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Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

	_F	or the 2	2009 calendar year, or tax year beginning AUG 1, 2009 and en	naing J	OL 31, 2010			
В	Cr ap	neck if oplicable.	Please Use IRS		D Employer identific	cation number		
[		Address change	label or RENO RODEO ASSOCIATION					
[		Name change	type Doing Business As		88-0234480			
[		Initial return	See Number and street (or P 0 box if mail is not delivered to street address) Ro	oom/suite	E Telephone numbe	phone number		
		Termin- ated	Specific P.O. BOX 12335	775-	329-3877			
		Amende		_	G Gross receipts \$	4,097,200.		
[		Applica- tion	RENO, NV 89510		H(a) Is this a group re	etum		
		pending	F Name and address of principal officer:MIKE LUCKE	for affiliates?	Yes X No			
_			SAME AS C ABOVE	H(b) Are all affiliates inc	cluded? Yes No			
1		ax-exen	If "No," attach a	list. (see instructions)				
J	W	<u>/ebsite</u>	► WWW.RENORODEO.COM		H(c) Group exemptio			
			rganization Corporation Trust X Association Other ►	L Year	of formation 1987 N	A State of legal domicile NV		
	Pa		Summary			<del></del>		
	စ္		riefly describe the organization's mission or most significant activities: $\frac{PRODUC}{ODEO}$	CTION	OF THE ANN	UAL RENO		
	Activities & Governance	_	heck this box If the organization discontinued its operations or disposed	d of more	than 25% of its net as	sets.		
	Š		umber of voting members of the governing body (Part VI, line 1a)	a or more	3	15		
(	5		umber of independent voting members of the governing body (Part VI, line 1b)		4	75		
•	S S		otal number of employees (Part V, line 2a)		5	20		
;	] je		otal number of volunteers (estimate if necessary)		6	0		
:	≦		otal gross unrelated business revenue from Part VIII, column (C), line 12		7a	18,018.		
9	∢		et unrelated business taxable income from Form 990-T, line 34		7b	0.		
• –	コ				Prior Year	Current Year		
	. l	8 C	ontributions and grants (Part VIII, line 1h)		48,453.	49,956.		
l	ğ		rogram service revenue (Part VIII, line 2g)		3,303,433.	3,216,379.		
	Hevenue		vestment income (Part VIII, column (A), lines 3, 4, and 7d)		33,264.	9,770.		
(	I	11 0	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		582,079.	581,753.		
) _		12 T	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,967,229.	3,857,858.		
á	1	<b>13</b> G	rants and similar amounts paid (Part IX, column (A), lines 1·3)		<b>a</b>			
;		14 B	enefits paid to or for members (Part IX, column (A), line 4	:D ∟				
; •	es		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u>h</u> ç		215,160.		
<b>)</b>	e l		rofessional fundraising fees (Part IX, column (A), line 11e)	11n	<u> </u>			
	Expenses		otal fundraising expenses (Part IX, column (D), line 25)		2	2 440 070		
•	-		ther expenses (Part IX, column (A), lines 11a-11d, 11f-24f)			3,448,879.		
	ŀ	18 T	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25 DEN,	UΙ⊢	3,775,427.	3,664,039.		
_	တ္ထ	19 R	evenue less expenses. Subtract line 18 from line 12		191,802.	193,819.		
ts o	Fund Balances	oo -	Add assists (Dark V. Iras 40)	Be	eginning of Current Year 3,011,988.	3,083,908.		
955	Bal		otal assets (Part X, line 16)		482,327.	394,662.		
1 tel	3		otal liabilities (Part X, line 26)		2,529,661.	2,689,246.		
			et assets or fund balances. Subtract line 21 from line 20 Signature Block		2,323,001.	2,005,240.		
L	a		Inder penalties of penjury, I declare that I have examined this return, including accompanying schedules and s	statements.	and to the best of my knowled	ge and belief, it is true, correct,		
		1	and complete Declaration of preparer (other than officer) is based on all information of which preparer has any	knowledge	•			
	ign	. 1	Muchan XIII					
	ere	- 11	Signature of officer		Date			
•		_   	MIKE LUCKE					
			Type or print name and title					
_			Preparer's Date			er's identifying number structions)		
signature signature								
	•			LTD.	EIN ▶			
U	56 (	J,	elf-employed). 1025 RIDGEVIEW DRIVE, SUITE 300					
			RENO, NEVADA 89519		Phone no ► 7	75-826-5432		
<u>N</u>	1ay	the IRS	6 discuss this return with the preparer shown above? (see instructions)			X Yes No		

orm	990 (2009) RENO RODEO ASSOCIATION	88-0234480 i	Page 2
Pai	rt III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission: PRODUCTION OF THE ANNUAL RENO RODEO.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.	Yes 🖸	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service.	ces? Yes	X No
4	If "Yes," describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program services b Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amoun allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code: ) (Expenses \$ 3,122,995. including grants of \$ PROGRAM, OPERATING AND OTHER EXPENSES INCURRED FROM THE ANNUAL RENO RODEO	)(Revenue \$ HE PRESENTATION	OF )
4b	(Code: ) (Expenses \$ 165,799 · including grants of \$ CONTRIBUTIONS MADE TO COMMUNITY ORGANIZATIONS FROM THE DURING THE ANNUAL RENO RODEO	)(Revenue\$ E INCOME GENERA	TED )
4c	(Code: ) (Expenses \$ including grants of \$	) (Revenue \$	)
<b>4</b> d	Other program services. (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$  Total program service expenses ▶ \$ 3,288,794.		

Form 990 (2009) RENO RODEO ASSOCIATION

Part IV Checklist of Required Schedules

, 4,	142 Onoutine of Required Constants		· ·	
		_	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			v
_	If "Yes," complete Schedule A			X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
_	public office? If "Yes," complete Schedule C, Part I	3_		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	_		v
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			v
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			v
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		]	١,,
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	ļ	X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	<u> </u>	X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	<del></del>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12		X_
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			[
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16	ļ	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	l	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			<u> </u>
•	1c and 8a? If "Yes," complete Schedule G, Part II	18	İ	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
-	complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
			990	วกกดา

### Form 990 (2009) RENO RODEO ASSOCIATION 88-0234480 Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Х 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х Schedule K. If "No", go to line 25 24a **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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Х 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete X Schedule L. Part I 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete X Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X contributions? If "Yes," complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Х 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х Schedule N. Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? X If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 Х If "Yes," complete Schedule R, Part V, line 2 35 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36

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37

38

X

Х

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Form	990 (2009) RENO RODEO ASSOCIATION	88-0234	480	Р	age <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance				
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable	1a 11	ŀ		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 9			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	eportable gaming			
	(gambling) winnings to prize winners?		1c	X	ļ
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 20			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined to the control of the control		2b	ļ	X
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see		_		,
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered to \$1,000 or m	ed by this return?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
40	At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial	<u>-</u>	4-		X
h	If "Yes," enter the name of the foreign country:	account)?	4a		
U	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Pank and			
	Financial Accounts.	Dalik aliu			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ection?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega		30		
	Tax Shelter Transaction?	arding i Tomonod	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit			
	any contributions that were not tax deductible?	• • • • • • • • • • • • • • • • • • • •	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
	were not tax deductible?	•	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods and services			
	provided to the payor?		7a		X
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?	1 1	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	personal			
	benefit contract?		7е		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f		
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	•	7h		······
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a depart advised fund mointained by a consequence organization, by a depart of the department of the de	=			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have except at any time during the year?	ess business nolaings	8		
9	Sponsoring organizations maintaining donor advised funds.		•		
a	Did the organization make any taxable distributions under section 4966?		9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:			,	1777777
а	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:				
а	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		,,,,,,,,
<u> </u>	if "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
			Form	990 (	2009)

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 in Schedule O. See instructions.

Sec	tion A. Governing Body and Management				
			Yes	No	
1a	Enter the number of voting members of the governing body  1a 15	ļ			
þ	Enter the number of voting members that are independent  1b  75				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	i			
	officer, director, trustee, or key employee?	2		<u>X</u>	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision				
	of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X	
6	Does the organization have members or stockholders?	6_		X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the				
	governing body?	7a_	_X	- 17	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				
	by the following:				
	The governing body?	8a_	X		
		_8b_	X		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			Х	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9			
<u>sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		Yes		
100	Does the organization have local chapters, branches, or affiliates?	10a	res	No X	
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	100			
Ü	and branches to ensure their operations are consistent with those of the organization?	10b			
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			<del>,,,,,,,,,</del>	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise				
	to conflicts?	12b			
c	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe				
	ın Schedule O how this is done .	12c			
13	Does the organization have a written whistleblower policy?	13		X	
14	Does 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?				
	The organization's CEO, Executive Director, or top management official	15a	X		
b	Other officers or key employees of the organization	15b		<u>X</u>	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			v	
	taxable entity during the year?	16a		<u>X</u>	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation				
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16ь			
202	exempt status with respect to such arrangements?	100			
<u>3ec</u> 17	List the states with which a copy of this Form 990 is required to be filed ▶NV				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for			
	public inspection. Indicate how you make these available. Check all that apply.				
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	incial		
-	statements available to the public.				
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion: ▶	• _		
	RENO RODEO ASSOCIATION - 775-329-3877				
	WASHOE COUNTY FAIRGROUNDS, RENO, NV 89512				
		Form	990 (	2009)	

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

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. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of "key employees."
- 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)				C)			(D)	(E)	(F)	
Name and Title	Average	,			osition ill that apply)			Reportable	Reportable	Estimated	
	hours per week	Individual trustee or director	Institutional frustee	c all		Highest compensated de employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
ALAN KINGSLEY		├	H	<del>                                     </del>	-						
EXECUTIVE DIRECTOR	40.00	Х				Х		78,692.	0.	0	
MIKE LUCKE	İ							0	•	0	
PRESIDENT CLINT THIESSE		+-		-		<del> </del>	_	0.	0.	0	
1ST VICE PRESIDENT								0.	0.	0	
TOM PAGNANO											
2ND VICE PRESIDENT		_				ļ		0.	0.	0	
JOHN TIPTON TREASURER								0.	0.	0	
BILL SUMMY		<del>                                     </del>		<u> </u>				· ·	<u></u>	U	
SECRETARY								0.	0.	0	
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	-	<u> </u>				-					
					L						

	(A) Name and title	(B) Average hours			-	-			(D)	(E)			(F)	
	Name and title					(C) Position								
			l (ci				app	lv)	Reportable Reportable compensation compensation				imate ount	
		per	$\overline{}$	<u> </u>				<del>"</del>	from	from related			other	<b>O</b> .
		week	Individual trustee or director				<u>R</u> .		the	organizations			ensa	
			5 88	şş			Highest compensate employee		organization	(W-2/1099-MISC	"		om th	
			al tres	Institutional frustee		Кеу етріоуве	omo:		(W-2/1099-MISC)			_	anızat I relat	
			Midu	黄	Officer	yemp	phest	mer					nızatı	
			Ē	Ĕ	ъ	ş	포함	요						
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		<u> </u>		_								•	-	
											_			
1b Tota	al .	<u> </u>					lacksquare		78,692.	;	5.			0.
2 Tota	al number of individuals (including but n	ot limited to th	ose	liste	d at	ove	e) wh	o re	eceived more than \$100	,000 in reportable		•		
com	pensation from the organization													0
													Yes	No
	the organization list any former officer,		stee	, key	em/	ploy	/ee,	or h	ighest compensated en	nployee on				v
	1a? If "Yes," complete Schedule J for s any individual listed on line 1a, is the su		le co	mne	nea	tion	200	l oth	er componention from	the ergonization	-	3		X
	related organizations greater than \$150									me organization		4	Ì	Х
	any person listed on line 1a receive or a									ces rendered to	ŀ			<del></del>
	organization? If "Yes," complete Sched											5		Х
	B. Independent Contractors	-												
	nplete this table for your five highest co organization. NONE	mpensated ind	depe	nde	nt co	ontr	acto	rs th	hat received more than	\$100,000 of comp	ensa	ition fr	om	
	(A) Name and business	address							(B) Description of s	en/ices	· ·	(C) ompen		_
		4041033						$\dashv$	Description of s	ervices		лпреп	Satio	
	<del>-</del>							4				_		
													_	
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								+						
								$\perp$					·····	
	I number of independent contractors (ii 0,000 in compensation from the organiz		ot lin	nited	1 to 1	thos 0		ted	above) who received m	ore than				

	n 990 (			SOCIATION	1		88-0234	480 Page <b>9</b>
P	art VIII	Statement of Rever	iue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abor Noncash contributions included in lines	ts, and ve 1f	26,900.				
g g	h	Total. Add lines 1a-1f	1a-11 4	<u> </u>	49,956.			
Program Service Revenue	2 a	ANNUAL RENO ROD		Business Code 711210	3216379.	3216379.		
am S even	c d							
5 P.	e							
Δ.	'	All other program service reve	enue	<b>•</b>	3216379.			
	3	Total. Add lines 2a-2f Investment income (including	dividends, intere		3210373.			
	4 5	other similar amounts) Income from investment of ta		<b>&gt;</b>	9,770.		9,770.	
	"	Royalties	(i) Real	(ii) Personal				
	6 a b c	Gross Rents Less: rental expenses Rental income or (loss)						
		Net rental income or (loss)		<b>•</b>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory Less: cost or other basis and sales expenses						
	1	Gain or (loss)  Net gain or (loss)		<b>•</b>	:		:	
Other Revenue		Gross income from fundraisin including \$ contributions reported on line	of					
Jer F		Part IV, line 18	а	4 3 0 0				
ਠੋ	l .	Less: direct expenses  Net income or (loss) from fund	<b>b</b> draising events	<u> </u>	18,864.			18,864.
	9 a	Gross income from gaming ac Part IV, line 19	-		·			•
		Less: direct expenses  Net income or (loss) from gam	b bana activities	15,372.	15,370.	15,370.		
	10 a	Gross sales of inventory, less and allowances	returns a		13,370.	13/3/3.		
	I .	Less: cost of goods sold	b o of investory	219778.	539,271.		•	539,271.
	<u>c</u>	Net income or (loss) from sale Miscellaneous Revenu		Business Code				33712111
	11 a	VIOCETT NEOUS	NCOME	900099	8,176. 72.		8,176. 72.	
	C	All ath an acc						
	d e	All other revenue  Total. Add lines 11a-11d		<b>•</b>	8,248.			,
	12	Total revenue. See instructions		<b>•</b>	3857858.	3231749.	18,018.	558,135.

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	lete column (A) but are		ete columns (B), (C), and	(D).
	not include amounts reported on lines 6b, 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 governments and				······································
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				ture or unimulations
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees			· <del>-</del> - <del> +</del>	<del></del>
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	185,999.	35,806.	150,193.	
8	Pension plan contributions (include section 401(k)		33,000.	130,133.	
-	and section 403(b) employer contributions)	3,539.		3,539.	
9	Other employee benefits	13,983.		13,983.	
10	Payroll taxes	11,639.	728.	10,911.	
11	Fees for services (non-employees):				
а	Management				
b	Legal	1,103.		1,103.	
C	Accounting	8,000.		8,000.	
d	Lobbying			<del></del>	
	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	<b>-</b>	205 664	274 105	11 450	
12	Advertising and promotion	385,664.	374,185.	11,479.	
13	Office expenses	41,508.	4,450.	37,058.	
14	Information technology				<del></del> :
15	Royalties	36,743.	25,954.	10,789.	
16 17	Occupancy Travel	36,840.	4,448.	32,392.	<del></del> -
18	Payments of travel or entertainment expenses	30,040.	4,440.	32,392.	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	32,172.		32,172.	<del></del>
20	Interest	,-		,	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	82,873.	82,873.		<del></del>
23	Insurance	41,996.	17,787.	24,209.	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled			·	
	miscellaneous may not exceed 5% of total		1		
	expenses shown on line 25 below )	246 570	246 000		
a	SECURITY & CLEANUP ADDED PURSE	346,572.	346,092.	480.	<del></del>
b	SPONSORSHIPS	340,450. 319,413.	340,450. 319,413.		
ب 2	LIVESTOCK	296,514.	296,514.		
u	CALCUTTA	292,713.	292,713.		
f	All other expenses	1,186,318.	1,147,381.	38,937.	
25	Total functional expenses. Add lines 1 through 24f	3,664,039.	3,288,794.	375,245.	0.
26	Joint costs. Check here ▶ ☐ If following		3,233,731	0.0,210.	<u></u>
-	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	——————————————————————————————————————				

Par	tΧ	Balance Sheet			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash · non-interest-bearing	220,825.	1	194,048.
	2	Savings and temporary cash investments	747,575.	2	632,689.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	166,973.	4	116,407.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use	57,916.	8	50,145. 29,989.
⋖	9	Prepaid expenses and deferred charges	30,412.	9	29,989.
	10a	Land, buildings, and equipment: cost or other			11 1 1 11111111111111111111111111111111
		basis. Complete Part VI of Schedule D 10a 2,155,382.			
	ь	Less accumulated depreciation 10b 1,082,218.	906,105.	10c	1,073,164.
	11	Investments - publicly traded securities	859,923.	11	964,995. 22,471.
	12	Investments - other securities. See Part IV, line 11	22,259.	12	22,471.
	13	Investments - program-related. See Part IV, line 11		13	
ŀ	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,011,988.	16	3,083,908.
	17	Accounts payable and accrued expenses	482,327.	17	394,662.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
Se	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			The Arm Arm
ia P		highest compensated employees, and disqualified persons. Complete Part II			,
-		of Schedule L		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. Complete Part X of Schedule D	<u> </u>	25	
_	26	Total liabilities. Add lines 17 through 25	482,327.	26	394,662.
		Organizations that follow SFAS 117, check here   X and complete			
ès		lines 27 through 29, and lines 33 and 34.			
au au	27	Unrestricted net assets	2,529,661.	27	2,689,246.
Bai	28	Temporarily restricted net assets		28	
ğ	29	Permanently restricted net assets		29	
J.		Organizations that do not follow SFAS 117, check here   and			
ŏ		complete lines 30 through 34.			
sets	30	Capital stock or trust principal, or current funds		30	
Asi	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	2,529,661.	33	2,689,246.
	34	Total liabilities and net assets/fund balances	3,011,988.	34	3,083,908.

Form **990** (2009)

Pa	rt XI Financial Statements and Reporting						
			Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X				
b	Were the organization's financial statements audited by an independent accountant?	2b		X			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			1			
	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 in Schedule O.						
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a						
	consolidated basis, separate basis, or both:	ŀ					
	Separate basis X Consolidated basis Both consolidated and separate basis			ĺ			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			ĺ			
	Act and OMB Circular A-133?	3a_		Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	Зь					
Form <b>990</b> (20							

# Schedule D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

RENO RODEO ASSOCIATION

Employer identification number 88-0234480

Par	Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Acco	unts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin			·
		(a) Donor advised funds	<b>(b)</b> Fu	nds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds	
	are the organization's property, subject to the organization's	•		Yes No
6	Did the organization inform all grantees, donors, and donor a	_	used only	
	for charitable purposes and not for the benefit of the donor of			
	impermissible private benefit?	, , , , , , , , , , , , , , , , , , , ,		Yes No
Pa		ganization answered "Yes" to Form 990, P	art IV, line 7	
1	Purpose(s) of conservation easements held by the organizat	·		
	Preservation of land for public use (e.g., recreation or		torically imp	ortant land area
	Protection of natural habitat	Preservation of a certi		
	Preservation of open space	<del></del>		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	of a conserv	ation easement on the last
	day of the tax year.			
	<b></b>			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified historic sti	ructure included in (a)	2c	
d	Number of conservation easements included in (c) acquired	• • •	2d	
3	Number of conservation easements modified, transferred, re			on during the tax
•	year▶	, ,	- g	
4	Number of states where property subject to conservation ea	sement is located		
5	Does the organization have a written policy regarding the pe			
-	violations, and enforcement of the conservation easements	• • • •		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		unna the ve	ar D
7	Amount of expenses incurred in monitoring, inspecting, and		_	
8	Does each conservation easement reported on line 2(d) above			
	and section 170(h)(4)(B)(ii)?	, , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense	statement,	and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	•		
	conservation easements.		Ū	·
Pa	TIII Organizations Maintaining Collections o	f Art, Historical Treasures, or Ot	ther Simi	lar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and ba	alance shee	t works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	olic service,	provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	items.		
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balance	ce sheet wo	orks of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	, provide th	e following amounts relating to
	these items:			
	(i) Revenues included in Form 990, Part VIII, line 1		<b>•</b>	\$
	(ii) Assets included in Form 990, Part X		<b>•</b>	\$ \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial		
	the following amounts required to be reported under SFAS 1			
а	Revenues included in Form 990, Part VIII, line 1	-	<b>&gt;</b>	\$
	Assets included in Form 990, Part X		<b>&gt;</b>	\$ \$

Schedule D (Form 990) 2009

1,073,164.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2009

uncertain tax positions under FIN 48.

932053 02-01-10

### SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

2009

Open To Public Inspection

Name of the organization

Employer identification number

Schedule G (Form 990 or 990-EZ) 2009

RENO RODEO ASSOCIATION 88-0234480 Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events c In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 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. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) fundraiser from activity organization listed in col. (i) 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.

932081 02-03-10

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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. (c) Other events (a) Event #1 (b) Event #2 (d) Total events SPECIAL KIDS NONE (add col. (a) through RODEO YOUTH col. (c)) (event type) (event type) (total number) Revenue 23,056. 23,056. Gross receipts Less: Chantable contributions 23,056. 23,056. 3 Gross income (line 1 minus line 2) Cash prizes 3,764. 3,764. 5 Noncash prizes Direct Expenses Rent/facility costs 281 281. Food and beverages Entertainment 147. 147. Other direct expenses 4,192; 10 Direct expense summary. Add lines 4 through 9 in column (d) 18,864 11 Net income summary. Combine line 3, column (d), and line 10 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (c) Other gaming (a) Bingo col. (a) through col. (c)) bingo/progressive bingo 30,742. 30,742. Gross revenue 15,372. 15,372. 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes % Yes Yes X No Volunteer labor 15,372 Direct expense summary. Add lines 2 through 5 in column (d) 15,370. Net gaming income summary. Combine line 1, column (d), and line 7 Yes No 9 Enter the state(s) in which the organization operates gaming activities: X a is the organization licensed to operate gaming activities in each of these states? 9a b If "No," explain: X 10a 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain. X 11 Does the organization operate gaming activities with nonmembers? Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to X administer charitable gaming?

<u>Sch</u>	edule G (Form 990 or 990 EZ) 2009 RENO RODEO ASSOCIATION 8	<u>8-023</u>	448	0 Pa	age 3
				Yes	No
13	Indicate the percentage of gaming activity operated in:				
а	The organization's facility 13a	%			ł
	An outside facility	%			
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?		15a		х
b	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount	t			
	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				
	Mandatory distributions:				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to				
	retain the state gaming license?		17a		X
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t	he			

# SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

RENO RODEO ASSOCIATION 88-0234480 FORM 990, PART VI, SECTION B, LINE 11: 990 IS REVIEWED BY EXECUTIVE DIRECTOR AND BOOKKEEPER PRIOR TO FILING THE RETURN. THE 990 IS AVAILABLE TO ALL MEMBERS OF THE GOVERNING BODY FOR REVIEW UPON REQUEST. FORM 990, PART VI, SECTION C, LINE 18: THE ASSOCIATION DOES NOT SEE A NEED FOR MAKING ITS TAX RETURN AVAILABLE TO THE GENERAL PUBLIC UNLESS THERE'S A PARTICULAR NEED FOR IT ON A CASE-BY-CASE BASIS. FORM 990, PART VI, LINE 8 CONTEMPORANEOUSLY DOCUMENT MEETINGS AND ACTIONS DETAILED MINUTES ARE TAKE AT EACH EXECUTIVE COMMITTEE MEETING, AND AT EACH SUBCOMMITTEE MEETING WHERE ANY ACTION IS TAKEN WHEN THE COMMITTEE HAS THE AUTHORITY TO ACT ON BEHALF OF THE ASSOCIATION (OR THE GOVERNING THE MINUTES ARE REVIEWED AND APPROVED AT THE FOLLOWING APPLICABLE COMMITTEE MEETING. MINUTES ARE AVAILABLE FOR INSPECTION IN THE ASSOCIATION'S OFFICE. FORM 990, PART VI, LINE 15A DETERMINING COMPENSATON EXECUTIVE DIRECTOR'S COMPENSATION DETERMINED BY THE ASSOCIATION'S EXECUTIVE COMMITTEE AFTER DISCUSSIONS, DELIBERATIONS AND OTHER VARIOUS PERTINENT INFORMATION IS OBTAINED. FORM 990, PART VI, LINE 7A

ANNUALLY, MEMBERS OF THE ORGANIZATION ELECT INDIVIDUALS TO THE BOARD.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10

ELECTING MEMBERS TO GOVERNING BODY

Schedule O (Form 990) 2009

# **SCHEDULE O**

Department of the Treasury

(Form 990)

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** 88-0234480 RENO RODEO ASSOCIATION FORM 990, PART VI, LINE 10 ASSOCIATION 990 REVIEW PROCESS THE ASSOCIATIONS ADMINISTRATIVE PERSONNEL RECEIVES THE FORM 990 TAX RETURN FROM PAID PREPARER AND IT IS INITIALLY REVIEWED BY THE BOOKKEEPER AND/OR THE EXECUTIVE DIRECTOR. THE FORM 990 IS THEN PRESENTED TO APPLICABLE ASSOCIATION OFFICER FOR FINAL REVIEW, SIGNATURE AND FILING. THE EXECUTIVE COMMITTEE IS NOTIFIED THAT THE FORM 990 IS EITHER READY TO BE FILED, OR HAS ALREADY BEEN FILED, AND THAT A COPY IS AVAILABLE FOR INSPECTION IF DESIRED. FORM 990, PART VI, LINE 19 INFORMATION AVAILABLE TO PUBLIC GOVERNING DOCUMENTS, ASSOCIATION POLICY, AND FINANCIAL STATEMENTS ARE NOT GENERALLY AVAILABLE TO THE PUBLIC.

Schedule R (Form 990) 2009 2009 Open to Public Inspection Employer identification number 88-0234480 OMB No 1545-0047 Direct controlling Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets status (if section Public charity 501(c)(3)) e e ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Total income Exempt Code section ত্ত 501(C)(3) ▶ See separate instructions. Related Organizations and Unrelated Partnerships Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) NEVADA LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. ► Attach to Form 990. CHARITABLE SCHOLARSHIPS Primary activity Primary activity 9 RENO RODEO ASSOCIATION RENO RODEO FOUNDATION - 88-0230538 Name, address, and EiN Name, address, and EIN of related organization of disregarded entity 500 RYLAND STREET, STE 200 Name of the organization Department of the Treasury Internal Revenue Service NV 89502 SCHEDULE R (Form 990) Part Parti RENO,

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Schedule R (Form 990) 2009 RENO RODEO ASSOCIATION

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part #

(9)	Be allocations 7 Code V-UB managing are allocations 7 20 of Schedule partner 7 (Form 1065) Yes No			because it had one or more related	1 Indentification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)  (a) (b) (c) (d) (d) (e) (f) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	because it had one or more related  (g) (h)  total Share of Percentage end-of-year ownership assets	because it had one or more related  (g) (h)  (total Share of Percentage end-of-year ownership assets	because it had one or more related  (g) (h)  total Share of Percentage assets assets	because it had one or more related  (g) (h) I total Share of Percentage end-of-year ownership assets	because it had one or more related total Share of Percentage assets
(6) Shore of	end-of-year assets			990, Part IV, line 34 b	to Form 990, Part IV, line 34 becau  (e)  Type of entity (C corp., S corp, nroome or trust)	990, Part IV, line 34 to fentity Share of incomtrust)	990, Part IV, line 34 k of entity Share of Incomirust)	990, Part IV, line 34 to of entity Share of incomprust)	990, Part IV, line 34 to great the state of entity of entity incomplications.	990, Part IV, line 34 to of entity Share of incomprust)
(f)			_	wered "Yes" to Form	n answered "Yes" to Form  (d)  Direct controlling Type (Coorport)	wered "Yes" to Form  (d) (D) Type of the controlling (C corportion) (C corportion	wered "Yes" to Form  (d) Controlling Type ( Corp entity O or t	(d) (Corporting (Corporting)	(d) (Coorpoint)	(d) (Copperating (Copperating)
(e)	(related, unrelated, excluded from tax under sections 512-514)			he organization ansv	he organization ansv (c) Lega domicile (state or foreign country)	(c) Legal domoile (state or foreign country)	he organization ansv (c) (c) (state or (state or (state or ocurity))	he organization ansv (c) (c) (cagal domicile (state or foreign country)	he organization ansv (c) (state or (	he organization answ (c) (c) Legal domicile (state or foreign country)
	entity			Trust (Complete if	or Trust (Complete if it	(b)	(b)	(b)	(b)	(b)
(2)	(state or foreign country)			rporation or	rporation or ax year.)	rporation or ax year.)	rporation or ax year.)	ax year.)	ax year.)	ax year.)
(b)	רוווומן מכוועונץ			anizations Taxable as a Co	anizations Taxable as a Co poration or trust during the t	anizations Taxable as a Co poration or trust during the t	anizations Taxable as a Co	anizations Taxable as a Coporation or trust during the tr	anizations Taxable as a Coporation or trust during the t	anizations Taxable as a Coporation or trust during the t
(a) Name address and FIN	of related organization		-	Part ty Identification of Related Org						

# Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule			$\vdash$	1
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			200	<b>.</b>
a Receipt of (i) interest (ii) annuities (iii) royatties or (iv) rent from a controlled entity		10	×	
<b>b</b> Gift, grant, or capital contribution to other organization(s)		4	×	
c Gift, grant, or capital contribution from other organization(s)	•	╁	×	
d Loans or loan guarantees to or for other organization(s)		79	×	ا ا
e Loans or loan guarantees by other organization(s)		100	×	J
f Sale of assets to other organization(s)		=	×	1.
g Purchase of assets from other organization(s)		7	×	ا
h Exchange of assets		4	×	ا۔
i Lease of facilities, equipment, or other assets to other organization(s)		;=	×	
		į,	×	ادا
k Performance of services or membership or fundraising solicitations for other organization(s)		*	×	ا
l Performance of services or membership or fundraising solicitations by other organization(s)		=	×	ادا
_		<b>1</b>	×	ا .
n Sharing of paid employees		r.	×	
6 Rembi reament paid to other prograption for expenses		,	-	1.
		0 1	<b>&lt;</b>  >	٦,
		-	1	
q Other transfer of cash or property to other organization(s)		19	×	11
		11	×	1
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	nsaction thresholds.			1
(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved	olved	
(1) RENO RODEO ASSOCIATION	υ		0	•
(2)				
(3)		:		l
(4)				1
(5)				1
(9)				1
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Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

triat was not a related organization. See instructions regarding exclusion to certain investment partitels inpo	(b)	(c)	9	(e)	g.	(5)	<b>£</b>
Name, address, and EIN	Primary activity	nicile	Are all partners	Share		Code V-UBI	
of entity		_	section 501(c)(3) organizations?		tionate allocations?	amount in box 20 of Schedule K-1	managing partner?
		country)	Yes No		Yes No	(Form 1065)	1
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