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SCANNED APR 03.2012

Form 990

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2010

OMB No. 1545-0047

Open to Public

		nue Service	► The organization may have to use a copy of this return to satisfy state				Mapecaon			
		2010 cale		and ending			, 2011			
	eck if ilicable	:	C Name of organization UTAH HIGH SCHOOL RODEO ASSOCIA	ATION	D Emplo	yer ider	tification number			
Add	dress o	hange	Doing Business As		37-03	3447	1			
∐ Nar	ne cha	nge	Number and street (or PO box if mail is not delivered to street address)	oom/Suite	E Teleph	one nun	nber			
Init	al retu	rn	PO BOX 204		(801)	391-	4646			
Ter	mınate	d	City or town, state or country, and ZIP + 4		G Gross					
Am	ended	return	ANNABELLA UT 84711		receipt	ts \$	269,127			
App	licatio	n pending	F Name and address of principal officer. H(a) is this a g	roup return	for affilia	tes? Yes X No			
_			SEE ATTACHMENT #1) Are all aff	ılıates ınclu	ded?	Yes No			
I Tax	<-exe	mpt status	X 501(c)(3) 501(c)() ◀ (insert no) 4947(a)(1) or 527	If "No," at	tach a list ((see instru	ctions)			
J We	bsite	: ► N/A	. H(c	Group exe	emption nur	mber >				
K For	mofo	rganization	Corporation Trust X Association Other ▶ L Year of fo	ormation 2	1969	M State	of legal domicile UT			
Par	ti	Summa	ry							
	1	Briefly des	scribe the organization's mission or most significant activities.							
	го	-	TE HIGH SCHOOL CONTESTANT RODEOS ON A	STATE	E LEV	EL A	ND TO			
A GOV	-		SCHOLARSHIPS TO QUALIFYING APPLICANTS							
GOVERNANC				-						
Ϋ́Ε	2	Check this	s box If the organization discontinued its operations or disposed of mo	re than 25°	% of its ne	et assets				
T R	3		f voting members of the governing body (Part VI, line 1a)		1	3	24			
ĮΆ	4		f independent voting members of the governing body (Part VI, line 1b),		'	4	24			
E Ñ	5		ber of individuals employed in calendar year 2010 (Part V, line 2a) .			5	1			
Е	6		ber of volunteers (estimate if necessary)		• • •	6	140			
&	1		lated business revenue from Part VIII, column (C), line 12	• •		7a				
				7b	0					
		1401 0111010	ated business taxable income from Form 990-T, line 34	Pr	lor Year	1	Current Year			
Ŗ	8	Contributi	ons and grants (Part VIII, line 1h)		301,66	3	152,974			
REVENUE	9		service revenue (Part VIII, line 2g)		89,75		113,719			
E	10	•	nt income (Part VIII, column (A), lines 3, 4, and 7d)	05,75	+					
ÿ	11		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				-1,220			
E	12		nue add lines 8 through 11 (must equal Part VIII, column (A), line 12)		391,42	, , 	265,473			
	13		d similar amounts paid (Part IX, column (A), lines 1-3)		148,62		157,367			
	14		aid to or for members (Part IX, column (A), line 4)	1	140,02		137,307			
É	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)		31,71	3	18,755			
EXPENSES	16a		nal fundraising fees (Part IX, column (A), line 11e)		31,/1		10,733			
E N	l .		raining expenses (Part IX, column (D), line 25) ▶							
ŝ	b	11	enses (Partix, Column (A), lines 11a-11d, 11f-24f)		182,33		86,025			
Š	17			-	362,66					
	18 19		enses: Add imes 13=17 (thust equal Part IX, column (A), line 25)				262,147			
N .		newalide)	HATT & COLE	D	28,75		3,326 End of Year			
OR FUZD	20	Total	ote (Pert-X-Ino-16)		g of Curren					
Ş F	21	Total liab			179,36	, ,	203,314			
	21				170 20		202 214			
Par			s-or-fund balances. Subtract line 21 from line 20		179,36	, ,	203,314			
	1.		ire Block				I a district A continue			
			. I declare that I have examined this return, including accompanying schedules and stateme clayation of preparer (other than officer) is based on all information of which preparer has a			пукложіе	oge and belief, it is true,			
		- 	Had what had							
Cia-							\			
Sign			lendy S Dahl Secreta		3-15	てい	Date			
Here	;	V V		74	J-75	1-1d				
			e or print dame and title	\overline{U}	T	1 [DTIN			
Paid		I .	/Type preparer's name Preparer's signature Date	- -	Check		PTIN			
Prep				5-12	_	nployed	L			
Use		<u> </u>	n's name ▶ ADAMS AND PETERSEN CPAS LLC		ırm's EIN	<u> </u>				
Jac	VIII	· · · · · · · · · · · · · · · · · ·	n's address ▶ 1689 E 1400 S STE 100		hone no.	76 -	241			
			ARFIELD UT 84015		801)7	/6-5	Ves X No			
NAON t	no IR	∽ mecuee t	his return with the preparer shown above? (see instructions)				I I VAC IXI NA			

orm 99	90 (2010) UTAH HIGH SCHOOL RODEO ASS 87-0334471	Page 2
Part I	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	<u></u>
	iriefly describe the organization's mission:	
	O PROMOTE HIGH SCHOOL CONTESTANT RODEOS ON A STATE LEVEL AND TO	
<u>P</u>	PROVIDE SCHOLARSHIPS TO QUALIFYING APPLICANTS.	
_		
	old the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	X No
	ne prior Form 990 or 990-EZ?	M 140
	ites, describe these new services on Schedule O. Old the organization cease conducting, or make significant changes in how it conducts, any program	
	□v	X No
	ervices?	٠.٠٠
	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
S	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants	
	and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a (c	Code) (Expenses \$ 77,237 including grants of \$) (Revenue \$ 63,738)
•	SEE ATTACHMENT #2	
=		
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4b (0	Code) (Expenses \$ 57,380 including grants of \$) (Revenue \$ 63,738	3)
		<u></u>
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_		<u> </u>
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4c (Code) (Expenses \$ 22,750 including grants of \$) (Revenue \$ 136,983))
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-		
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	Other pregram convece (Decembe in Cabadula C.)	
	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	
	(Expenses \$ including grants of \$) (Revenue \$)	

Part IV Checklist of Required Schedules Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) 2 Х 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Х candidates for public office? If "Yes," complete Schedule C, Part I . . . 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501 (h) X 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Х Did the organization receive or hold a conservation easement, including easements to preserve open space, Х 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X complete Schedule D, Part III 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," Х complete Schedule D, Part IV 9 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? Х 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule Х D, Part VI 11a b Did the organization report an amount for investments -- other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII..... 11b c Did the organization report an amount for investments -- program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Х Part X, line 16? If "Yes," complete Schedule D, Part IX 11d Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional Х 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? ... 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Х business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization X 15 or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance Х to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 17 X Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, Х 18 lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Х If "Yes," complete Schedule G, Part III 19 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H. Х b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) N/A

UTAH HIGH SCHOOL RODEO ASS 87-0334471 Form 990 (2010) Checklist of Required Schedules (continued) Part IV No Yes Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the Х United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, 22 X column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's 23 current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," X complete 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 X Schedule K If "No," go to line 25 24b **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... \mathbb{N}/\mathbb{A} Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," Х complete 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 Х 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 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 Schedule L, Part III Х 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) X 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, Х Part IV 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an X officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 28c X 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 Χ conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Х 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 Х III, IV, and V, line 1 X 35 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?.......... Did the organization receive any payment from or engage in any transaction with a controlled entity | | Yes within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 organization? If "Yes," complete Schedule R, Part V, line 2 X

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JVA

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

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.....

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

Χ

Х

Part '				
	Check if Schedule O contains a response to any question in this Part V	•••		Щ.
_	5		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the humber of Forms W 2d modded in time fat. Enter of in not applicable			•
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c		x
٥-	gaming (gambling) winnings to prize winners?	10		
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 1			
_	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2 1 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	•
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
3a	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
40	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country:			
-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	•		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	Ì	Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? N/A	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			
	solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible? N/A	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	ļ	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? N/A	7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	ļ	X
d	If "Yes," indicate the number of Forms 8282 filed during the year			١,,
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	 -	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X	<u>^</u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<u> ^</u>	ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.			
	Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess	8		X
•	business holdings at any time during the year?	-		1
9	, , , , , , , , , , , , , , , , , , , ,	9a	1	x
a	Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person?	9b	 	X
b 10	Section 501(c)(7) organizations. Enter		1	1
10 a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	†		
11	Section 501(c)(12) organizations. Enter	1		
	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
_	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		X
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		X

Form 9	90 (2010) UTAH HIGH SCHOOL RODEO ASS 87-0334471		Pa	age 6
Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "N	lo" res	ponse	to
	line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			_
	Check if Schedule O contains a response to any question in this Part VI			$\perp \! \! \perp$
Section	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			į
b	Enter the number of voting members included in line 1a, above, who are independent			į
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	_	1	7.
_	officer, director, trustee, or key employee?	2	-	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		3.5
_	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	7a		v
_	governing body? Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	_	X
b		76		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			ĺ
а	The governing body?	8a	X	İ
b		8b	X	\vdash
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			\vdash
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Section	on B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	The second by to decide the members about policies for required by the members are exactly		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization? N/A	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in 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		Х
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?			
а	The organization's CEO, Executive Director, or top management official	15a	ļ	X
þ	Other officers or key employees of the organization	15b	<u></u>	X
	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			I
	with a taxable entity during the year?	16a	ļ	X
ь	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			1
0	the organization's exempt status with respect to such arrangements?	16b	L	<u> </u>
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filled NONE			
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.			
40	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, and financial statements available to the public.			
	ponoj, and interioral statements available to the public.			

organization: ▶ SEE ATTACHMENT #3

20 State the name, physical address, and telephone number of the person who possesses the books and records of the

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 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

Check this box if neither the org	Check this box if neither the organization nor any related organizations compensated								director, or trustee	
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average		Position (check all that			at apply)		Reportable	Reportable	Estimated
	hours per week	ITD	ITD IT O KE H			H C E I O M	F	compensation	compensation	amount of
	(describe	- R D - V - D D A - P - D D A - P - D D A - P - D D A - P - D D A - P - D D A - P - D D A - P - D D A	- NST - T UT	Онн-Ошк	Ϋ́Р̈́	OMPLOYEE GHEST AT	O R M	from	from related	other
	hours for	Ϋ́̈́̈́	įŢ	Ċ	Ş	EEO	Ë R	the organization	organizations (W-2/1099-MISC)	compensation from the
	related		ÜÈ	Ř	O Y E	TSE	"	(W-2/1099-MISC)	(44-2/1099-141130)	organization
	organiza- tions in	A O C	i					(** 2, 100000)		and related
	Schedule		N			E D				organizations
	0)		A L		<u> </u>					
KELLY ANDERSON										
NATIONAL DIRECTOR								0	О	О
KEVIN GORDON		1								
PRESIDENT					ļ			О	0	О
RUSS STEBAR										
VICE PRESIDENT								0	0	О
WENDY DAHL		<u> </u>						:		
SECRETARY	25.00	1						18,755	0	O
MICHELLE SHINER		,								
DIRECTOR						ĺ		0	0	o
SHANE FROST				1						
DIRECTOR		1				1		0	0	0
BRUCE CURTIS										
DIRECTOR								0	О	0
SHAWN BARNSON										
DIRECTOR				1	1			O	0	O
LEX NIELSON										
DIRECTOR								0	O	0
PERRY ALLRED										
DIRECTOR								0	U	U
TONY CANNON										
DIRECTOR								0	0	U
AUSTIN DAY										
DIRECTOR								U	U	
BEN GERMAN										
DIRECTOR		1			!			٢	ľ	۲
SCOTT HANSEN		ŀ								
DIRECTOR								[ľ	
SHANE HAVILAND										
DIRECTOR]						٢	٢	ľ
JILL JENSEN		1								
DIRECTOR		<u>L</u> ,		<u> </u>		<u> </u>		0	0	0

Part VII	Section A. Officers	, Directors	, Truste	es, K	ey Em	ploye	es, and	Highe	est Compensated E	mployees (continue	d)		
	(A)	(B)		-	(C			(D)	(E)				
N	lame and title	Average	Po	sition	(check	all tha	at apply)		Reportable	Reportable	Estima		
		hours per		ΙT	ō	K E E M	HCE	Ę	compensation	compensation	an	nount of	i
		week (describe	N R I D U R	N R S U	F	Y P	I O M G M P	O R	from	from related	1	other	
		hours for	VĪC	T S	FF-CER	6	H P L E E O	M E	the	organizations	1	pensati	on
		related	DEO	Ŭ E	R	LOYEE	E E O S N Y T S E	R	organization	(W-2/1099-MISC)	l	om the	_
		organiza-	U P R	Ţ		E	T		(W-2/1099-MISC)		_	anızatıo d related	
		tions in Schedule	ĹΒ	N N			E D				1	anızatıor	
		0)		Ĺ L]		
BRUCE F	PULHAM				-								
DIRECTO	OR								0	0	0		
JASON S	SUTCH												
DIRECTO	OR								0	О	0		
WADE WO	OOLSTENHULME												
PAST PR	RESIDENT		1						0	О	0		
KYNA HA	AFEN												
STUDENT	r Officer -												
PRESIDE	RESIDENT 0 0									0	О		
JOSH FF	OSH FROST												
STUDENT	r officer -												
VICE PF	RESIDENT			ļ	İ				0	0	0		
CHET BO	OREN	ŀ											
STUDENT	r Officer -										1		
SECRETA	ARY		ļ						0	0	О		
BAILEY	JO WOOLSEY					1	1						
STUDENT	r officer -												
STATE (QUEEN					ļ			0	0	0		
DYLIN A	AHLSTROM												
JR HIGH	H PRESIDENT					1			0	0	þ		
SHAD WI	INN				1								
JR HIGH	H VICE		ļ										
PRESIDE	ENT						ļ		0	0	0		
ANNDIE	WATTERSON				<u> </u>			<u> </u>			<u> </u>		
1b Su	ıb-total							•	18755	0	О		
c To	tal from continuation sh	neets to Pa	art VII, S	Section	n A			▶	0	0	Ю		
	tal (add lines 1b and 1c)								18755	0	<u> </u>		
2 To	tal number of individuals	(including	but not	limited	to the	ose list	ed abov	e) wh	o received more tha	n \$100,000 in report	able co	mpensa	ition
fro	m the organization ▶											12	
											F	Yes	No
	d the organization list any							yee, o	or highest compensa	ited employee			3,5
	line 1a? If "Yes," comple										. 3		X
	r any individual listed on											1	٠,
	ganization and related org										4	<u> </u>	X
	d any person listed on line									or individual for	_		1,7
	rvices rendered to the org		? If "Yes,	" com	plete S	Sched	ule J for	such	person		. 5		X
	Independent Contracto								41 4	4h #400 000f			
	omplete this table for your	_	st comp	ensate	ed ind	epena	ent cont	ractor	s that received more	than \$100,000 of			
	mpensation from the orga							T	(P)			(C)	
(A) (B) (C)													
	Name and business address Description of services										Comp	ensatio	п
								<u> </u>					
								\vdash	···				
								-					
								1					
					h	A 1	1 41	<u> </u>	4-4-b				
	tal number of independe		-	_	put no	ot iimit	ea to tha	se lis	ied above) who rece	aved more than			
-	00,000 in compensation 1 0 99078 TWF 41345					,	0 T) · ·		<u> </u>			n 990	(0040)
JVA 1	44U/A (W/F/13/15	CODVII	INT HOTME	CONTIN	are ()nl	いー 201					COLD	・・・・コンフレ	1/1/11/11/11

Part	VII	Statement of Revenue				
			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt	Unrelated	Revenue excluded from tax
				function	business revenue	under sections
<u> </u>	12	Endorated compounds		revenue	Tevende	512, 513, or 514
GO		Federated campaigns 1a	4			
OFH NTE TSR		Membership dues	4			-
T S K		Fundraising events 1c	4			
I R .		Related organizations 1d	_			
S-M-LAR GRANTS	е	Government grants (contributions) . 1e	_	į.	<u> </u>	1
TSR	f	All other contributions, gifts, grants, &			1	
OAA		similar amounts not included above 1f 136,983	_			
O A A N NM S D T	g	Noncash contributions included in lines 1a-1f \$			<u> </u>	
S	h	Total. Add lines 1a-1f	152,974			
P		Business Code				
R	2a	STATE FINALS INCOME	63,738	63,738	[ĺ
OS GE		CLUB RODEO FEES	47,434	47,434		
RRR		YEARBOOK	1,987	1,987	 	<u> </u>
AVE		COWBOY PROM	560	560		
MIV	e		300	300		
ΕN	f	All other program conuce revenue	 	_		<u> </u>
U		All other program service revenue	112.710		 	
_==		Total. Add lines 2a-2f ▶	113,719			<u> </u>
	3	Investment income (including dividends, interest, and	Ì		1	
	_	other similar amounts)			ļ <u> </u>	
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(ı) Real (ıı) Personal	_			
	6a	Gross Rents	_}	į	1	}
	b	Less: rental expenses				
	C	Rental income or (loss)]			
	ď	Net rental income or (loss)	7		1	
	_	(i) Securities (ii) Other				
	7a	Gross amount from sales of assets other than	7	Į		<u> </u>
		inventory , , ,				•
	b	Less: cost or other basis	1			,
		and sales expenses .		<u> </u>]	
0	c	Gain or (loss)	1			
T		Not gain or (loss)	╡			•
H		Gross income from fundraising				
E R	0a					
"		events (not including \$				1
R		of contributions reported on line 1c)		1		•
E		See Part IV, line 18 a	4	-		
٧		Less direct expenses b	_			}
E		Net income or (loss) from fundraising events ▶				
N U	9a	Gross income from gaming activities. See				
E		Part IV, line 19	_		-	
-		Less direct expenses b	_]			
	С	Net income or (loss) from gaming activities ▶				
ľ	10a	Gross sales of inventory, less				
•		returns and allowances		Į.		
	b	Less cost of goods sold b 3,654]		1	
	C	Net income or (loss) from sales of inventory ▶	-1,282			
		Miscellaneous Revenue Business Code				
}	11a	RETURNED CHECK FEES	33	33	1	
		CHOICE HOTEL REWARDS	29	29		
	С			T		Γ
1	d	All other revenue	<u> </u>		 	
		Total. Add lines 11a-11d	62		1	
	12	Total revenue. See instructions	2 1 2 1 2 2	113,781	<u> </u>	1
				,		

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Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (B) Program service (C) Management and general expenses (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . 157,367 157,367 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . Benefits paid to or for members. 4 Compensation of current officers, directors, trustees, and key employees 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 . 18,755 18,755 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits ... 9 10 11 Fees for services (non-employees) Management 438 b Legal 1,353 1,353 C d Lobbying . Professional fundraising services. See Part IV, line 17 ... f Investment management fees . g Other 1.373 Advertising and promotion 1,373 12 3,746 Office expenses 3,746 13 Information technology . 14 Royalties 15 16 Occupancy 17 8,451 8,451 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 21 22 Depreciation, depletion, and amortization 1,145 1,145 2,970 2,970 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) SUPPLIES 40,661 40,661 OUTSIDE SERVICES 13,650 13,650 STATE ENTRIES PAYOUTS 7,199 7,199 STATE FINALS EXPENSE 2,956 2,956 NATIONAL EXPENSES е 1.223 1,223 #4. f 860 860 Total functional expenses. Add lines 1 through 24f 262,147 223,056 39,091 25 Joint costs. Check here ▶ If following SOP 98-2 26 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

art X	Balance Sheet				
			(A)		(B)
			Beginning of year		End of year
1	Cash non-interest bearing			1	
2	Savings and temporary cash investments		107,557	2	132,649
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Receivables from current and former officers, directors, t	trustees, key			
1	employees, and highest compensated employees Comp	plete Part II of			
	Schedule L			5	
6	Receivables from other disqualified persons (as defined under sect	tion 4958(f)(1)), persons			
_	described in section 4958(c)(3)(B), and contributing employers and s	ponsoring organizations			
A S	of section 501 (c)(9) voluntary employees' beneficiary organizations			6	
	Notes and loans receivable, net			7	
S 7 E 8	Inventories for sale or use		·	8	
S 9	Prepaid expenses and deferred charges			9	
10	a Land, buildings, and equipment: cost or other	1		1 1	
1.0	basis Complete Part VI of Schedule D 10a	71,810			
	b Less accumulated depreciation.	 	71,810	10c	70,665
1				11	,0,000
1				12	
13		• • •		13	
'			·	14	
19				15	
- 1 .		179,367	16	203,314	
10		179,307	17	203,314	
1				18	
				19	
L 19				20	
A 2		f Schodule D		21	
B 2				 - ' 	
Ľ ²	2 Payables to current and former officers, directors, truste employees, highest compensated employees, and disqu				
+		uanneu		22	
1	persons. Complete Part II of Schedule L			23	
<u>- 1 - </u>	3 Secured mortgages and notes payable to unrelated third			24	
S 2				25	
2	·			26	
- 2	6 Total liabilities. Add lines 17 through 25	· · · · · · · · · · · · · · · · · · ·		20	***************************************
Ì	Organizations that follow SFAS 117, check here ▶	∆ and			
F U 2	complete lines 27 through 29, and lines 33 and 34.		170 267	0.7	202 214
U 2			179,367	27	203,314
וח	8 Temporarily restricted net assets			28	
	9 Permanently restricted net assets		:	29	
B A L A 3	Organizations that do not follow SFAS 117, check he	ere 🕨 🗌			
ř	and complete lines 30 through 34.				
N 3	O Capital stock or trust principal, or current funds			30	
<u>c</u> 3	1 Paid-in or capital surplus, or land, building, or equipme			31	
9	2 Retained earnings, endowment, accumulated income, or	or other funds .		32	
3	3 Total net assets or fund balances		179,367	33	203,314
3	4 Total liabilities and net assets/fund balances		179,367	34	203,314

· ,				_	40
	990 (2010)			Page	12
Par					
	Check if Schedule O contains a response to any question in this Part XI			• • •	
4	Total revenue (must organ Bert VIII. column (A). Inno 10).	1	265,	173	
1	Total expenses (must equal Part IX, column (A), line 12)		262,		
2	one of the control of				
3	Revenue less expenses Subtract line 2 from line 1 3	 		326	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	 	179,	36 /	
5	Other changes in net assets or fund balances (explain in Schedule O) <u>5</u>	-			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))		203,	314	
Pai	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII		•		Ш_
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash 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		Х
 b	and the second s		2b		X
	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
·	audit, review, or compilation of its financial statements and selection of an independent accountant?	N/A	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
		ı on			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	UII			
	a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		_		٦,
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	/-			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	. N/A	3b		
11/0	10 99012 99011 TWE 41249 Converget Forms (Software Only) = 2010 TW		Form	990	(2010)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047 2010

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Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate Instructions.

		HTGH SC		ASSOCIATION					mpioyer i 7 – 033		auon nu	ımber	
Par				ty Status (All organi		et comple	to this nar			<u> </u>			
				cause it is. (For lines 1					u dollons.				
1	Ň		•	association of churche	_		•						
2	П		·	(1)(A)(II). (Attach Sche			` '	, , , , ,					
3	П			ervice organization des		section 17	70(b)(1)(A)	(III).					
4	П			ated in conjunction wit					(1)(A)(III).	Enter the	e hospit	al's na	me,
	_	city, and state		·	,			, ,			·		
5		An organization	operated for the bene . (Complete Part II)	efit of a college or unive	ersity owne	ed or oper	ated by a	governme	ntai unit d	escribed	ın secti	оп	
6	\Box	A federal, state	, or local government of	or governmental unit d	escribed in	section	170(b)(1)(4)(v).					
7		_	that normally receives (1)(A)(VI). (Complete F	s a substantial part of it Part II.)	ts support	from a go	vernmenta	l unit or fro	m the ge	neral pul	blic desc	cribed	ın
8	П	A community tr	ust described in sectio	on 170(b)(1)(A)(vI). (Co	omplete Pa	art II.)							
9	X	An organization	that normally receives	(1) more than 33 1/3	% of its si	pport from	m contribu	tions, men	nbership f	ees, and	gross		
				empt functionssubj							ıts		
				e and unrelated busine					from busi	nesses			
	_	acquired by the	e organization after Jur	ne 30, 1975 See sectio	on Sus(a)(a	z). (Comp	ete Part III)					
10	Ц	•		ted exclusively to test f		•							
11	Ш	•	•	ted exclusively for the		•			-				
				ported organizations on the type of supporting							uon		
		a Type I	b Type		ype III-Fu		•			ype III-0	Other		
6	П			organization is not co		-	_	one or mo	L.J	••	J.1101		
·	Ш			ers and other than on							ction		
		509(a)(1) or sec		,		,	• •	J					
f		If the organizati	on received a written	determination from the	IRS that it	ıs a Tvpe	I, Type II o	r Type III	supportin	a			
-		organization, cl					. , , ,						
g		Since August 1 following perso	_	ization accepted any o	gift or conti	ribution fro	om any of t	he					
		(I) A person w	ho directly or indirectly	y controls, either alone	or togethe	er with per	sons desc	ribed in (ii))			Yes	No
		and (III) bel	ow, the governing boo	dy of the supported org	ganization?						11g(l)		X
		(li) A family me	ember of a person des	cribed in (i) above?					•		11g(ii)		X
		(iii) A 35% con	trolled entity of a perso	on described in (i) or (ii	ı) above?						11g(III)		X
h		Provide the foll	owing information abo	ut the supported organ	nızatıon(s).						_		
/B. k!		o of our marks of	/IIV EINI	/III) 7	(1)		(W) Dod.			ls the	(vii)	Amou	nt of
		e of supported ganization	(II) EIN	(III) Type of organization (described on lines 1-9	in col. (1) li	organization sted in vour	organizatio	notity the	organizatio	n ın col. (İ	i) (''') ;	suppoi	
	٠. ١	Januarion,		above or IRC section	governing	document?	of your s	support?		ed in the S.?			
				(see instructions))	<u> </u>					,	_		
					Yes	No	Yes	No	Yes	No	_		
										İ			
					1								
							<u> </u>			ļ	-		-
Tota							1				-		

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

Schedule A (Form 990 or 990-EZ) 2010

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	44,572	76,552	31,334	333,796	152,974	639,228
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	299,138	387,256	269,600	57,625	113,719	1,127,338
3	Gross receipts from activities that are not an unrelated trade or business under section 513 .						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3	343,710	463,808	300,934	391,421	266,693	1,766,566
b	received from disqualified persons Amounts included on lines 2 and 3 received from						
	other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
8 8	Add lines 7a and 7b Public support (Subtract line 7c from line 6.)						1,766,566
	tion B. Total Support	<u> </u>	<u></u>	1	1		11,700,500
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	343,710	463,808	300,934	391,421	266,693	1,766,566
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975					<u>.</u>	
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	343,710	463,808	300,934	391,421	266,693	1,766,566
14	First five years. If the Form 990 is for the o organization, check this box and stop here			fourth, or fifth ta		on 501(c)(3)	▶ []
	tion C. Computation of Public Su					1	100 50
15	Public support percentage for 2010 (line 8,			lumn (f))		15	100.00 %
16	Public support percentage from 2009 Sched					16	%_
	tion D. Computation of Investmen			12 column (f)		17	0.00 %
17 18	Investment income percentage for 2010 (lin Investment income percentage from 2009 S					17	<u>0.00_%</u> %
18 19a	33 1/3 % support tests 2010. If the orga			n line 14 and lu			
130	not more than 33 1/3 %, check this box and						
ь	33 1/3 % support tests 2009. If the orga	•			•		
-	18 is not more than 33 1/3 %, check this bo						
20	Private foundation. If the organization did	· ·					
	10 900A24 TWE 10004 Comments				•		0 or 990-EZ\ 2010

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

2010

Open to Public Inspection

Name of the organization **Employer Identification number** UTAH HIGH SCHOOL RODEO ASSOCIATION 87-0334471 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements . Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register. . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year >\$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes | No In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (I) Revenues included in Form 990, Part VIII, line 1 . . . (II) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 **b** Assets included in Form 990, Part X

Par	III Organizations Mainta	ining Collection	ons of A	art, Historical Tre	easure	es, or Other Simi	lar As	ssets (continued)				
3	Using the organization's acquis	sition, accessio	n, and o	other records, che	eck an	y of the following	that a	are a significant use	of its	collecti	on	
	items (check all that apply):		•	,		, ,		J				
а	Public exhibition			d	ı∏ı	oan or exchange	prog	rams				
b	Scholarly research			е	Н	Other						
С	Preservation for future gen	erations										
4	Provide a description of the org		llections	and explain how	v they	further the organi	zatior	ı's exempt purpose ı	ın			
	Part XIV	_		•		_						
5	During the year, did the organi	zation solicit or	receive	donations of art	, histo	rical treasures, or	other	sımılar				
	assets to be sold to raise funds	s rather than to	be mai	ntained as part o	f the c	rganization's colle	ection	?		Yes		No
Par	IV Escrow and Custodia	I Arrangemen	ts. Com	plete if the organ	ızatıor	answered "Yes"	to Fo	rm 990,				
<u> </u>	Part IV, line 9, or repor	ted an amount	on For	m 990, Part X, line	e 21.						_	
1a	Is the organization an agent, tr	ustee, custodia	an or otl	ner intermediary f	or cor	tributions or othe	r asse	ets not		_	_	_
	included on Form 990, Part X?	' . .								Yes	[No
b	If "Yes," explain the arrangement	ent in Part XIV a	and con	nplete the following	ng tab	le:						
								Ar	moun	it		
С	Beginning balance						1c					
d	Additions during the year .					•	1d					
e	Distributions during the year						1e					
f	Ending balance						1f					_
2a	Did the organization include as	n amount on Fe	orm 990), Part X, line 21?						Yes	Į	No
b	If "Yes," explain the arrangeme											
Par	t V Endowment Funds. 0	Complete if the	organiz	ation answered "	Yes" t				.,			
		(a) Current	year	(b) Prior yea	ır	(c) Two years ba	ick (d) Three years back	(e)	Four y	ears b	ack
1a	Beginning of year balance							***************************************		.,,,,		
b	Contributions											
C	Net investment earnings,						l					
	gains, and losses								4			
d	Grants or scholarships											
е	Other expenditures for						į		I			
	facilities and programs											
f	Administrative expenses .											
g	End of year balance											
2	Provide the estimated percent	age of the year	end ba	lance held as								
а	Board designated or quasi-en	idowment >		%								
b	Permanent endowment		%									
С	Term endowment ▶	%										
3a	Are there endowment funds no	ot in the posse	ssion of	the organization	that a	re held and admi	nıster	ed for the		Г		
	organization by									- U	Yes	No
	(i) unrelated organizations		• • • •				•			3a(I)		
	(ii) related organizations						•	• • • • • • • • • • • • • • • • • • • •		3a(li)		
ь	If "Yes" to 3a(II), are the relate	-							•	3b		L
4	Describe in Part XIV the intend					ias.						
Pa	rt VI Land, Buildings, an					Cost or other	1 7	e) Assumulated		d) Bool	- valu	
	Description of investme	nt	١, ,	st or other basis	` '	Cost or other	1 6	c) Accumulated	(וטטם נוג	valu	e
4.5	land		("	nvestment)		basis (other)	 	depreciation				
1a L	Land						 					
b	Buildings		_		_		\vdash					
C	Leasehold improvements .	•		71 010			1			71	810	
d	Equipment , ,,			71,810			+				010	
e Tota	Other		d equal	Form 990 Part Y	Colu	mn (B) line 10(c))			71	,810)
		(4) 511541		. J	.,	(2), 10(0)	,					

Part VII Investments Other Securities. Se	e Form 990, Part X, line 12	100
(a) Description of security or category	(b) Book value	(c) Method of valuation.
(including name of security)		Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12)	>	
Part VIII Investments Program Related. Se	ee Form 990, Part X, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) Part IX Other Assets. See Form 990, Part X,		(b) Book value
	(a) Description	(b) book value
Total. (Column (b) must equal Form 990, Part X, col.		▶
Part X Other Liabilities. See Form 990, Part		
(a) Description of liability Federal income taxes	(b) Amount	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)	•	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	dule D (Form 990) 2010 UTAH HIGH SCHOOL RODEO	<u> ASS 87-033447</u>	1	Page 4
Par	XI Reconciliation of Change in Net Assets from Form 990 to Audited F	inancial Statements		
1	1 Total revenue (Form 990, Part VIII, column (A), line 12)			
2 Total expenses (Form 990, Part IX, column (A), line 25)		2		
3.	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
4			4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	ınd 9	10	
Par	XII Reconciliation of Revenue per Audited Financial Statements With F	Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements		1	· · · · · · · · · · · · · · · · · · ·
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c	_	
d	Other (Describe in Part XIV.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b		
С	Add lines 4a and 4b		4c	
_5			5	
Par	Reconciliation of Expenses per Audited Financial Statements With	Expenses per Return		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.			
а	Donated services and use of facilities	2a	_	
b	Prior year adjustments	2b	_	
	Other losses , , ,	2c	_	
d	Other (Describe in Part XIV)	2d	-	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_	
b	Other (Describe in Part XIV.)	4b	_	
	Add lines 4a and 4b		4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
Par	XIV Supplemental Information			

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

UTAH HIGH SCHOOL RODEO ASSOCIATION

Employer Identification number

87-0334471

SEE STATEMENTS 1-4

PART VI LINE 11: FORM 990 IS COMPARED TO CURRENT YEAR FINANCIAL STATEMENTS AND TO PRIOR YEAR FORM 990

PART VI LINE 19: ORGANIZATIONS DOCUMENTS AND FINANCIAL STATEMENTS ARE

AVAILABLE TO THE PUBLIC UPON REQUEST

Continuation Sheet for Form 990

OPEN TO PUBLIC 07-31-2011. 08-01 and ending INSPECTION For calendar year 2010 or tax period beginning Employer Identification number Name of the Organization UTAH HIGH SCHOOL RODEO ASSOCIATION 87-0334471 Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Part I (D) (F) (C) Reportable Estimated Name and title Position (check all that apply) Reportable Average TRUSTEE OR H I GMPLOYEE GMPLOYEE TED compensation compensation amount of hours I N S T I T U T I O N A L **EMPLOYEE** from from related other per the organizations compensation week (W-2/1099-MISC) from the organization (W-2/1099-MISC) organization and related organizations JR HIGH SECRETARY

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2010

Department of the Treasury Internal Revenue Service (99)

► See separate Instructions.

► Attach to your tax return.

Attachment Sequence No. 67

Identifying number Business or activity to which this form relates Name(s) shown on return 87-0334471 UTAH HIGH SCHOOL RODEO ASSOCIAFOR FORM 990 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- . . . 5 Dollar limitation for tax year. Subtract line 4 from line 1 If zero or less, enter -0- If married filling separately, 500,000 5 see instructions (b) Cost (busn use only) 6 (a) Description of property 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 500,000 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11. 13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12. Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property) (See instructions) 1,145 17 17 MACRS deductions for assets placed in service in tax years beginning before 2010 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B -- Assets Placed In Service During 2010 Tax Year Using the General Depreciation System (c) Basis for depr. (b) Month and (g) Depreciation (d) Recovery (f) Method (e) (a) Classification of property yéar placed in (business/investment use deduction Convention period service only -- see instructions) 19a 3-year property b 5-year property 7-year property 10-year property 15-year property 20-year property 25 yrs S/L 25-year property MM S/L 27 5 yrs. Residential rental MM S/L property 27.5 yrs. 39 yrs MM S/I i Nonresidential real property Section C -- Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs 40 yrs. MM S/L c 40-vear Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return. Partnerships and S corporations -- see instructions 1,145 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

990 PRINCIPAL OFFICER NAME AND ADDRESS						
ATTACHMENT 1: FORM 990 PAGE 1, LINE F	1					
OPEN TO PUBLIC						
INSPECTION For calendar year 2010, or tax period beginning	08-01-2010, and ending 07-31-2011.					
Name of Organization UTAH HIGH SCHOOL RODEO ASSOCIATION	Employer Identification Number 87-0334471					
990, Page 1, Line F						
Principal officer name	KELLY ANDERSON					
Business Name						
Street Address	PO BOX 204					
U.S Address						
Zip code 84711 City ANNABELLA	State UT					
or						
Foreign Address						
City						
Province or State						
Country						
Postal code	·····					

990 PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT ATTACHMENT 2: FORM 990 PAGE 2, PART III OPEN TO PUBLIC 07-31-2011 08 - 01 - 2010, and ending INSPECTION For calendar year 2010, or tax period beginning Employer Identification Number Name of Organization 87-0334471 UTAH HIGH SCHOOL RODEO ASSOCIATION Part III - Statement of Program Service Accomplishments 77,237 Revenue: 63,738 including Grants of Code: Expenses: Exempt Purpose Achievements PROVIDE AWARDS TO PROMOTE CONTESTANT RODEOS ON A STATE LEVEL

990 PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT ATTACHMENT 2: FORM 990 PAGE 2, PART III OPEN TO PUBLIC 07-31-2011. 08 - 01 - 2010, and ending INSPECTION For calendar year 2010, or tax period beginning Employer Identification Number Name of Organization 87-0334471 UTAH HIGH SCHOOL RODEO ASSOCIATION Part III - Statement of Program Service Accomplishments 57,380 63,738 Revenue. including Grants of Code: Expenses: **Exempt Purpose Achievements** PROVIDE TRAVEL FOR RODEO CONTESTANTS.

990 PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT ATTACHMENT 2: FORM 990 PAGE 2, PART III OPEN TO PUBLIC 07-31-2011. For calendar year 2010, or tax period beginning 08-01-2010, and ending INSPECTION Employer Identification Number Name of Organization UTAH HIGH SCHOOL RODEO ASSOCIATION 87-0334471 Part III - Statement of Program Service Accomplishments 22,750 including Grants of Revenue: 136,983 Code. Expenses: **Exempt Purpose Achievements** TO PROVIDE SCHOLARSHIPS TO PROMOTE HIGH SCHOOL CONTESTANT RODEOS ON A STATE LEVEL.

JVA

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990 BOOKS ARE IN CARE OF ATTACHMENT 3: FORM 990 PAGE 6, PART VI, SECTION C, LINE 20 OPEN TO PUBLIC 07-31-2011. INSPECTION For calendar year 2010 or tax period beginning 08-01 , and ending Name of Organization **Employer Identification Number** 87-0334471 UTAH HIGH SCHOOL RODEO ASSOCIATION Part VI - Line 20 Individual Name WENDY DAHL **Business Name** <u>1</u>680 E 7650 S Street Address , U.S. Address Zip code 84405 City SOUTH WEBER State UT Foreign Address City Province or State Country .. Postal code (801)475-1854 Phone Number Fax Number

990 PAGE 10, OTHER EXPENSES ATTACHMENT 4: FORM 990 PAGE 10, LINE 24 - OTHER EXPENSES OPEN TO PUBLIC 07-31-2011 08 - 01 - 2010, and ending INSPECTION For calendar year 2010 or tax period beginning Employer Identification Number Name of Organization 87-0334471 UTAH HIGH SCHOOL RODEO ASSOCIATION (B) Program (C) Management (D) Fundraising Other Expenses (A) Total Services and General POSTAGE 542 138 BANK CHARGES 138 91 PRINTING 91 SYMPATHIES 89 89

2010 DETAIL STATEMENTS						
UTAH HIGH SCHOOL RODEO ASSOCIA 87-0334471		PAGE				
STATEMENT #1 - OTHER EXPENSES (990-EO PG 1 LINE 17)						
PROF FEES AND OTHER PYMTS TO IND CONTRACTORS	3,289					
OCCUPANCY, RENT, UTILITIES AND MAINTENANCE	420					
PRINTING, PUBLICATION, POSTAGE, AND SHIPPIN	1,925					
STATE ENTRY PAYOUTS	6,717					
STATE FINALS	2,655					
BANK CHARGE	175					
MANAGEMENT & GENERAL	3,416					
EQUIPMENT	290					
RETURNED CHECKS	-680					
INTERNET	•					
SYMPATHIES						
INSURANCE	43,046					
SUPPLIES	37,926					
TELEPHONE	41					
ADVERTISING	247					
MEMBERSHIP AND DUES	29,890					
SOFTWARE DEVELOPMENT	1,350					
TRAVEL AND MEETINGS	6,941					
NATIONAL FEES	•					
COST OF T SHIRT SALES	8,237					