

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

2017

OMB No 1545-1150

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information. 12/31 20 1/1 2017, and ending A For the 2017 calendar year, or tax year beginning C Name of organization D Employer identification number B Check if applicable Address change 93-1236819 St. Paul Rodeo Foundation Room/suite E Telephone number Name change Number and street (or P O box, if mail is not delivered to street address) Initial return 503-633-2031 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ St. Paul, Oregon 97137 Application pending ✓ Cash Other (specify) ▶ H Check ► ☐ If the organization is not Accrual G Accounting Method: required to attach Schedule B stpaulrodeofoundation.org I Website: ▶ (Form 990, 990-EZ, or 990-PF). J Tax-exempt status (check only one) — 🗹 501(c)(3) 🔲 501(c) () ◀ (insert no) 🔲 4947(a)(1) or K Form of organization: Corporation Trust Association L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 53976 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received 42,870 2 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 3 Investment income 11,106 5a Gross amount from sale of assets other than inventory 5b Less. cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than Revenue \$15,000) Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . 6c Less: direct expenses from gaming and fundraising events . Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d Gross sales of inventory, less returns and allowances . 7a Less: cost of goods sold Gross-profit-or-(loss) from sales of inventory (Subtract line 7b from line 7a) 7c Other revenue (describe in Schedule O) 8 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 53,976 10 10 Grants and similar amounts paid (list in Schedule O) 37,537 11 Benefits paid to or for members 11 Salaries, other compensation, and employee benefits . . . 12 12 Professional fees and other payments to independent contraction 13 13 14 14 Occupancy, rent, utilities, and maintenance 15 15 Printing, publications, postage, and shipping . . . 16 16 Other expenses (describe in Schedule O) 104 17 17 Total expenses. Add lines 10 through 16 37,641 18 Excess or (deficit) for the year (Subtract line 17 from line 9) . 18 16,335 Asset 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . 19 322,871 Net 20 Other changes in net assets or fund balances (explain in Schedule O) . 20 21 Net assets or fund balances at end of year. Combine lines 18 through 20 339,206

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form 990-EZ (2017)





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Part	<u> </u>			
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	<u>s Part</u>		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	Yes	No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		√
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		→
b c	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a b 38a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 00 10 10 10 10 10 10 10 10 10 10 10 10	37b 38a		- /
39 a	If "Yes," complete Schedule L, Part II and enter the total amount involved			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	-	- /
41	List the states with which a copy of this return is filed ▶ Oregon			
42a		503-63	3-203	1
	Located at ► 20209 Main Street NE, St. Paul, Oregon ZIP + 4 ►	97	137	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	+	No 🗸
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country. ▶	42c	<u> </u>	√
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year \Delta 43	• •		▶ □
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		-
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
c d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d		✓
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	1	/
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)			-1

Form 990	0-EZ (20	017)						P	age 4
		ne organization engage, directly or in adidates for public office? If "Yes," co						Yes	No ✓
Part \	/ 1	Section 501(c)(3) organizations All section 501(c)(3) organizations 50 and 51.	only s must answer que	stions 47–49b and	d 52, and	complete th		for line	es
		Check if the organization used Sch	edule O to respond	to any question in	this Part	<u>VI</u>		15.5	. <u>V</u>
		ne organization engage in lobbying in figure of the first		section 501(h) elect		ct during the	tax 47	Yes	No
48 49a b 50	Is the Did th If "Ye Comp	organization a school as described in ne organization make any transfers to s," was the related organization a se plete this table for the organization's	section 170(b)(1)(A)(i o an exempt non-cha ction 527 organizatio five highest compens	i)? If "Yes," complet ritable related orgai in? sated employees (o	e Schedule nization? . ther than c	officers, direct	48 49a 49b ors, truste	es, an	
		oyees) who each received more than Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	(d) He contribute benefit pla	If there is non ealth benefits, ions to employee ans, and deferred npensation	(e) Estimat other cor	ed amo	unt of
None					1				
						- 			
	- -]	}				
51	Comp	number of other employees paid over olete this table for the organization's 000 of compensation from the organ	s five highest compe	ensated independe		tors who eacl	n received	d more	e than
	(a)	Name and business address of each independ	ent contractor	(b) Type of s	ervice	(0) Compensa	tion	
None									
				-					
a	Total	number of other independent contra	entore each receiver	Over \$100,000			0		
52	Did t	the organization complete Schedu pleted Schedule A	_		-	s must attac		s 🛚	No
Under pe	enalties rect, an	of perjury, I declare that I have examined this r d complete Declaration of preparer (other than	eturn, including accompar officer) is based on all info	nying schedules and state ormation of which prepar	ements, and t er has any kn	o the best of my k owledge	nowledge ar	nd belief	f, it is
Sign		Signature of officer	ule			5/ // Date	18		
Here		Wally Pohlschneider, Treasurer Type or print name and title							
Paid Prepa	arer	Print/Type preparer's name	Preparer's signature		Date	Check Self-empl	- 1		
Use (Firm's name ▶				Firm's EIN ▶			
		Firm's address ► discuss this return with the preparer	shown above? See	instructions		Phone no	► F1 V-		No
iviay ill	にコロシ	discuss this return with the preparer	2110MH 900A6 , 266	แเลนนอนอกร .			▶ □ Ye	5 L.	No

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2017

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Department of the Treasury

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Employer identification number Name of the organization 93-1236819 St. Paul Rodeo Foundation Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). [7] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 ☐ An organization that normally receives: (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type IIII functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (ii) EIN (described on lines 1-10 listed in vour governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

or a new to transport the man with the second of

Total

Part							
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	te Part III.)	
	on A. Public Support			, , , , , , , , , , , , , , , , , , , 			
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and			}			ı
	membership fees received. (Do not						
	include any "unusual grants.")	21970	37000	48850	44470	42870	195010
2	Tax revenues levied for the)	1		
	organization's benefit and either paid to or expended on its behalf]		1	
3	The value of services or facilities						
3	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	21970	37000	48850	44470	42870	195010
-	-	21970	37000	48830	44470	42870	193010
5	The portion of total contributions by each person (other than a				•		
	each person (other than a governmental unit or publicly		1.				
	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						195010
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	21970	37000	48850	44470	42720	195010
8	Gross income from interest, dividends,						1
	payments received on securities loans,	ĺ		i	}		
	rents, royalties, and income from	Ì			}		
	sımılar sources	6626	7073	0	10031	11106	34836
9	Net income from unrelated business						
	activities, whether or not the business			ł	ł	}	
	is regularly carried on			 			
10	Other income. Do not include gain or			}	}		}
	loss from the sale of capital assets	1			}	1	}
	(Explain in Part VI.)			ļ			
11	Total support. Add lines 7 through 10	(0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.		<u> </u>	L	127	229846
12 13	Gross receipts from related activities, etc. First five years. If the Form 990 is for the form 1990 is for 1990 i			 ad thurd fourth	· · ·	12	n F01(a)(2)
13	organization, check this box and stop he	_					
Section	on C. Computation of Public Suppor			· · · ·			
14	Public support percentage for 2017 (line			(f)		14	85-%-
15	Public support percentage from 2016 Sci	• •	-			15	83 %
16a	331/3% support test—2017. If the organ						
	box and stop here . The organization qua						
þ	331/3% support test-2016. If the organ						
-	this box and stop here. The organization						. ▶ ┌
17a	10%-facts-and-circumstances test – 2	•		-			d line 14 is
	10% or more, and if the organization m	•					
	Part VI how the organization meets the '						
	organization						▶ 🗀
b	10%-facts-and-circumstances test-2	016. If the ora	anization did i	not check a bo	ox on line 13	16a, 16b, or 17	7a. and line
_	15 is 10% or more, and if the organization	_					
	Explain in Part VI how the organization is						
	supported organization				_		▶ 🗆
18	Private foundation. If the organization d	id not check a	box on line 13	3, 16a, 16b, 17a	a, or 17b, ched	k this box and	see
	instructions						🕨 🗀

Párt	Support Schedule for Organiza	tions Descri	bed in Secti	on 509(a)(2)			
	(Complete only if you checked th						ider Part II.
	If the organization fails to qualify	under the tes	sts listed belo	ow, please co	omplete Part I	l.) /	
	on A. Public Support				,		
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	/ (e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees	j			<i>,</i> , , , , , , , , , , , , , , , , , ,		
•	received (Do not include any "unusual grants")				/		L
2	Gross receipts from admissions, merchandise sold or services performed, or facilities				<u>'</u>		
	furnished in any activity that is related to the				1 /		
_	organization's tax-exempt purpose				 		
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513			ļ	 		
4	Tax revenues levied for the				1/		
	organization's benefit and either paid to or expended on its behalf				/		
5	The value of services or facilities						
•	furnished by a governmental unit to the			/			
	organization without charge	[/	[
6	Total. Add lines 1 through 5				 		
7a	Amounts included on lines 1, 2, and 3			1	 		
	received from disqualified persons .	į		/	1		
b	Amounts included on lines 2 and 3			1			
_	received from other than disqualified			/	1		
	persons that exceed the greater of \$5,000			/			
	or 1% of the amount on line 13 for the year			/ /	ł /		
С	Add lines 7a and 7b		/				
8	Public support. (Subtract line 7c from						
	line 6.)		/]	1		
Secti	on B. Total Support		7				
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6		1				
10a	Gross income from interest, dividends,		/				
	payments received on securities loans, rents,		/	•	{		
	royalties, and income from similar sources.		ĺ _′		<u> </u>		
b	Unrelated business taxable income (less				[1
	section 511 taxes) from businesses		1/		1		1
	acquired after June 30, 1975	,	/			·	
С	Add lines 10a and 10b					<u> </u>	
11	Net income from unrelated business	/ /		1	1		1
	activities not included in line 10b, whether						ļ.
	or not the business is regularly carried on				4		
12	Other income. Do not include gain or			ŀ	1		}
	loss from the sale of capital assets	/		}	}		}
40	(Explain in Part VI.)	 		<u> </u>	 	<u> </u>	
13	Total support. (Add lines 9, 10c, 11,	/				i	
	and 12.)	L	<u>l. ,- ,</u>	<u> </u>	<u> </u>	L	504()(0)
14	First five years. If the Form 990 is for the	<i>II</i> -					
	organization, check this box and stop he			<u>· · · · · · · · · · · · · · · · · · · </u>		<u> </u>	· · · • 📮
	on C. Computation of Public Suppor			10 (0)		1451	
15	Public support percentage for 2017 (line 8					15	<u>%</u>
16 Secti	Public support percentage from 2016 Sci			· · · · · · · · · · · · · · · · · · · 		16	<u>%</u>
	on D. Computation of Investment In			vilne 10 acti	·mn (f)	147	 %
17 18	Investment income percentage for 2017					17	
18 19a	Investment income percentage from 20/16 331/3% support tests—2017. If the organ					18 ore than 331/2	
198	17 is not more than 331/2%, check this box						
L	331/3% support tests – 2016. If the organiz						
b	line 18 is not more than 331/3%, check this						
20		-	=	•	-	· · · · · · · · · · · · · · · · · · ·	=
20	Private foundation. If the organization di	u not check a	DOX OIT IIII 14	, isa, or isb,	CHECK THIS DOX	and see instri	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete P	arı v.	<u>/</u>	
Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	<u>1</u>	<u> </u>	·
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	-	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		1
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		<i>\(\bar{\pi}\)</i>
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		. Ţ
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		√
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		:
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part Vi what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		1
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		Ī
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		1
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		-
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		-
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		1
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	-	1
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		1
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		1
10a	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a	_	1
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	1		

determine whether the organization had excess business holdings.)

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	1	<u> </u>
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		1
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		<u>√</u>
Secti	on C. Type II Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		162	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed]		1
	the supported organization(s).	1		✓
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	1	1	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			1
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		· 🗸
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			,
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			l j
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		<u> </u>
3	By reason of the relationship described in (2), did the organization's supported organizations have a			;
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		1	
	supported organizations played in this regard.	3		- j
Secti	on E. Type III Functionally Integrated Supporting Organizations		<u></u>	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	nstru	ction	e)
· a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions).
2	Activities Test. Answer (a) and (b) below.		Yes	No
	·		163	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	}		1
	those supported organizations and explain how these activities directly furthered their exempt purposes,)	ļ]
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a	ļ	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	1	1	}
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these		}	}
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	20	┼	
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		1	1
	trustees of each of the supported organizations? Provide details in Part VI.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	1	1

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	tru	st on Nov. 20, 1970 (expla	ain in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI).			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5-Income tax-imposed-in-prior-year	-5-		-
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			T
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	ly in	tegrated Type III supporti	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish			
2	part to perform downly mat amount far and one	empt purposes of suppo	orted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	nizations		
4	Amounts paid to acquire exempt-use assets			
5_	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whice	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			=
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI) See instructions.			
3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013			
C	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u> _	Applied to 2017 distributable amount			
<u>i</u> _	Carryover from 2012 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
	Section D, line 7. \$			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part-VI. See instructions.			
6	Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3 _j and 4c.		<u>.</u>	
- 8	Breakdown of line 7:		······································	
a				
<u>b</u>				
	Excess from 2015			
d	Excess from 2016			
e				
			L	

Pac	e	8

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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SCHEDULE O (Förm 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

> ► Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	Employer identification number
St. Paul Rodeo Foundation	93-1236819
Grants and Similar Amounts Paid	
Expenses related to preserving the heritage of the St. Paul Rodeo by conducting a Hall of Fame Induction	ion \$15 202
Expenses related to preserving the nentage of the St. Paul Rodeo by Conducting a nail of Panie induction	1011 \$13,202
Purchase livestock housing equipment for the St. Paul Rodeo Stadium \$14,335	
Provide two \$4000 scholarships to local high school students \$8000	
Other expenses	
Other expenses	
Bank Service Charge: \$15 State Depart of Justice Report Filing: \$50 Meeting Expense: \$39	