as the World Reining Masters. This assistance is needed to provide the worldwide reining community, high quality international competitions that are needed in order to promote and develop reining on an

international basis and to maintain the interest and activity of the international reining community in the sport of reining.

The Foundation is working to grow the sport of Reining around the world through the Fellowship Program. The goal of the Fellowship Program is the education of young trainers, pairing professionals from countries with less developed Reining programs with those more advanced in the sports, with levels of expertise based on competition in the world Equestrian Games. Reining is advancing all around the world with a growing number of professionals who have been Fellows in the program. The Foundation will continue to serve as the premier growth mechanism for educating the Mentors of tomorrow as the sport develops.

Additionally, the Foundation through its international program will make a recommendation to the International Olympic Committee to add a fourth equestrian discipline to the Olympic Games. With Universality of the sport as a key determining factor, the Fellowship Program will work directly towards that goal.

CRISIS FUND

“Taking care of our own”

The Reining community comes together through the crisis fund to financially and emotionally support members faced with hospital bills, or other losses not covered by insurance. After review and following guidelines for distributions, gifts in the amount of \$32,500 were distributed this year, based on the demonstrated needs of individual members of NRHA.