

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

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

Department of the Treasury Internal Revenue Service

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

-	4 Fo	r the	2012 calendar year, or tax year beginning JUN 1, 2012 and end	<u>fing M</u>	AY 31, 20	13	
-	3 Chi		C Name of organization		D Employer ide		n number
	Ц	Addres change	NEVADA BIGHORNS UNLIMITED, RENO CHAPTER				
		Name change	Doing Business As		88	<u>-0180</u>	276
	님	Initial return Termin		m/suite	E Telephone nur		3-1177
		ated Amend retum			G Gross receipts \$		999,079.
		Application	RENO, NV 89515		H(a) Is this a grou	p return	
		pendin	F Name and address of principal officer:DENNIS WILSON		for affiliates?		Yes X No
_			P.O. BOX 21393, RENO, NV 89515-1393		H(b) Are all affiliate		
_			mpt status: X 501(c)(3)	527			see instructions)
			e: ► N/A		H(c) Group exem		
			organization X Corporation Trust Association Other ►	L Year o	of formation 198	1] M State	e of legal domicile NV
Ĺ	Par		Summary Briefly describe the organization's mission or most significant activities: PROVIDI	F GR	ANTS AND	ΤΑΙΛΟ	TONS TO
	Activities & Governance	1 [VARIOUS NEVADA NON-PROFIT ORGANIZATIONS AND	D ST	ATE AGENC	IES T	O BE
	E	-	Check this box if the organization discontinued its operations or disposed				
	Š		Number of voting members of the governing body (Part VI, line 1a)			3	13
	Ğ		Number of independent voting members of the governing body (Part VI, line 1b)			4	13
	SS		Total number of individuals employed in calendar year 2012 (Part V, line 2a)			5	0
	: <u>₹</u>		Total number of volunteers (estimate if necessary)		- .	6	503
	is		Fotal unrelated business revenue from Part VIII, column (C), line 12	= Fui-	1000	7a	0.
	4		Net unrelated business taxable income from Form 990-T, line 34	فتسترعنسة يتهندن		7b	0.
			JAI	N	Prior Year		Current Year
	<u>o</u>	8 (Contributions and grants (Part VIII, line 1h)		47/72/94	8.	467,689.
	딞	9 F	Program service revenue (Part VIII, line 2g)	7: 4:		0.	0.
	Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	UT 11,82		609.
		11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-29,06		43,924.
-	4	12	Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)		450,70		512,222.
		13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)		463,51		349,470.
	- 1		Benefits paid to or for members (Part IX, column (A), line 4)	-		0.	0.
	es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-		0.	0.
	ë		Professional fundraising fees (Part IX, column (A), line 11e)			0.	0.
	Expenses		Total fundraising expenses (Part IX, column (D), line 25) 16,866	<u>-</u>	222,34		100 011
	_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)				180,844. 530,314.
			Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	685,85 -235,14	() -	-18,092.
	<u> </u>	19	Revenue less expenses Subtract line 18 from line 12	- Par	inning of Current Yo		
;	ass.	20 -	Fotal assets (Part X, line 16)	Dei	1,304,95		End of Year 1,337,152.
4	333		Total liabilities (Part X, line 26)	-		0.	50,285.
	35 E		Net assets or fund balances. Subtract line 21 from line 20	 	1,304,95	• •	1,286,867.
Ī	Par		Signature Block			1	=/= 33/33.
			ties of perjury, I declare that I have examined this return, including accompanying schedules and	d stateme	ents, and to the best	of my knov	wledge and belief, it is
			, and complete Declaration of preparer (other than officer) is based on all information of which			•	,
			Dir.in				
9	Sign	Ì	Signature of officer		Date	2 10	2014
	lere		DENNIS WILSON, PRESIDENT		<u>J</u>	740 5	, 2017
_			Type or print name and title				
			Print/Type preparer's name Preparer's sygnature	`	date Check		PTIN
	'aid	-	MICHAEL J. KLAICH, CPA	<u>/ </u>	2-10-13 self-e		00054984
	repa	-	Firm's name MUCKEL ANDERSON CPAS		Firm's EIN	▶ 88	3-0350205
ĺ	lse O	nly	Firm's address 300 EAST 2ND STREET, SUITE 1320		_	,,,,,	
-			RENO, NV 89501		Phone no	(775	
!	<u>May t</u>	he IR	S discuss this return with the preparer shown above? (see instructions)				X Yes No
-							LAYM MMI 1 /2/11/2/

	1990 (2012) NEVADA BIGHORNS UNLIMITED, RENO CHAPTER 88-0180276 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	PROVIDE GRANTS AND DONATIONS TO VARIOUS NEVADA NON-PROFIT
	ORGANIZATIONS AND STATE AGENCIES TO BE USED FOR THE PROTECTION AND
	PRESERVATION OF NEVADA WILDLIFE.
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.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code) (Expenses \$ 375,679 · including grants of \$ 349,470 ·) (Revenue \$)
	PROVIDE GRANTS AND DONATIONS TO VARIOUS NEVADA NON-PROFIT ORGANIZATIONS
	AND STATE AGENCIES TO BE USED FOR THE PROTECTION AND PRESERVATION OF
	NEVADA WILDLIFE.
4b	(Code) (Expenses \$
4c	(Code) (Expenses \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ Including grants of \$) (Revenue \$)
<u>4e</u>	
23200 12-10-	Form 990 (2012)

Page 3 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)? X If "Yes," complete Schedule A Х 2 2 Is the organization required to complete Schedule B, Schedule of Contributors? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes," complete Schedule C, Part I 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X 4 during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X 5 similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Х 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," complete Х 8 Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? Х 9 If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X 10 endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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 D, X 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 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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 X 11d Part X, line 16? If "Yes," complete Schedule D, Part IX X 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 Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х 12a Schedule D. Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? X 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 X 14b or more? 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 to individuals X located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX. Х 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines X 18 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Form 990 (2012)

19

20a

20h

X

Х

complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

		├ ──	162	140
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22_		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		<u> X</u>
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			v
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		ļ
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			<u> </u>
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
ь	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		-	
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X_
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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):	28a		Х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	_	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			Ų,
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34		Х
350	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	558		
J	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
- •	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37_		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		r	aga.	(2012)

Page 5

Series the number reported in Box 3 of Form 1096. Enter 0-if not applicable 1a 3 3 1b 0 0	Par	t V	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V				
Enter the number of Forms WGS included in the 1s. Enter 9-if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gamibling) winnings to prize witheres? 25. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the callendar year ending with or within the year covered by this return bif at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1s and 2s is greater than 250, you may be required to e-five (see instructions) 30. Did the organization have unrelated business gross income of \$1,000 or more during the year? 31. If Yes, 1 and 1 filed a Form 900 Trof they year? If Yos, *provide an explanation in Schodule 0 32. At any time during the calendar year, did the organization have an interest in, or a eignature or other authority over, a financial account in a foreign country (such as a bank account, accountes account, or other financial accounts? 33. If Yes, 1 ender the name of the foreign country. Proceedings of the organization and the such as the firm of the foreign country (such as a bank account, accountes account, or other financial accounts? 34. At any time during the calendar year, did the organization have an interest in, or a eignature or other subnorty over, a financial account in a foreign country (such as a bank account, accountes account, or other financial accounts? 35. Was the organization approach to form 15 Poo 22.1, Report of Foreign Bank and Financial Accounts. 36. Was the organization approach to a party to a prohibited tax sheller transaction at any time during the xin year. 37. But Yes, 1 did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shell in the xin and the xin year. 38. If Yes, 1 did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shell and year.						Yes	No
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (apamining) winnings to prize winners? 2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the celendar year ending with or within the year covered by this return 1 If all east one is reported on line 24, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more dump the year? 3 A X 1 If Yes, * has if filed a Form 990-T for the year? If YNo, * provide an explanation in Schedule O 4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country, \$\frac{1}{2}\$ by \$\frac{1}{2}\$ in the first the name of the foreign country, \$\frac{1}{2}\$ by \$\frac{1}{2}\$ in the state of \$\frac{1}{2}\$ at the organization and \$\frac{1}{2}\$ at the state of \$\frac{1}{2}\$ and \$\frac{1}{2}\$ at the organization in the organization in the vasor is a party to a prohibited tax shelter transaction? 5 B Was the organization and party to a prohibited that was or is a party to a pricibleted tax shelter transaction? 5 B D day by taxible party norify the organization file Form 8886-7? 6 D can be organization and provide organization file Form 8886-7? 6 D can be organization and provide organization file form 8886-7? 7 Organizations that may receive deductible contributions under section 170(c). 8 D the organization seleves applyment in excess of \$1\frac{1}{2}\$ and party as a contribution or aparty to prohibited that and the organization seleves applyment in excess of \$1\frac{1}{2}\$ and party as a contribution or guality and party to prohibited to the property of the pro	1a	Enter t	the number reported in Box 3 of Form 1096. Enter -0- if not applicable				
(gambling) winnings to prize winners? 2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 5 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1s and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a If Yes, 1 and 1 filed a Form 990 Trof the year If "In", "provide an application in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country, [such as a bank account, accurates account, or other financial Accounts. 5b If "Yes," enter the name of the foreign country. ■ See instructions for filing requirements for Form 1D F90/221, Report of Foreign Bank and Financial Accounts. 5b Was the organization have organization that it was or is a party to a prinibited tax shelfer transaction? 5c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization elocit any contributions that were not tax deductibles of tax deductibles in a Sharibatic contributions? 6c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization elocit any contributions that may receive deductible contributions under section 170(c). 5c Under the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible in tax deductibles a charibate contributions? 6c Vi Yes, "Indicate the number of Forms 8282 filed during the year 7c Under the organization receive a payment in excess of \$75 made party as a contribution of a consolidation and party for goods and services provided? 6d If Yes, indicate the injuries of the year services provided?	b	Enter t	the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
22 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. 32 Mother organization have unrelated business gross income of \$1,000 or more during the year? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file tee instructions) 33 A X 34 If Yes, ¹ has it filed a Form 990-1 for this year? If 'No, ¹ provide an explanation in Schedule O 35 B If we so that it filed a Form 990-1 for this year? If 'No, ¹ provide an explanation in Schedule O 36 A tany time during the calendary ava, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account; or the financial account in the foreign country. 37 See Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 38 See instructions for filing requirements for Form TD F092-21, Report of Foreign Bank and Financial Accounts. 39 B If Yes, ¹ did the organization in that if was or is a party to a prohibited tax shelter transaction? 30 D dary taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 30 D dary taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 30 D dary taxable party notify the organization file Form 8889-17? 31 If Yes, ¹ fold the organization neural gross receptions that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible contributions in express statement that such contributions or grifts were not tax deductible? 32 Organization that may receive deductible contributions and party for goods and services provided to the payor? 33 If Yes, ¹ did the organization express of \$75 made party as a contribution of any services provided? 34 If Yes, ¹ did the organization expres	С	Did the	e organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			
filled for the calendary year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a. Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b. If Yes, *Inst if filed a Form 990-ff for this year? If *No.* provide an explanation in 5-checute 0 4a. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country, two has a bank account, secretian, or a signature or other authority over, a financial account in a foreign country such as a bank account, secretian, or a signature or other authority over, a financial account in a foreign country such as a bank account, secretian, or a signature or other authority over, a financial account or such as a bank account, secretian or other authority over, a financial account or other authority over, a financial account or such as a bank account, secretian, or other financial accounts. 5e was instructions for filing requirements for Form 1D F 90/22.1, Report of Foreign Bank and Financial Accounts. 5e was instructions for filing requirements for Form 1D F 90/22.1, Report of Foreign Bank and Financial Accounts. 5e was instructions for filing requirements for Form 1D F 90/22.1, Report of Foreign Bank and Financial Accounts. 5e was instructions for filing requirements for Form 1D F 90/22.1, Report of Foreign Bank and Financial Accounts. 5e was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions of contrib		(gamb	ling) winnings to prize winners?		1c		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions) 3 b Id the organization have unrelated business gross income of \$1,000 or more during the valant? 3 b If 1 Yes, 1 has it filed a Form 990-T for this year? If You, "provide an explanation in Schedule O 3 b If Yes, 1 has it filed a Form 990-T for this year? If You," provide an explanation in Schedule O 3 b If Yes, 2 has it filed a Form 990-T for this year? If You, "provide an explanation in Schedule O 4 b If Yes, 1 has it filed a Form 990-T for this year? If You," provide an explanation in Schedule O 5 b If Yes, 2 has the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b If Yes, 1 to line Sa or 55, dot the organization file Form 8886-T? 5 c	2a	Enter t	the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-rife (see instructions) 3		filed fo	or the calendar year ending with or within the year covered by this return	2a 0			
3	b	If at le	ast one is reported on line 2a, did the organization file all required federal employment tax retur	ns?	2b		ļ
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, earther shancing) 5 If "Yes," enter the name of the foreign country. In the second of the provided of the organization as party to a prohibited tax shelter transaction? 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Was the organization a party to a prohibited tax shelter transaction? 5 If "Yes," the line face 75, bit the organization file Form 8868-7? 6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charatable contributions? 6 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(e). 7 Organizations that may receive deductible contributions under section 170(e). 8 Uf the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8262? 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8262? 10 Life the organization received a contribution of dars, boats, arriplanes, or other vehicles, did the organization fle a Form 108-40. 11 Expression of the organization and the self that and self-groups of the property of the organizations. Did the supporting organizations make a distribution of acts, boats, arriplanes, or other vehicles, did the organizations file a Form 108-40. 12 Section 901(c)(17 organizations, Enter: 13 In Intation fees and capital contributions u		Note.	if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
44 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? See instructions for filing requirements for Form TD F 90:22.1, Report of Foreign Bank and Financial Accounts. So Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization that it was or as a party to a prohibited tax shelter transaction? 5 Did not stax did be an annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charable contributions? 5 Diff 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 Did the organization receive appyment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive appyment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 8 Did the organization receive appyment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 9 Did the organization received as contributions under section 170(c). 10 Did the organization received as contributions under section 170(c). 11 Did the organization received as contributions of the value of the goods or services provided? 12 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 13 Did the organization received a contribution of cars, boats, antipanes, or other vehicles, did the organization file a Form 1098-C? 14 X Sponsoring organ	3а	Did the	e organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
financial account in a foreign country, fauch as a bank account, securities account, or other financial account? b If "Yes," either 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. See instruction sor filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 55 Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 56 Did any taxable party notify the organization that it was or as a party to a prohibited tax shelter transaction? 57 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that tweer not tax deductible? 57 Organizations that may receive deductible contributions? 58 Was the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 59 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 59 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 50 If "Yes," did the organization notify the donor of the value of the goods or services provided? 50 If "Yes," indicate the number of Forms 8282 filed during the year pay greating the year pay premiums on a personal benefit contract? 50 If the organization received a contribution of qualified intellectual property, clid the organization file Form 8899 as required? 51 If the organization received a contribution of cars, boats, anglenae, or other vehicles, did the organization file Form 8899 in the payer pay premiums of a did the organization received a contribution of cars, boats, anglenae, or other vehicles, did the organization file Form 900 for advised fund malified by a sponsoring organization, have excess business holdings at any time during the yea	b	If "Yes	s," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
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. Sa instructions for filing requirements for Form TD F 90:22.1, Report of Foreign Bank and Financial Accounts. Sa X Sus the organization party to a prohibited tax sheller transaction? 55 Was the organization party to a prohibited tax sheller transaction? 56 Design the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 56 If "Yes," to line 5a or 55, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 57 Organizations that may receive deductible contributions under section 170(c). 58 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? 58 Did the organization receive and partly the donor of the value of the goods or services provided? 59 Did the organization receive and partly the donor of the value of the goods or services provided? 50 Did the organization receive and partly the donor of the value of the goods or services provided? 50 Did the organization receive and contributions under section 170(c). 50 Did the organization received and contribution of payment in the year of the organization received a contribution of qualified intellectual property, did the organization file Form 1999-07 organization received a contribution of cars, boats, arplanes, or other vehicles, did the organization file Form 1999-07 organization received a contribution of payment in grantation payment in the organization make any taxable distributions under section 4966? 59 Sponsoring organizations maintaining donor advised funds. 50 Did the organization make any taxable distributions under section 4966? 50 Did the organization make any taxable distribution	4a	At any	time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a			
See instructions for filing requirements for Form TD F 90/22.1, Report of Foreign Bank and Financial Accounts. 5 a X x the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 b Did any taxable party notify the organization that it was or a party to a prohibited tax shelter transaction? 5 b X x 5 b Did any taxable party notify the organization file Form 8886-T? 5 c If "Yes," to line 6 a or 5b, did the organization file Form 8886-T? 5 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 C Organizations that may receive deductible contributions under section 170(c). 8 D dithe organization stall may receive deductible contributions under section 170(c). 9 D dithe organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822? 10 D dithe organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822? 11 D dithe organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 12 D dithe organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 12 D dithe organization received a contribution of cars, boats, amplanes, or other vehicles, did the organization file a Form 1098-C? 13 Spansoring organizations maintaining donor advised funds as extens 599(a) supporting organizations. Did the supporting organizations with self-table funds as extens 599(a) supporting organizations. Did the supporting organizations included on Form 990, Part VIII, line 12 13 Cross receipts, included on Form 990, Part VIII, line 12 14 Cross income from members or shareholders		financi	ial account in a foreign country (such as a bank account, securities account, or other financial a	account)?	4a		X
56 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 58 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 59 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 50 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 50 Organizations that may receive deductible contributions under section 170(c). 51 If "Yes," did the organization notify the donor of the value of the goods or services provided to the payor? 52 If "Yes," did the organization notify the donor of the value of the goods or services provided? 53 If "Yes," indicate the number of Forms 8282 filed during the year 54 If "Yes," indicate the number of Forms 8282 filed during the year 55 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 56 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 56 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 57 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 57 If the organization make any taxable distributions under section 4966? 58 Sponsoring organizations maintaining donor advised funds. 59 Sponsoring organizations make any taxable distributions under section 4966? 50 Did the organization make any taxable distributions under section 4966? 51 Did the organization make any taxable distributions under section 4966? 52 Section 501(c)(7) organizations. Enter: 53 Carlos income from members or shareholders 54 Gross income from other sources (Do not net amou	b	If "Yes	s," enter the name of the foreign country.				
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		See in	structions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	Accounts.			
tif "Yes," to line 5a or 5b, did the organization file Form 8886-T7 6b Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 Organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided? 7 Tes," did the organization notify the donor of the value of the goods or services provided? 7 Tes," did the organization notify the donor of the value of the goods or services provided? 7 Tes," indicate the number of Forms 8282 filed during the year 8 To did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 9 If the organization neceive a contribution of qualified intellectual property, did the organization file Form 8899 as required? 1 If the organization received a contribution of cars, boats, anplanes, or other vehicles, did the organization file a Form 1098-C7 8 Sponsoring organizations maintaining donor advised funds and settlen 599(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. 9 Sponsoring organizations make any taxable distributions under section 4966? 9 Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 6 Gross income from members or shareholders 6 Gross income from ot	5a				5a		
Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	þ	Did an	y taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	5b		<u> X</u>
any contributions that were not tax deductible as charitable contributions? b f 'Yes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a bid the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7	С	If "Yes	s," to line 5a or 5b, did the organization file Form 8886-T?		5c		
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). In the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 59(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. Sponsoring organizations maintaining donor advised funds. Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Gross income from members or shareholders Gross receipts, included on Form 990, Part Vill, line 12 Gross receipts, included on Form 990, Part Vill, line 12, for public use of club facilities Gross income from members or shareholders Gross income from members or shareholders Gross income from members or shareholders Gross income from there sources (Do not net amounts due or pead to other sources against amounts due or received from them.) Section 501(c)(2) qualified nonprofit health insurance issuers. Is the organization icensed to issue qualified health plans in more than one s	6a	Does t	the organization have annual gross receipts that are normally greater than \$100,000, and did th	e organization solicit			
were not tax deductible? Toganizations that may receive deductible contributions under section 170(c). Did the organization selle, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? To X X X X X X X X X X		•			6a		X
7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a X b if "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or Indirectly, to pay premiums on a personal benefit contract? 7b E X 7c E X 7c I Did the organization receive any funds, directly or Indirectly, to pay premiums on a personal benefit contract? 7f E X 7g If the organization received any funds, directly or Indirectly, on a personal benefit contract? 7f E X 7f	b	If "Yes	s," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a X b if "Yes," did the organization notify the donor of the value of the goods or services provided? 7b X C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1099-C? Th X g if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1099-C? Th X Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, are donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make a distribution sunder section 4968? B Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross income from members or shareholders Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 601(c)(12) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b (if "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 601(c)(12) organizations included in formation the orga					6b		
b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7							
bid the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If *Yes,* indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To bid the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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 business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? By Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross income from members or shareholders Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a Section 4947(a)(2) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 in more than one state				vices provided to the payor?			
to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e					7b	X	
d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 8 If the organization received a contribution of cars, boats, arplanes, or other vehicles, did the organization file a Form 1098-C? 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 business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Gross income from members or shareholders B Gross income from members or shareholders B Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 501(c)(2) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13a 14a Did the organization receive any payments for indoor tanning services during the tax year?	С			as required	_		v
Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 50(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Did the organization make any taxable distributions under section 4966? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 13b Section 501(c)(2) qualified nonprofit health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13b Center the amount of reserves on hand				1	7c		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13a Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b			· · · · · · · · · · · · · · · · · · ·	·	_		v
g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 59(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 59(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 59(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds. 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11 Initial 11 Initial 12 12 Initial 12 Initial 12 Initial 13 Initial 14 Initial 15 Initial 15 Initial 15 Initial 16 Initial 17 Initial 17 Initial 18 In	_						
h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11a B Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year?							
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 business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? a Did the organization make a distribution to a donor, donor advisor, or related person? 9b X Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	_						
organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13 Initiation and the very and the serves on hand Information receive any payments for indoor tanning services during the tax year?					<u> </u>		
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 1 Is Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year?	8	•	***************************************	• • •			v
a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b X 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	^			any time during the year?			
b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 13c 14a X					00		Y
Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 14a X			•				
a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year list the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 13c 14a X			·		90		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 13c X 14a X			1 1 1 1	100			
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 14a X							
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041? 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 14a Did the organization receive any payments for indoor tanning services during the tax year?				100			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 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. 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 13b Interest the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b Interest the amount of reserves on hand 13c Interest the amount of reserves on hand 13d Ind the organization receive any payments for indoor tanning services during the tax year?				11a			
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? 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. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand 13b 13c 14a X							
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 12a 12b 13a 13a 13a 13b 13b 13c	•		· · · · · · · · · · · · · · · · · · ·	11b			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 12b 13b 13a 13a 13b 13c 13b	12a		·		12a]
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 13a 13b 13b 13c X			· · · · · · · · · · · · · · · · · · ·				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 c Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 13a 13b 13b 13c 13b 13c							
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 c Enter the amount of reserves on hand 13c 14a X					13a		i
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 c Enter the amount of reserves on hand 13c 14a X	_						
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 13b 13c 13c X	b		- · · · · · · · · · · · · · · · · · · ·				
c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	_		• • • • • • • • • • • • • • • • • • • •	13Ь			
14a Did the organization receive any payments for indoor tanning services during the tax year?	С		· · · · · · · · · · · · · · · · · · ·				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			•		14a		X
				0			

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.

						(TV)	
	Check if Schedule O contains a response to any question in this Part VI					X	
Sec	tion A. Governing Body and Management				Yes	No	
4.	Fator the number of voting members of the covering hady at the and of the tay year	1a	13		res	NO	
ıa	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing	10		1			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent	16	13				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship			1			
-	officer, director, trustee, or key employee?	P *****	uny other	2		Х	
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision				
•	of officers, directors, or trustees, or key employees to a management company or other person?		or outportion.	3		Х	
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 w	as filed?	4		X	
5	Did the organization become aware during the year of a significant diversion of the organization's as:			5		Х	
6	Did the organization have members or stockholders?			6		X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or				
	more members of the governing body?			7a		X_	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockh	olders, or				
	persons other than the governing body?			7b		X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	ie following.				
а	The governing body?			8a	_X_		
b	Each committee with authority to act on behalf of the governing body?			8b	X		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched	at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		<u>X</u>	
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal R	ev <u>enu</u>	e Code.)				
					Yes	No	
	Did the organization have local chapters, branches, or affiliates?			10a		<u>X</u>	
þ	If "Yes," did the organization have written policies and procedures governing the activities of such cl	haptei	s, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b 11a	Х		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?						
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a			# O	12a	X		
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b			
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es, o	escride	40-	Х		
12	In Schedule O how this was done			12c	X		
13	Did the organization have a written whistleblower policy?			14	X		
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approve	al by u	denendent	1-4	-21		
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		паерепает				
а	The organization's CEO, Executive Director, or top management official			15a		Х	
	Other officers or key employees of the organization			15b		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 arrange	ment v	vith a				
	taxable entity during the year?			16a		Х	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua	te its i	participation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga						
	exempt status with respect to such arrangements?			16b			
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ► NONE						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	Γ (Sect	ion 501(c)(3)s only)	availab	le		
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website Another's website X Upon request Other (explain	ın Sc	hedule O)				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	onflict	of interest policy, an	d finar	cial		
	statements available to the public during the tax year.						
20	State the name, physical address, and telephone number of the person who possesses the books a MUCKEL, ANDERSON CPAS - (775) 686-3200	nd rec	ords of the organiza	tion: ▶	·		
	300 EAST 2ND, SUITE 1320, RENO, NV 89501						
232000 12-10-				Form	990	(2012)	

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.

Nours for related organizations below lines Page Pag	(A) Name and Title	(B) Average hours per	(do	not c	Pos heck	C) Ition more rson	than	one h an	(D) Reportable	(E) Reportable compensation	(F) Estimated amount of
1.00 Name		(list any hours for related organizations below line)	frustee or director		_				the	organizations	compensation from the organization
1.00		1.00								0	•
VICE PRESIDENT		1 00	X	_	X		_	<u> </u>	0.	0.	0.
SECRETARY		1.00	v		v					^	0
SECRETARY X		1 00	^	-	Λ		-		· ·	<u> </u>	
TREASURER		1.00	v		$ \mathbf{v} $					n	0.
TREASURER		1 00	_		Λ			-			
1.00		1.00	x		x				0.	0 -	0.
DIRECTOR X		1.00	-	-	-		-	-			•
1.00			x						0.	0.	0.
DIRECTOR X		1.00	 			_					
1.00			X						0.	0.	0.
(8) PAT PINJUV 1.00 DIRECTOR X (9) DAN PRICE 1.00 DIRECTOR X (10) GREG SMITH 1.00 DIRECTOR X (11) STEVE TAPOGNA 1.00 DIRECTOR X (12) JOSHUA VITTORI 1.00 DIRECTOR X (13) DAN WARREN 1.00		1.00	Y						0.	0	0.
(9) DAN PRICE DIRECTOR (10) GREG SMITH 1.00 DIRECTOR (11) STEVE TAPOGNA DIRECTOR (12) JOSHUA VITTORI DIRECTOR (13) DAN WARREN 1.00 1.00 1.00 0.00 0.00 0.00 0.00	(8) PAT PINJUV	1.00				-					
DIRECTOR X		1 00	X			_			0.	0.	0.
1.00 X 0. 0 0 0 0 0 0 0 0 0		1.00	J						0	^	0
DIRECTOR X 0. 0. 0 0		1 00	_		-	_			0.	<u> </u>	<u> </u>
1.00		1.00	x						0.	0.	0.
DIRECTOR X 0. 0. 0 0		1.00	 			_					
(12) JOSHUA VITTORI 1.00 DIRECTOR X (13) DAN WARREN 1.00		1.50	Х				1		0.	0.	0.
DIRECTOR X 0. 0. 0 (13) DAN WARREN 1.00		1.00					1				
(13) DAN WARREN 1.00			Х						0.	0.	0.
DIRECTOR X 0. 0. 0	(13) DAN WARREN	1.00				-					
	DIRECTOR		X			L_			0.	0.	0.
											<u></u>
							-				<u> </u>
 			-		_		_	_			
		<u> </u>	ł								

Par	(V	111	Check if Schedule O cont		to any question ii	n this Part VIII			
		•	Check if Schedule O Cont	allis a response	to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts		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 abo Noncash contributions included in lines Total. Add lines 1a-1f	ts, and ve 1f	26,665. 226,146. 76,137.	467,689.			
<u> </u>		<u>'' </u>	Total: Add lines 1a-11		Business Code				7
Program Service Revenue		a b c d							
<u>r</u>		f	All other program service reve	enue					
		g	Total. Add lines 2a-2f		>				
	3		Investment income (including other similar amounts) Income from investment of ta		▶	609.			609.
	5		Royalties	(ı) Real	(II) Personal				
		b	Gross rents Less: rental expenses Rental income or (loss)	(i) rreal					
			Net rental income or (loss) Gross amount from sales of assets other than inventory	(i) Securities	(II) Other				
		c d	Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)		>				
Other Revenue	8		Gross income from fundraisin including \$ 226, 1 contributions reported on line Part IV, line 18 Less: direct expenses	1c). See	526,820. 486,857.				20.062
0			Net income or (loss) from fund Gross income from gaming at Part IV, line 19		•	39,963.			39,963.
		С	Less: direct expenses Net income or (loss) from gan Gross sales of inventory, less		•				
		b	and allowances Less: cost of goods sold Net income or (loss) from sale	a t	3,961. 0.	3,961.			3,961
			Miscellaneous Reveni		Business Code				
	11								
		b							
		ç	All other revenue		-				
		d	Total. Add lines 11a-11d		•				
	12		Total revenue. See instructions		•	512,222.	0.	0	. 44,533.
23200 12-10		_	. S.a. 10 venge. God manachdidis						Form 990 (2012)

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp			mplete column (A).	
	Check if Schedule O contains a respon	se to any question in thi		(0)	(2)
	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 United States See Part IV, line 21	349,470.	349,470.		
2	Grants and other assistance to individuals in				
_	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			-	
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified		·		
Ů	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
c	Accounting	4,092.		4,092.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion	18,300.		18,300.	
13	Office expenses	1,853.		1,853.	
14	Information technology				·
15	Royalties	5 040		5 040	
16	Occupancy	5,940.		5,940.	
17	Travel	3,032.		3,032.	
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	3,512.		3,512.	
19 20	Conferences, conventions, and meetings	3,312.		3,312.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,365.		2,365.	
23	Insurance	6,508.		6,508.	·
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)			·	
а	PRINTING AND PUBLICATIO	43,861.		43,861.	
b	FIRE RECOVERY	19,400.	19,400.		
c	BANQUET HATS AND MERCHA	17,135.		269.	16,866.
d	MISCELLANEOUS	11,357.		11,357.	
e	All other expenses	43,489.	6,809.	36,680.	
25	Total functional expenses. Add lines 1 through 24e	530,314.	375,679.	137,769.	16,866.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	İ		Ì	
	Check here ▶ if following SOP 98-2 (ASC 958-720)				
232010	0 12-10-12			- 	Form 990 (2012)

Part X	Balance Sheet			
	Check if Schedule O contains a response to any question in this Part X		Ι	
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	93,810.	1	145,975
2	Savings and temporary cash investments	322,048.	2	302,566
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	6,354.	4	8,229
5	Loans and other receivables from current and former officers, directors,		.,	
	trustees, key employees, and highest compensated employees. Complet	e		
	Part II of Schedule L.		5	
6	Loans and other receivables from other disqualified persons (as defined u	nder		
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contri	outing		
	employers and sponsoring organizations of section 501(c)(9) voluntary			
.	employees' beneficiary organizations (see instr). Complete Part II of Sch I	.	6	
S1988 7 8	Notes and loans receivable, net		7	
8 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a				
1	basis. Complete Part VI of Schedule D 10a 932,	505.		
Ь	Less: accumulated depreciation 10b 56,0	878,795.	10c	876,430
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	3,952.	15	3,952
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,304,959.	16	1,337,152
17	Accounts payable and accrued expenses		17	285
18	Grants payable		18	
19	Deferred revenue		19	50,000
20	Tax-exempt bond liabilities		20	
ខ្ជ 21	Escrow or custodial account liability. Complete Part IV of Schedule D		21_	
22	Loans and other payables to current and former officers, directors, truste	es,	,,,	Tarana II I I I I I I I I I I I I I I I I I
21 22	key employees, highest compensated employees, and disqualified person	ns.		
,	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	<u> </u>
25	Other liabilities (including federal income tax, payables to related third			
- }	parties, and other liabilities not included on lines 17-24). Complete Part X	of		
	Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0.	26	50,285
	Organizations that follow SFAS 117 (ASC 958), check here ▶	and		
ខ្ញុំ	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
<u> </u>	Organizations that do not follow SFAS 117 (ASC 958), check here ▶	<u>X</u>		
<u> </u>	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds	0.	30	0
31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0
27 28 29 30 31 32	Retained earnings, endowment, accumulated income, or other funds	1,304,959.	32	1,286,867
33	Total net assets or fund balances	1,304,959.	33	1,286,867
34	Total liabilities and net assets/fund balances	1,304,959.	34	1,337,152

Form	990 (2012) NEVADA BIGHORNS UNLIMITED, RENO CHAPTER	88-01	80276	Pag	ge 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,2	
2	Total expenses (must equal Part IX, column (A), line 25)	2		0,3	
3	Revenue less expenses. Subtract line 2 from line 1	3			92.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,30	<u>4,9</u>	<u>59.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6	-		
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,28	6,8	<u>67.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		·		Щ.
				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	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	te basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	-	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ııred audıt			
	or guidte, explain why in Schedule O and describe any steps taken to undergo such audits		3ь		

SCHEDULE A (Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

OMB No 1545-0047

4947(a)(1) nonexempt charitable trust. Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Employer identification number

		NEVADA	BIGHORNS UNL	IMITE:	D, RE	NO CH	<u>APTER</u>		8	8 - 0.180	<u> 276</u>	
Part I	Reason f	or Public Char	ity Status (All organiz	ations mus	st complet	e this part	.) See inst	ructions.				
The organ	nization is not a	private foundation	because it is: (For lines 1	through 1	1, check o	only one b	ox.)					
1 🗀			s, or association of churc									
2 🗀	A school desc	cribed in section 17	70(b)(1)(A)(ii). (Attach Sc	hedule E.)								
з 🗀	A hospital or a	a cooperative hosp	ital service organization o	described i	n section	170(b)(1)(A)(iii).					
4 🔲	A medical res	earch organization	operated in conjunction	with a hos	oital descr	ıbed ın se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital	's nam	ıe,
	city, and state											
5 🔲	An organization	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governr	mental uni	t describ	ed in		
	section 170(b)(1)(A)(iv). (Compl	ete Part II.)									
6 🗔	A federal, stat	te, or local governm	ent or governmental unit	described	in sectio	n 170(b)(1)(A)(v).					
7 🔲	An organization	on that normally red	eives a substantial part	of its supp	ort from a	governme	ntal unit o	r from the	general	public desc	rıbed I	n
	section 170(l	o)(1)(A)(vi). (Comple	ete Part II.)									
8 🗀	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 🗌	An organization	on that normally red	ceives: (1) more than 33 1	1/3% of its	support fr	rom contri	butions, m	nembershi	p fees, a	nd gross re	ceipts	from
	activities relat	ed to its exempt fu	nctions - subject to certa	ın exceptio	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross	ınvest	ment
	income and u	nrelated business t	axable income (less sect	ion 511 ta	x) from bu	sinesses a	cquired b	y the orga	ınızatıon	after June 3	0, 197	75 .
	See section (509(a)(2). (Complet	e Part III.)									
10 🔲	An organization	on organized and o	perated exclusively to te	st for publi	c safety. S	See sectio	n 509(a)(4	I).				
11 X	An organization	on organized and o	perated exclusively for th	e benefit d	of, to perfo	rm the fur	nctions of,	or to carr	y out the	purposes o	f one	or
	more publicly	supported organiz	ations described in section	on 509(a)(1) or section	on 509(a)(2). See se c	tion 509(a)(3). Ch	eck the box	that	
	describes the	type of supporting	organization and comple	ete lines 1°	le through	11h.						
	a 🔲 Type I			/pe III · Fur						n-functional		
е 🗔			at the organization is not									
	foundation m	anagers and other	than one or more publicly	supporte	d organiza	itions desc	cribed in s	ection 509	9(a)(1) or	section 509	(a)(2).	
f	If the organiza	ation received a wri	tten determination from t	he IRS tha	it it is a Ty	pe I, Type	II, or Type	e				
		ganization, check t										نـــا
9			organization accepted ar									
	(i) A persor	who directly or inc	directly controls, either al	one or tog	ether with	persons c	lescribed i	ın (iı) and (III) below	,	Yes	No
	the gove	rning body of the s	supported organization?							11g(i)		X
	(ii) A famıly	member of a perso	n described in (i) above?							11g(ii)		X
	(iii) A 35% c	ontrolled entity of a	a person described in (i) o	or (II) above	?					11g(iii)		X
h	Provide the fo	ollowing information	about the supported or	ganization((s).							
(i) Name	e of supported	(ii) EIN	(iii) Type of organization	(Iv) Is the o	rganization			(i) organization in col		(vii) Amount	(vii) Amount of moneta	
	anization	, ,	(described on lines 1-9 above or IRC section	in col (i) lis governing (sup	port	
			(see instructions))	Yes	No	Yes	No	Yes	No			
NEVAL	PΑ											
DEPAR	RTMENT O	88-6000022	2 8		X					16	8,5	66.

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

88-600435111A

NON-PROFIT O###### ##11A

OF NEVADA FO99-18196145

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

VARIOUS

SPARKS

ROTARY

UNIVERSITY

X

X

X

164,853.

10,000.

7,000.

350,419.

Page 2 Schedule A (Form 990 or 990-EZ) 2012 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (e) 2012 (f) Total **(b)** 2009 (c) 2010 (d) 2011 Calendar year (or fiscal year beginning In) (a) 2008 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support (f) Total (c) 2010 (d) 2011 (e) 2012 Calendar year (or fiscal year beginning in) (a) 2008 **(b)** 2009 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 12 Gross receipts from related activities, etc. (see instructions)

3	First five years. If the Form 990 is for the organization's first, second, third, fourth, or tifth tax year as a section 501(c)(3)	
	organization, check this box and stop here	
	ction C. Computation of Public Support Percentage	

,,,	otion of comparation of rubito cupports of contage			
14	Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14		9
	Public support percentage from 2011 Schedule A, Part II, line 14	15		9
6a	33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or r	nore,	check this box and	

stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

l7a	10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,	
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization	
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	
h	10% facts and size unstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or	

Ł	b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or	
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the	
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<u> </u>

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990 EZ) 2012 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I 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.)

Se	ction A. Public Support								
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	Include any "unusual grants.")								
2	Gross receipts from admissions,								
	merchandise sold or services per-			ſ					
	formed, or facilities furnished in any activity that is related to the								
	organization's tax-exempt purpose			<u> </u>					
3	Gross receipts from activities that								
	are not an unrelated trade or bus-		}						
	Iness under section 513								
4	Tax revenues levied for the organ-								
	Ization's benefit and either paid to								
	or expended on its behalf								
5	The value of services or facilities		,						
	furnished by a governmental unit to								
	the organization without charge								
6	Total. Add lines 1 through 5					ļ. <u></u>			
7 <i>a</i>	Amounts included on lines 1, 2, and		1						
	3 received from disqualified persons			ļ <u> </u>		ļ	 		
t	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					<u> </u>	 		
•	Add lines 7a and 7b			<u></u>					
	Public support (Subtract line 7c from line 6)		<u> </u>	<u> </u>	1				
	ction B. Total Support			T .	1	T			
	indar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
	Amounts from line 6		-			 			
10a	Gross income from interest, dividends, payments received on								
	securities loans, rents, royalties			1					
_	and income from similar sources			<u> </u>		ļ	 		
t	Unrelated business taxable income		1				1		
	(less section 511 taxes) from businesses								
	acquired after June 30, 1975		 		·	 			
11	Add lines 10a and 10b Net income from unrelated business			<u> </u>	 				
• •	activities not included in line 10b.						1		
	whether or not the business is								
12	regularly carried on Other income. Do not include gain		 			 	 		
12	or loss from the sale of capital		1	[
40	assets (Explain in Part IV.)		-		_	-	 		
	Total support. (Add lines 9, 10c, 11, and 12)		- free			on E01(a)(2)	Ization		
14	First five years. If the Form 990 is for	the organization'	s iirst, second, thii	ra, τουιτη, ο r τ ιπη t	ax year as a secti	on out (c)(3) organ	ization,		
80	_check this box and stop here	io Support Do	roontogo						
	Ction C. Computation of Publ			nolumn (fl)		15	20		
	Public support percentage for 2012 (column (I))		16	% %		
	Public support percentage from 2011			 -					
	ction D. Computation of Investing Investment income percentage for 20					17	%		
				ne 13, column (i))		18	%		
18 10=	, ,			on line 14 and ha	a 15 ia mara tha-				
186	33 1/3% support tests - 2012. If the						17 13 110t ▶		
	more than 33 1/3%, check this box a						and		
t	33 1/3% support tests - 2011. If the						. —		
20	line 18 is not more than 33 1/3%, che								
20	0.1 1 1 4 7 000 000 57 0000								
2320	23 12-04-12				36				

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Department of the Treasury Internal Revenue Service

➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• Section	501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Name of org				1 .	loyer identification number
		BIGHORNS UNLIMIT			88-0180276
Part I-A	Complete if the org	janization is exempt und	der section 501(c)	or is a section 527 o	rganization.
	l expenditures	zation's direct and indirect politi	cal campaign activities	_	
Part I-B	Complete if the ord	panization is exempt und	der section 501(c)	(3).	
		incurred by the organization un		▶ \$	}
	-	incurred by organization manag		5 ▶ \$	
3 If the or	ganization incurred a section	n 4955 tax, did it file Form 4720) for this year?		Yes No
4a Was a	correction made?				Yes No
	describe in Part IV.				
Part I-C	Complete if the org	janization is exempt und	der section 501(c)		
	·	d by the filing organization for se	=		·
		ization's funds contributed to o	ther organizations for s	_	
	function activities	A 115 4 10 5 11 1	1	▶\$	
	· ·	s. Add lines 1 and 2. Enter here a	and on Form 1120-POL	-, ▶\$	•
line 17b	filing organization file Form	1120-POL for this year?		- •	Yes No
5 Enter the made properties	ne names, addresses and er payments. For each organiza utions received that were pr	nployer identification number (E ition listed, enter the amount pa omptly and directly delivered to additional space is needed, pro	id from the filing organi a separate political org	ization's funds. Also enter th ganization, such as a separa	ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2012

232041 01-07-13

expenses, and share o	ization is exe n 501(h)). belongs to an aff f excess lobbying	mpt under section	n 501(c)(3) and file Part IV each affiliated	ed Form 5768 group member's nam	ie, address, EIN,
	n Lobbying Expe res" means amo	enditures unts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influen b Total lobbying expenditures to influen c Total lobbying expenditures (add lines d Other exempt purpose expenditures e Total exempt purpose expenditures (a f Lobbying nontaxable amount. Enter the lifthe amount on line 1e, column (a) or (b)	3,500. 3,500. 526,814. 530,314. 104,547.				
Not over \$500,000 Over \$500,000 but not over \$1,000,00 Over \$1,000,000 but not over \$1,500, Over \$1,500,000 but not over \$17,000 Over \$17,000,000	ess over \$500,000. ess over \$1,000,000. ss over \$1,500,000.				
g Grassroots nontaxable amount (enter h Subtract line 1g from line 1a. If zero or i Subtract line 1f from line 1c. If zero or j If there is an amount other than zero or reporting section 4911 tax for this year	less, enter -0- less, enter -0- on either line 1h oi	r line 11, did the organiza	ation file Form 4720	26,137. 0. 0.	Yes No
(Some organization	4-Year Av	reraging Period Under section 501(h) election he instructions for line	do not have to comp		
	Lobbying Expe	enditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e))		107,494.	127,879.	104,547.	339,920. 509,880.
c Total lobbying expenditures		9,000.	382.	3,500.	12,882.
d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d, column (e))		26,874.	31,970.	26,137.	84,981. 127,472.

Schedule C (Form 990 or 990-EZ) 2012

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2012 NEVADA BIGHORNS UNLIMITED, RENO CHAPTER 88-0180276 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	(b)		
	e lobbying activity.	Yes	No	Amo	ount	
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes?					
Я	Programme and the state of the					
_	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Other activities?					
j	Total. Add lines 1c through 1i					
_	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ction		
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		_1_			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_2	_		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3			
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	I "No," O	R (b) Par	: III-A, lir	ne 3, is	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ical				
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex- does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and					
	expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
	t IV Supplemental Information					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; F	art II-A (affili	ated group	list); Part II	A, line 2:	
and	Part II-B, line 1. Also, complete this part for any additional information. RT I-A, LINE 1:					
TH:	E ORGANIZATION MADE THE ELECTION BY AN ELIGIBLE SEC	CTION !	501(C)	3 то		
MA	KE EXPENDITURES TO INFLUENCE LEGISLATION. IN THE CU	JRRENT	YEAR	THE		
OR	GANIZATION DID NOT TAKE PART IN ANY DIRECT AND/OR	INDREC	r POLI	TICAL		
<u>CAI</u>	MPAIGN ACTIVITES.					

· SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

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

2012 Open to Public Inspection

Name of the organization

NEVADA BIGHORNS UNLIMITED, RENO CHAPTER

Employer identification number 88-0180276

		LIMITED, KENO CHAPTER	88-0100270
Pa			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
	Į	(a) Donor advised funds	(b) Funds 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 v	writing that the assets held in donor advised	I funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		sed only
•	for charitable purposes and not for the benefit of the donor o	-	
	impermissible private benefit?	admorading of for any extremplanes of	Yes No
Pa		ranization answered "Ves" to Form 990 Par	
1			(17, 1110 7.
•	Purpose(s) of conservation easements held by the organization		weelly important land area
	Preservation of land for public use (e.g., recreation or e	_ 	rically important land area
	Protection of natural habitat	Preservation of a certifie	ed historic structure
•	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	led 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
a	Total number of conservation easements		2a
þ	Total acreage restricted by conservation easements		2b
¢	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
q	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structure	•
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the o	rganization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements duri	ng the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above		
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense st	
_	include, if applicable, the text of the footnote to the organization		
	conservation easements.	ion o manda otatomomo mat occombos m	organization o accounting to
Pa	rt III Organizations Maintaining Collections of	Art Historical Treasures, or Oth	er Similar Assets
المستسا	Complete if the organization answered "Yes" to Form		
15	If the organization elected, as permitted under SFAS 116 (AS		nt and balance cheet works of art
14		,,	·
	historical treasures, or other similar assets held for public exh		e of public service, provide, in Fart XIII,
ı.	the text of the footnote to its financial statements that described a second statement of the control of the co		
0	If the organization elected, as permitted under SFAS 116 (AS	••	
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of public	c 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		
2	if the organization received or held works of art, historical treat	asures, or other similar assets for financial g	aın, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
a	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12:10-12

Schedule D (Form 990) 2012

Sche	dule D (Form 990) 2012 NEVADA	BIGHORNS U	NLIMITED,	RENO CI	HAPTE	R 8	38-01	80276	Pa	ge 2
	t III Organizations Maintaining C					*****				90 -
3	Using the organization's acquisition, access									
	(check all that apply):	,	,							
а	Public exhibition	d	Loan or e	xchange progra	ams					
Ь	Scholarly research	e		nonango progra						
c	Preservation for future generations	J								
4	Provide a description of the organization's co	ollections and explain	n how they furthe	r the organization	on's exem	nt nurno	se in Par	t XIII		
5	During the year, did the organization solicit of						00 1111 0,1			
•	to be sold to raise funds rather than to be m				or ourman c	200010	Γ-	Yes		No
Par	t IV Escrow and Custodial Arran				'Yes" to F	orm 990	Part IV			<u></u>
<u> </u>	reported an amount on Form 990, Pa	-	oto ii tiio organiza		100 101	OIIII 000,				
1a	Is the organization an agent, trustee, custod		liary for contribut	ons or other as	sets not in	ncluded				
	on Form 990, Part X?	ian or other intermed	nary for continuous	one or other as	3013 1101 11	10,000	Γ	Yes		No
h	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:					_ 103		
•	ii res, explain the arrangement in rait Am	and complete the lo	ilowing table.					Amount		
_	Beginning balance					1c		Aniount		
٦	Additions during the year					1d				
_	Distributions during the year					1e				
•	Ending balance					1f				
22	Did the organization include an amount on F	orm 000 Part Y lina	212			<u> </u>		Yes	$\overline{}$	No
	If "Yes," explain the arrangement in Part XIII.	•		en provided in f	Part XIII		<u> </u>	_ 163	Ħ	140
Par	V									
1.5575	E P LINGOWITIONE I GINGS COMPLETE	(a) Current year	(b) Prior year	(c) Two year		t) Three ye	are hack	(e) Four	are h	ack
1a	Beginning of year balance	(a) Current year	(b) Filor year	(C) Two year	3 Dack LC	aj Tilleo ye	ais back	(e) i oui	years L	ack
ь	Contributions			 					-	
•	Net investment earnings, gains, and losses		· · · · · · · · · · · · · · · · · · ·					_		
ď	Grants or scholarships									
	·									
е	Other expenditures for facilities				ł					
f	and programs						-			
-	Administrative expenses									
9 2	End of year balance		- /l 1lum	(a)) hold not						
٤,	Provide the estimated percentage of the cur	rent year end balanc		(a)) nelu as.						
b	Board designated or quasi-endowment ► Permanent endowment ►	%	_%							
-	Temporarily restricted endowment	% %								
C	The percentages in lines 2a, 2b, and 2c shot									
32	Are there endowment funds not in the posse	•	ation that are held	l and administa	red for the	organiz	ation			
ou	by	ssion of the organiza	ation that are nec	and administe	rea for the	o Organiza	ation	[,	Yes	No
	(i) unrelated organizations							3a(i)		110
	(ii) related organizations							3a(ii)	$\neg +$	
h	If "Yes" to 3a(II), are the related organizations	s listed as required a	n Sahadula P2					3b	+	
4	Describe in Part XIII the intended uses of the							00		
Par	t VI Land, Buildings, and Equipm									
L	Description of property	(a) Cost or o		st or other	(c) Acc	umulated	-	(d) Book	value	
	Description of property	basis (investr		is (other)		eciation	1	(u) book	value	
12	Land	2230 (11103(1		65,949.	000,			865	,94	9 .
	Buildings			,					, , ,	-
	Leasehold Improvements			16,013.		11,82	0.	Δ	,19	3 -
	Equipment			50,543.		44,25			,28	
	Other			50,515.		1 2 3			, 2, 0	0.
	Add lines 1a through 1e (Column (d) must e	ougl Form 000 Port	Y column (P) line	10(c))				876	. 43	

<u>Schedule D</u>	(Form 990) 2012	NEVADA BIGH	ORNS	UNLIM	ITED	, RENO	CHAPTER	88-	<u>-0180276</u>	Page 3
Part VII	Investments -	Other Securities. Sec	e Form 9	90, Part X, II	ne 12.					
(a) Descript	tion of security or categ	Ory (including name of security)	(b)	Book value		(c) Method	d of valuation. C	ost or end	of-year market	value
) Financia	l derivatives									
) Closely-l	held equity interests									
) Other										
(A)			_							
(B)										
(C)										
(D)					-					
(E) .	· · · · · · · · · · · · · · · · · · ·									
(F) (G)		- 			- -					
(H)										
(I)										
) must equal Form 990	, Part X, col (B) line 12)				***				
		Program Related. Se	e Form	990, Part X,	line 13.					
	(a) Description of inv	vestment type	(b)	Book value		(c) Metho	d of valuation: C	ost or end	of-year market	value
(1)										
(2)	<u> </u>									
(3)										
(4)							<u></u>			
(5)										
(6)										-
(7)								·		
(8)										
(9) (10)										-
) must equal Form 990), Part X, col (B) line 13) ▶				·····		••••••		
		See Form 990, Part X, line	15.							
			Descript	ion					(b) Book va	alue
(1)										
(2)										
(3)		- 							·	
(4)						-				
(5)				· · ·						
(6)										
(7)										
(8) (9)										
(10)					<u> </u>					
	mn (b) must equal Fo	orm 990, Part X, col (B) lin	e 15.)	-				▶		
Part X		s. See Form 990, Part X,								
<u>.</u>	(a) De	escription of liability			(b)	Book value				
(1) Fed	eral income taxes									
(2)										
(3)										
(4)										
(5)						-				
(6)										
(7)										
(8)							_			
(9)			<u> – </u>							
(10)										
(10)										
(11)	ma (h) must equal Ea	orm 990 Part Y col /R) lin	A 25 1							
(11) Fotal. <i>(Colu</i>		orm 990, Part X, col. (B) lin		footnote to	he orga	nization's fin	ancial statement	ts that rep	orts the organiz	ation's
(11) fotal. <i>(Colu</i> 2. FIN 48 ((ASC 740) Footnote.	orm 990, Part X, col. (B) lin In Part XIII, provide the te itions under FIN 48 (ASC	xt of the	footnote to						ation's

Sche	dule D (Form 990) 2012 NEVADA BIGHORNS UNLIMITE	ED, RENO CHAPTER	88-0180276 p	age 4
	XI Reconciliation of Revenue per Audited Financial Stat	ements With Revenue per		
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		
þ	Other (Describe in Part XIII.)	2d		
e	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 XIII.)	4b	_	
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	t XII Reconciliation of Expenses per Audited Financial Sta	tements With Expenses p	er 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:	1 1		
а	Donated services and use of facilities	2a	_	
b	Prior year adjustments	2b	_	
С	Other losses	2c	⊣	
d	Other (Describe in Part XIII.)			
_	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:	1.1		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII.)		┥.┃	
_	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	2	5	
	t XIII Supplemental Information Delete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I		41 101 0 111 4	
	e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this p			
.				
		<u></u>	Schedule D (Form 990	2012

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Open To Public Inspection

Internal Revenue Service $\overline{\mathsf{N}}$

Department of the Treasury

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.

Name of the organization						Employer ide	ntification number
NEVADA	BIGHORNS UNLIMITE	D, R	ENO	CHAPTER		88-0180	276
Fundraising Activities required to complete this par	. Complete if the organization answ	ered "Y	'es" to	Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
Indicate whether the organization rais a	e Solicità f Solicità g Specia or oral agreement with any individua cart VII) or entity in connection with iividuals or entitles (fundraisers) puri	ation of ation of al fundra al (inclui profess	non-g gover alsing ding o ional f	overnment grants rnment grants events fficers, directors, true fundraising services	stees	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	or cor	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ded in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		_		
					l		
		-					
					,		
		<u> </u>					
		<u> </u>					
							
Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	outions	s or has been notified	d It Is	exempt from re	egistration
						····	
LHA Paperwork Reduction Act Notice.	see the Instructions for Form 990	or 990	-EZ.			chedule G (Forn	n 990 or 990-EZ) 2012

232081 01-07-13

			(a) Event #1	-EZ, lines 1 and 6b. List e	(c) Other events	(d) Total events
		•		AUCTION		(add col. (a) through
			DINNER SALES		4	col. (c))
2			(event type)	(event type)	(total number)	
20.01	1	Gross receipts	224,995.	133,350.	394,621.	752,966
	2	Less: Contributions	125,997.	100,148.		226,145
	3	Gross income (line 1 minus line 2)	98,998.	33,202.	394,621.	526,821
	4	Cash prizes				
,	5	Noncash prizes				
2	6	Rent/facility costs				· · · · · · · · · · · · · · · · · · ·
מפווסלאם וספווס	7	Food and beverages				
'	8	Entertainment				
	9	Other direct expenses	191,578.	33,202.	262,078.	486,858
1	10	Direct expense summary. Add lines 4 thro	ugh 9 in column (d)		>	(486,858
	11	Net income summary Combine line 3, col	umn (d), and line 10		_	39,963
а	rt l		on answered "Yes" to Form	990, Part IV, line 19, or re	eported more than	
7	_	\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total gaming (add
			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c
:	1	Gross revenue				
	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses			_	
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No	No No	
	7	(
	8	Net gaming income summary. Combine lin	ne 1. column d. and line 7		>	
	Ent	er the state(s) in which the organization op	erates gaming activities:	<u> </u>	 	
		he organization licensed to operate gaming		states?		Yes N
b	If "I	No," explain:		<u> </u>		
	_					
		re any of the organization's gaming license Yes,* explain:	· ·		ear?	Yes N

Schedule G (Form 990 or 990-EZ) 2012 NEVADA BIGHORNS UNLIMITED, RENO CHAPTER 88	3-0180276 Page 3
11 Does the organization operate gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity operated in:	
a The organization's facility	13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
Name ▶	
Address ▶	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount	
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party:	
Name ▶	
Address ▶	
16 Gaming manager information:	
Name ▶	
Gaming manager compensation \$	
Description of services provided	
Bescription of Services provided P	
Director/officer Employee Independent contractor	
17 Mandatani distributions:	
Mandatory distributions:a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t	
organization's own exempt activities during the tax year ▶ \$	
Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, column	
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional inform	nation (see instructions).
	<u> </u>
	
232083 01-07-13 Schedule G (Form 990 or 990-EZ) 2012

Employer identification number 88-0180276 OMB No 1545-0047 Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. RENO CHAPTER NEVADA BIGHORNS UNLIMITED, Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990)

Operf to Public 2012 Inspection

% × _____¥es 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Part 1 General Information on Grants and Assistance criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for month	oring the use of grant i	funds in the United	States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	d Organizations in the	United States. Co	omplete if the orga	nization answered "Y	es" to Form 990, Part I	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	\$5,000. Part II can	be duplicated if additive	onal space is need	þə			
1 (a) Name and address of organization or government	(9)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEVADA DEPARTMENT OF WILDLIFE	88-600022		168,566.	0.			WILDLIFE PRESERVATION
UNIVERSITY OF NEVADA, RENO	99-1819614		10,000.	0.			WILDLIFE PRESERVATION
SPARKS ROTARY	88-6000022		.000,7	0.			WILDLIFE PRESERVATION
 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table 	and government or s listed in the line	ganizations listed in that table	e line 1 table	,		:	A A

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

232101 12-18-12

Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012) (f) Description of non-cash assistance Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (book, FMV, appraisal, other) Schedule I (Form 990) (2012) NEVADA BIGHORNS UNLIMITED, RENO CHAPTER

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed (d) Amount of non-cash assistance 27 (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance 232102 12-18-12

Page 2

88-0180276

NEVADA BIGHORNS UNLIMITED, RENO CHAPTER

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.

OMB No 1545-0047 Open to Public

Department of the Treasury ► Attach to Form 990 or 990-EZ. Inspection Internal Revenue Service Name of the organization **Employer identification number** RENO CHAPTER 88-0180276 NEVADA BIGHORNS UNLIMITED, FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: USED FOR THE PROTECTION AND PRESERVATION OF NEVADA WILDLIFE. FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED AND APPROVED BY THE FINANCE COMMITTEE PRIOR TO FILING. SECTION B, LINE 12C: CONFLICT OF INTEREST POLICY IS FORM 990, PART VI, REVIEWED AT BOARD MEETINGS AND BOARD MEMBERS ARE GIVEN COPY OF CONFLICT OF INTEREST POLICY. FORM 990, PART VI, SECTION C, LINE 18: UPON REQUEST 775-323-1177 FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Form **8868**

(Rev. January 2013)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

	venue Service	► File a sepa	rate app	lication for each return.					
• If you	are filing for an Aut	omatic 3-Month Extension, comple	te only Pa	art I and check this box			• X		
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).									
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.									
Electronic filing (e-file) You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation									
required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension									
	· ·	ns listed in Part I or Part II with the exc							
	· ·	which must be sent to the IRS in pap	•						
	·	ick on e-file for Charities & Nonprofits		,			•		
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).									
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete									
Part I only									
All other	corporations (includ	ding 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	st an exten	sion of time			
to file inc	come tax returns.								
Type or Name of exempt organization or other filer, see instructions.							ber (EIN) or		
print									
Cile bu the	NEVADA B	IGHORNS UNLIMITED,	RENO	CHAPTER		88-01802	76		
File by the due date for					curity number (SSI	۷)			
filing your return See	e C/O HOURE INVESTIGATION CITED SOO BIRD! ZIND, BOILE 13								
instructions		st office, state, and ZIP code. For a fo	reign add	fress, see instructions.					
RENO, NV 89501									
Enter the Beturn code for the return that this application is far /file a constate application for each return)									
Enter the Return code for the return that this application is for (file a separate application for each return)									
Application Return Application Return									
	ion		Return	Application			Return		
Is For			Code	Is For			Code		
	0 or Form 990-EZ		01	Form 990-T (corporation)			07		
Form 990-BL 02 Form 1041-A Form 4720 (individual) 03 Form 4720						08			
Form 4720 (individual) 03 Form 4720 09 Form 990-PF 04 Form 5227 10									
Form 990-PF 04 Form 5227 10									
Form 990-T (sec. 401(a) or 408(a) trust) 55 Form 6069 11 Form 990-T (trust other than above)									
Form 990-T (trust other than above) 06 Form 8870 12 MUCKEL, ANDERSON CPAS									
• The h	ooks are in the care	of ▶ 300 EAST 2ND, S			9501				
	hone No. ► <u>(77</u>		70112	FAX No. ▶					
		ot have an office or place of business	in the Ur				, [
					f this is fo	the whole group.	check this		
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for.									
box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until									
JANUARY 15, 2014 , to file the exempt organization return for the organization named above. The extension									
is for the organization's return for:									
>	calendar year								
► X tax year beginning JUN 1, 2012, and ending MAY 31, 2013									
2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return									
L	Change in accordance	unting period							
						·			
3a lft	his application is fo	r Form 990-BL, 990-PF, 990-T, 4720, c	or 6069, e	nter the tentative tax, less any			•		
nonrefundable credits. See instructions. 3a \$							0.		
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							^		
		ts made. Include any prior year overp			3ь	\$	0.		
		t line 3b from line 3a. Include your pa				•	Δ		
		ronic Federal Tax Payment System). S			3c	\$	0.		
		make an electronic fund withdrawal w			orm 8879-				
LHA F	For Privacy Act and	Paperwork Reduction Act Notice,	see instri	uctions.		Form 8868 (R	ev. 1·2013)		