Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For the	e 2017 calendar year, or tax year beginning AUG 1, 2017 and ending	JUL 31, 2018
В	Check if	C Name of organization	D Employer identification number
	applicab	1	
L	Addre	• RENU RODEO ASSOCIATION	
	Name chang	Doing business as	88-0234480
L	lnitial return	Number and street (or P.O box if mail is not delivered to street address) Room/si	
	Final return		775-329-3877
	termir ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$ 6,349,835.
L	Amen	RENO, NV 89510	H(a) Is this a group return
L	Application pendication	F Name and address of principal officer GEORGE COMBS	for subordinates? Yes X No
		SAME AS C ABOVE	H(b) Are all subordinates included? Yes No
			527 If "No," attach a list (see instructions)
		te: WWW.RENORODEO.COM	H(c) Group exemption number
	art I	organization: Corporation Trust X Association Other ► LY Summary	ear of formation: 1987 M State of legal domicile: NV
<u> </u>		Briefly describe the organization's mission or most significant activities PRODUCTI	ON OF ANNUAL PENO PODEO
õ	1	Briefly describe the organization's mission or most significant activities PRODUCTY	ON OF ANNOAL RENO RODEO
nar	2	Check this box F if the organization discontinued its operations or delegated in	Affilian 25% of its not assets
Ver	3	Number of voting members of the governing body (Part VI, line 1a)	(3) 51
Ĝ	4	Number of independent voting members of the governing body (Part 92 line 1b).	0
مۆ بې	5	Number of independent voting members of the governing body (Part & line 1b). Total number of individuals employed in calendar year 2017 (Part V, Received 2a) DEC 03	2018 6 5 4
€	6	Total number of volunteers (estimate if necessary)	2018 S
(2)	7 a	Total unrelated business revenue from Part VIII, column (C), line 12 OGDEN	
2	b	Net unrelated business taxable income from Form 990-T, line 34	7b 4,669.
斋			Prior Year Current Year
MedaNNAtions & Governance	8	Contributions and grants (Part VIII, line 1h)	79,046. 99,822.
ZŽ	9	Program service revenue (Part VIII, line 2g)	4,197,877. 4,504,582.
ண		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,544. 16,615.
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,244,352. 1,294,352.
<u>.</u>	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,528,819. 5,915,371.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	49,781. 190,957.
2010	14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	418,256. 440,600.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
×	ь	Total fundraising expenses (Part IX, column (D), line 25)	
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,742,420. 5,119,407.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	5,210,457. 5,750,964.
	19	Revenue less expenses Subtract line 18 from line 12	318,362. 164,407.
Soci			Beginning of Current Year End of Year
Sset	20	Total assets (Part X, line 16)	5,115,640. 5,418,773.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	617,814. 754,238.
	22	Net assets or fund-balances. Subtract line 21 from line 20	4,497,826. 4,664,535.
_	art II	Signature Block	Assessed and the book of any language and holist it a
		Ities of perjury, I declare that have examined this return, including accompanying schedules and sta	
true	correg	n, and complete. Declaration of Freparer (other than officer) is based on all information of which prep	arer has any knowledge.
S. ~	(Signature er otdoer	Date
Sig		GREG WILLIAMS, TREASURER	
Hei		Type or print name and title	
		Print/Type preparer's name Preparer's signature See	Date Check PTIN
Pai	d	BETH KOHN-COLE BETH KOHN-COLE	11/28/18 ff self-employed P00212562
	parer	Firm's EIN 46-3281627	
	Only	Firm's name KOHN & COMPANY LLP Firm's address 5310 KIETZKE LANE, SUITE 101	
	•	RENO, NV 89511	Phone no. 775-828-7300
 Ma	y the If	as discuss this return with the preparer shown above? (see instructions)	X Yes No
_		·	

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Eorm	agn	(2017)	ገ
01111	-	12011	,

Form 990 (2017) RENO RODEO ASSOCIATION

Part IV Checklist of Required Schedules

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
_	If "Yes," complete Schedule A	1_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_		_ <u>X</u> _
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I			v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		_ <u>X</u> _
~	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>	41	
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete.			_==-
	Schedule D, Part III	8		X
9	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?			
	If "Yes," complete Schedule D, Part IV	9		_X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			., ., .
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> X</u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	_X_	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	400	х	
	Schedule D, Parts XI and XII Was the average transport and ded in paraelidated, independent suidited financial statements for the tax year?	12a		
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1.0		
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000]	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	.]		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		1	
	1c and 8a? If "Yes," complete Schedule G, Part II	18]	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	Ī		
	complete Schedule G, Part III	19_	Х	
		Form	990 (2017

Form 990 (2017) RENO RODEO ASSOCIATION

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			!
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		ł	
	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	Í	ĺ	
.	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the]	ļ.,	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	240		X
_	Schedule K. If "No", go to line 25a	24a 24b		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
C	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	Ì		
	complete Schedule L, Part II	26_		X
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)			•
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		^
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28c		Х
00	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions in the rest complete schedule in Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	-		
٠.	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			
	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			
	Part V, line 1	34	_X_	
35a		35a		X
b	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2	35b		<u> </u>
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_		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	x	
	Note, All Form 990 filers are required to complete Schedule O		990	(2017)
		. 51111		~~ · · /

1a Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable 5 Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable 6 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 6 If at least one is reported on line 2a, old the organization file all required for ending the prize of the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 8 Did the organization have unrelated business gross income of \$1,000 or more during the year? 9 A At any time during the calendar year, did the organization file all required for e-file (see instructions) 1a At any time during the calendar year, did the organization file of \$1,000 or more during the year? 2b If "Yes," has a filed a Form 990.T for this year? If "No." to line 3b, provide an explanation in Schedule 0 1b If "Yes," then the name of the foreign country [** See in instructions for filing requirements for FinoEN Form 114, Report of Foreign Bank and Financial account; (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the etax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the etax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction; 5b X 5c Did the organization shelt were not tax deductible as chanitable contributions? 5c Did the organization shelt may receive deductible contributions under section 170(c). 5c Did the organization shelt may receive deductible contributions under section 170(c). 5d Did the organization shelt and shelt the donor of the value of the goods or services provided? 7c Did the	Га	Check if Schedule O contains a response or note to any line in this Part V			\Box
1a Enter the number reported m Box 3 of Form 1096. Enter -0" in not applicable be Enter the number of Form 8040 (Sinched m in ne 1 as Enter -0" in not applicable to 0 of the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) with more provided by the complex of the com				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to veindors and reportable gaming (gambling) winnings to prize winners? 2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return 3 In a least one is reported on line 28, 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 St. 100 or more during the year? 3a X 3b If Yes, "has it field a Form 990-T for this year? If Yibo," to line 3b, provide an explanation in Schedule O 3b If Yes, "has it field a Form 990-T for this year? If Yibo, "to line 3b, provide an explanation in Schedule O 3b If Yes, "to line the name of the foreign country (such as a bank account, securities account, or other financial account)? 4c If Yes, "to line the name of the foreign country the programation have an interest in, or a significant organization have an foreign country the organization have made to Foreign Seath Y Ind." If the organization have an explanation in Schedule O 4d If Yes, "to line Sa or 55, did the organization than it was or is a party to a prohibited tax shelter transaction? 5c If Yes, "to line Sa or 55, did the organization than this was or is a party to a prohibited tax shelter transaction? 5c If Yes, "to line so are 55, did the organization than this was or is a party to a prohibited tax shelter transaction? 5c If Yes, "to line organization have manual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 5c If Yes, "to line the organization than the value of the goods or services provided? 5d If Yes, "to line the organization than the contribution of contributions under section 170(c). 6d If Yes, "indicate the number of Forms 8282 field d	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	,		
digambling) winnings to prize winners? a 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 b if at least one is reported on line 2a, id dit the organization file all required derelial employment tax returns? Ab if Yes, I saw und lines 1 and 2 as greater than 250, you may be required to e-file (see instructions) b if Yes, I saw the filed a Form 990-T for this year? If No, I to line 3 power on sending the year? b if Yes, I saw the filed a Form 990-T for this year? If No, I to line 3 bank account, no rore during the year? b if Yes, I saw the filed a Form 990-T for the year? If No, I to line 3 bank account, securities account, or other financial accounts (yeu has a bank account, securities account, or other financial accounts (yeu has a bank account, securities account, or other financial accounts (FBAR) b if Yes, I do the organization have an interest in, or a signature or other authority over, a financial account is of the organization file as bank account, securities account, or other financial accounts (FBAR) be an structions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial accounts (FBAR) b if Yes, I do the organization and it is was or is a panty to a prohibited tax shelter transaction at any time during the tax year? b if Yes, I do the organization include with every solicitation an express statement that such contributions or gifts were not tax deductibles? c organizations that may receive deductible contributions under section 170(c). b if Yes, I do the organization network application an express statement that such contributions or gifts were not tax deductibles on tax deductibles on the production of the value of the goods or services provided? c of the organization receive a payment in excess of S75 made partly as a contribution of undersonable partly for goods and services provided to the payor? c of the organization received a paymen	b	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable 1b 0	,		
2a Enter the number of employees reported on Form W.S., Transmittal of Wage and Tax Statements, filed for the calendary year ending with or within the year covered by this return. b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3b Did the organization have unding with or within the year covered by this return. 3c Did the organization have undired business gross income of St. 300 or more during the year? 5c Did "Yes," has it filed a Form 990 T for this year? If "No," to line 3b, provide an explanation in Schedule O 5c A At any time during the calendary year, did the organization have an interest in, or a segrature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR) 5c Was the organization a party to a prohibitor. 5c If "Yes," to line 5a or 5b, did the organization have and it was or is a party to a prohibitor at whether transaction? 6c If "Yes," to line 5a or 5b, did the organization have and it was or is a party to a prohibitor at whether transaction? 6c If "Yes," to line 5a or 5b, did the organization have nutlial gross receipts that are normally greater than \$100,000, and did the organization solicid any contributions of the organization network and property to prohibitor and shelf the organization solicid with every solicitation an express statement that such contributions or grifts were not tax deductible as charitable contributions? 6c If "Yes," did the organization network endicate the number of Forms 8282 filed during the year 6d If Yes, "did the organization network endicate the number of Forms 8282 filed during the year 6d If Yes," did the organization network endicated the ordinariation folicy and property did the organization file a Form 1098-C? 7d If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7d If the organization receive any funds, directly or indirectly, to a pe	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
tied for the calendary year ending with or within the year covered by this return bit of all least one is reported on the 23, 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? 5b. X X bit if Yea, and it filed a Form 990-71 for this year? If Yive, 10 line 3b, provide an explanation in Schedule 0 5c. X 4a. At any time during the calendary year, did the organization have an interest iii, 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)? 4a. As the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5b. Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? 5c. If Yea, 10 line 5a or 5b, did the organization had it was or is a party to a prohibited tax sheller transaction? 6c. If Yea, 10 line 5a or 5b, did the organization had it was or is a party to a prohibited tax sheller transaction? 6c. If Yea, 10 line 5a or 5b, did the organization had we are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 7c. Organizations that may receive deductible contributions 8d. X 8d.		(gambling) winnings to prize winners?	1c	X	L
b If a 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," has it filed a Form 990.1 for this year? If "No," to line 3b, provide an explanation in Schedule O 3d 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, escunties account, or other nancial account)? 4a At any time during the calendar year, did the organization vice an anterest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, secunties account, or other financial account)? 4b If "Yes," there the name of the foreign country is what account, secunties account, or other financial account)? 5b Uf yes, the organization party to a prohibited tax shelter transaction at any time during the tax year? 5c Und my taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 6c If "Yes," to line the organization include with every solicitation and express statement that such contributions or grits were not tax deductible? 6c If "Yes," to line the organization include with every solicitation and party for goods and services provided to the party of the did the organization receive any party of the organization and party for good and services provided to the party	2a	Enter 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-file (bee instructions) 3		filed for the calendar year ending with or within the year covered by this return			
3a Du the organization have unrelated business gross income of \$1,000 or more during the year? 4b if Yes, "has it field a Form 990-T for this year? if "No," to line 3b, provide an explanation in Schedule O 4b 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, or other financial accounts (FBAR) 5c emistructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5c was the organization of the foreign country to a prohibited tax shelter transaction at any time during the tax year? 5c bid any taxabile party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6c if "Yes," to line 5a or 5b, did the organization file Form 88661? 6a Does the organization include with every solicitation and express statement that such contributions origifs were not tax deductible? 6b If "Yes," did the organization include with every solicitation and express statement that such contributions origifs were not tax deductible? 6c Ord the organization self, sexhange, or otherwise dispose of tangible personal property for which it was required to the Form 8282? 6c If "Yes," did the organization necewe a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 7c If "Yes," did the organization of the value of the goods or services provided? 8c If "Yes," did the organization mecewe any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9c If "Yes," did the organization received a contribution of cars, boats, arplanes, or other vehicles, did the organization file a Form 1098 C? 9c Sponsoring organization have excess business holdings at any time during the year? 9c Sponsoring organization have a distribution to a donor, divine during the year? 9c Sponsoring organization make a distribution to a donor, diving form 990 in leu of For	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
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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

	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{x}
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 51			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
þ	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>
6	Did the organization have members or stockholders?	6		_ <u>X</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	_	v	
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			3.7
_	persons other than the governing body?	7b		_ <u>X</u> _
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		· •	
а	The governing body?	_8a_	X	
	Each committee with authority to act on behalf of the governing body?	8b	^	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
	The state of the cooler B requeste information about periode not required by the internal nevertal cooler,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	1.55	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u>X</u>
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		<u>X</u>
14	Did the organization have a written document retention and destruction policy?	14		<u> X</u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		1	
	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
þ	Other officers or key employees of the organization	15b		<u>X</u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		ĺ	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40.		v
	taxable entity during the year?	16a		<u>X</u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	16b		
Sec	exempt status with respect to such arrangements?tion C. Disclosure	100	ل	
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-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request X Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
-	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	RENO RODEO ASSOCIATION - 775-329-3877			
	WASHOE COUNTY FAIRGROUNDS, RENO, NV 89512			

Form **990** (2017)

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

Check if Schedule O contains a response or note to any line in this Part VII

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

Leck this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than	one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) BILL SUMMY	10.00									0
PRESIDENT		X	L.,	X	L	ļ		0.	0.	0.
(2) CRAIG DOWNIE	10.00									
VICE PRESIDENT		X	!	X		_		0.	0.	0.
(3) MIKE TORVINEN	10.00					ĺ				•
VICE PRESIDENT		X		X				0.	0.	0.
(4) GREG WILLIAMS	10.00							•		•
TREASURER	10.00	X		X		-		0.	0.	0.
(5) DEBBIE SPRAGUE	10.00	!								_
SECRETARY		X		X	-	-		0.	0.	0.
(6) SHANE ACKERSON	2.00	.,								^
DIRECTOR	2 00	X			_	-		0.	0.	0.
(7) RANDY BELL	2.00	٠,						0.	0.	^
DIRECTOR	2 00	X	_		-	-			<u></u>	0.
(8) MICHAEL BUIS	2.00	.						0.	O.	0.
DIRECTOR	2 00	X	_	-	-	-	_			
(9) ALEX BYBEE	2.00	x				1		0.	0.	0.
DIRECTOR	2.00	Δ	-							
(10) BOB COSE	2.00	X						0.	0.	0.
DIRECTOR	2.00	Α.			_	 -	_			
(11) DONALD CRANK	4.00	X						0.	0.	0.
DIRECTOR	2.00	^				-		· · ·		<u> </u>
(12) SHARON DISIMONI	2.00	X						0.	0.	0.
DIRECTOR PONCLUCY	2.00	1			-					
(13) FRANCINE DONSHICK DIRECTOR	2.00	x						0.	ο.	0.
(14) TERRY DONSHICK	2.00				-	-				
DIRECTOR	2.00	x			l			0.	0.	0.
(15) SPENCER DOWNIE	2.00			_		_				
DIRECTOR	2.00	х						0.	0.	0.
(16) ZACH DOWNIE	2.00									
DIRECTOR		x						_0.	0.	0.
(17) MICHAEL EFSTRATIS	2.00	Γ-								
DIRECTOR		x						0.	0.	0.
732007 11-28-17	<i>.</i>									Form 990 (2017)

Part VII Section A. Officers, Directors, True		ploy	ees/			ghe	st C	ompensated Employe	es (continued)				
(A)	(B) (C) Average Position							(D)	(E)		l	(F)	
Name and title	Average	(do not check more than one		Reportable Reportabl			1	stimate	- •				
	hours per week			iss pe nd a d				compensation	compensati		ar	nount	-
	(list any		Ī	Ī	ľ	Γ	T	from the	from relate organization		COR	other opensa	
	hours for	diect		ĺ		-	ł	organization	(W-2/1099-MI			rom th	
	related	trustee or directo	stee			nsate		(W-2/1099-MISC)	(** 27 1033 1411	00,		anızat	
	organizations	fast	institutional frustee	Ì	yee	aduc	ĺ	,			, ~	d relat	
	below	Individual	髫	₌₌	Key employee	est co	ļ ₂₂				org	anızatı	ons
	line)	Ę	To St	Officer	ě	Highest compensated employee	Ротшег						
(18) DAN EHORN	2.00												
DIRECTOR	<u> </u>	X		Ĺ.		L_		0.		0.			0
(19) JIM ELSTON	2.00										1		
DIRECTOR		X		Ĺ.	L	Ĺ		0.		0.	Ĺ		0.
(20) LARRY FRUGOLI	2.00						i				l		
DIRECTOR		X	Ĺ			<u> </u>	L	0.		0.	<u> </u>		0.
(21) JULIE GALLIO	2.00	}											
DIRECTOR		X					_	0.		0.	İ		0
(22) TROY GARDNER	2.00							ļ					
DIRECTOR		X						0.		0.			0.
(23) PAUL GORDON	2.00												
DIRECTOR		X						0.	<u></u>	0.			_ 0 .
(24) GREG GOSS	2.00									1	1		
DIRECTOR		X				L_	<u> </u>	0.		0.			0.
(25) JIM HAY	2.00				}	}				1	1		
DIRECTOR		X			<u> </u>			0.		0.			<u> </u>
(26) JOSHUA IVESON	2.00						1			1			
DIRECTOR	<u> </u>	X			<u> </u>	<u> </u>	L	0.		0.			0.
1b Sub-total								0.		0.	<u> </u>		0.
c Total from continuation sheets to Part V	II, Section A							103,306.		0.		3,6	
d Total (add lines 1b and 1c)							<u> </u>	103,306.		0.		3,6	<u>78.</u>
2 Total number of individuals (including but r	not limited to th	ose	liste	ed al	bove	e) wł	no re	eceived more than \$100	,000 of reportab	ole			
compensation from the organization	· · · · · · · · · · · · · · · · · · ·												
										,		Yes	No
3 Did the organization list any former officer	, director, or tru	uste	e, ke	y en	nplo	yee	, or h	highest compensated e	mployee on	ĺ			
line 1a? If "Yes," complete Schedule J for s	such individual										3		X
4 For any individual listed on line 1a, is the si	um of reportab	le co	mp	ensa	ation	and	d oth	ner compensation from	the organization				
and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	dule	e J f	or such individual]	4		X
5 Did any person listed on line 1a receive or	accrue compei	nsat	on f	rom	any	unr	elate	ed organization or indivi	dual for services	,			l
rendered to the organization? If "Yes," con	nplete Schedul	<u>e J f</u>	or s	uch ,	pers	on				l	5	لسل	<u>X</u>
Section B. Independent Contractors													
1 Complete this table for your five highest co										npens	ation 1	from	
the organization Report compensation for	the calendar y	ear e	endi	ng w	vith	or w	ithin	the organization's tax	/ear				
(A)	addrac -							(B)	00,000	_)) omno:	-	_
Name and business	address						\perp	Description of s	GI VICES		ompe	nsatio	/1

(A) Name and business address	(B) Description of services	(C) Compensation
PROFESSIONAL RODEO COWBOYS ASSOCIATION 101 PRORODEO DR, COLORADO SPRINGS, CO 80919	ADDED PURSE	343,350.
FLYING U 320 FIFTH STREET, MIGSVILLE, CA 95901	LIVESTOCK RENTAL	326,500.
•	MARKETING AND ADVERTISING	117,327.

\$100,000 of compensation from the organization > 3

SEE PART VII, SECTION A CONTINUATION SHEETS

Total number of independent contractors (including but not limited to those listed above) who received more than

Form **990** (2017)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections
512 - 514 (C) Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues 47,780 c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 52,042 9 Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 99.822 Business Code Program Service Revenue 2 a ANNUAL RENO RODEO 711210 4,397,616 4,266,056 131,560 f All other program service revenue 711210 106_966 106,966 g Total. Add lines 2a-2f 4 504 582 Investment income (including dividends, interest, and other similar amounts) 16,615. Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents 399,067 b Less rental expenses 0 c Rental income or (loss) 399,067, d Net rental income or (loss) 399,067 399,067 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 71,731 **b** Less direct expenses 31,842 c Net income or (loss) from gaming activities 39,889 39,889 10 a Gross sales of inventory, less returns and allowances 258,018 b Less cost of goods sold 622 c Net income or (loss) from sales of inventory 855 396 855 396 Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. 131,560 915 371 5,667,374 16,615

Form 990 (2017) RENO RODEO ASSOCIATION Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons		this Part IX (B)	······································	X
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	<u>190,957.</u>	190,957.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	-			
3	Grants and other assistance to foreign		}	•	
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	106,984.		106,984.	
_	trustees, and key employees	100,304.		100,304.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	282,983.	143,843.	139,140.	
7	Pension plan accruals and contributions (include	202,303.	143,043.	139,140.	
8	section 401(k) and 403(b) employer contributions)	7,299.	2,692.	4,607.	
9	Other employee benefits	21,209.	7,823.	13,386.	
9 10	Payroll taxes	22,125.	8,161.	13,964.	
11	Fees for services (non-employees)	22,123.	0/101.		
''a	Management				•
b	Legal				
c	Accounting			I"	
d	Lobbying	·			<u> </u>
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
9	column (A) amount, list line 11g expenses on Sch O.)	278,676.	125,335.	153,341.	
12	Advertising and promotion	625,806.	616,792.	9,014.	
13	Office expenses	161,832.	138,354.	23,478.	
14	Information technology				
15	Royalties -				
16	Occupancy	453,592.	388,563.	65,029.	
17	Travel	171,538.	37,842.	133,696.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	90,989.	3,983.	87,006.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	104,785.		104,785.	
23	Insurance	51,337.	1,694.	49,643.	
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	UNRELATED BUSINESS INCO	172.		172.	
a b	CALCUTTA	585,134.	585,134.		
C	SPONSORSHIP	520,984.	449,864.	71,120.	
d	LIVESTOCK	396,985.	393,315.	3,670.	
	All other expenses SEE SCH O	1,677,577.	1,463,020.	214,557.	
25	Total functional expenses Add lines 1 through 24e	5,750,964.	4,557,372.	1,193,592.	0
26	Joint costs Complete this line only if the organization	<u> </u>			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here In 11 following SOP 98-2 (ASC 958-720)				

Form 990 (2017)
Part X | Balance Sheet

Par	rt X	Balance Sheet	_		
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash non-interest-bearing	165,465.	1	825,162.
	2	Savings and temporary cash investments	2,908,498.	2	2,348,742.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	132,382.	4	183,894.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
1		employers and sponsoring organizations of section 501(c)(9) voluntary			-
र्घ		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6_	·
Assets	7	Notes and loans receivable, net		7	
•	8	Inventories for sale or use	55,234.	8	32,503.
	9	Prepaid expenses and deferred charges	43,584.	9	55,478.
	10a				
	,	basis Complete Part VI of Schedule D 10a 2,595,039.	044 054	-	= 1 = 000
İ	b	Less accumulated depreciation 10b 1,847,811.	844,971.	10c	747,228.
-	11	Investments - publicly traded securities	927,490.	11	1,129,838.
	12	Investments - other securities See Part IV, line 11	22,655.	12	72,655.
ļ	13	Investments - program-related See Part IV, line 11		13	
ľ	14	Intangible assets	15 261	14	02 072
	15	Other assets See Part IV, line 11	15,361.	15	23,273.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,115,640.	16	5,418,773.
	17	Accounts payable and accrued expenses	617,814.	17	754,238.
	18	Grants payable		18 19	
- 1	19	Deferred revenue		20	
	20	Tax-exempt bond liabilities		21	
	21	Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees,			
Liabilities	22	key employees, highest compensated employees, and disqualified persons			,
Ē		Complete Part II of Schedule L		22	• •
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	 · · · · · · ·
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			· · · · · · · · · · · · · · · · · · ·
	20	parties, and other liabilities not included on lines 17-24) Complete Part X of		[[
		Schedule D		25	
İ	26	Total liabilities. Add lines 17 through 25	617,814.	26	754,238.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
ς,		complete lines 27 through 29, and lines 33 and 34.			
ဦ	27	Unrestricted net assets	4,497,826.	27	4,664,535.
ala	28	Temporarily restricted net assets		28	
d B	29	Permanently restricted net assets		29	
<u> </u>		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			- <u>-</u>
ö		and complete lines 30 through 34.	-		
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
lss(31	Paid in or capital surplus, or land, building, or equipment fund		31	
4	32	Retained earnings, endowment, accumulated income, or other funds		32	
ω,		·			1 661 535
ž	33	Total net assets or fund balances	4,497,826.	33	4,664,535. 5,418,773.

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

732012 11-28-17

Form 990 (2017)

Act and OMB Circular A-133?

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

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

	, ,				
$\overline{}$	Section 501(c)(4), (5), or (6) organiza	itions Complete Part III			
Nan	ne of organization			Em	ployer identification number
	RENO RO	DEO ASSOCIATION			88-0234480
Pa	art I-A Complete if the org	ganization is exempt un	der section 501(c)	or is a section 527	organization.
1	Provide a description of the organiz	zation's direct and indirect polit	ical campaign activities	ın Part IV	
	Political campaign activity expendit			.	\$
	Volunteer hours for political campa			·	
Ü	voidifical floats for political campa	igh douvilles			
Pa	art I-B Complete if the ord	ganization is exempt un	der section 501(c)	(3).	
	Enter the amount of any excise tax				\$
2		, ,			\$
	If the organization incurred a section	• •	•	,	Yes No
	Was a correction made?	711 4355 tax, did it the 1 61111 4720	o for this year?		Yes No
	o If "Yes," describe in Part IV				res no
		ganization is exempt un	der section 501(c)	except section 50	I(c)(3).
ш	Enter the amount directly expended				\$
	Enter the amount of the filing organ				Ψ
~	exempt function activities	inzation's lunds contributed to c	other organizations for s		\$
2	Total exempt function expenditures	Add know 1 and 2 Enter hare	and an Form 1120 POL		Ψ
3	line 17b	S Add lines I and 2 Enter here	and on rollin 1120-FOL	.,	c
		4400 BOL for this year?			Yes No
	Did the filing organization file Form	•		-141	
5	Enter the names, addresses and er	· •	•	-	• -
	made payments For each organization contributions received that were pr				
	political action committee (PAC) If				rate segregated folio of a
	<u> </u>	T .			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
				filing organization's funds If none, enter -0	
				Tarias ir none, eritor o	delivered to a separate
					political organization
				<u> </u>	If none, enter -0-
			_		
					1
			_	<u> </u>	
		ļ)	J	

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

Schedule C (Form 990 or 990-EZ) 2017	RENO RODEO	ASSOCTATIO	N	88-	0234480 Page:
Part II-A Complete if the org	janization is exe	mpt under secti	ion 501(c)(3) and fil	ed Form 5768 (election under
section 501(h)).		 	<u>-</u>		
	_		n Part IV each affiliated	group member's na	me, address, EIN,
. —	re of excess lobbying	• •			
B Check ▶	tion checked box A a	nd "limited control" p	provisions apply		(1.) A#Justania
	ts on Lobbying Expe ditures" means amou		d.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infli	uence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence	uence a legislative boo	dy (direct lobbying)		 	
c Total lobbying expenditures (add li	nes 1a and 1b)		ļ		
d Other exempt purpose expenditure	es e		ļ		
e Total exempt purpose expenditure	s (add lines 1c and 1c	d)			
f Lobbying nontaxable amount Enter	er the amount from the	e following table in b	oth columns		
If the amount on line 1e, column (a) o	r (b) is The lob	bying nontaxable a	mount is:		
Not over \$500,000	20% of	the amount on line 1	e		
Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the e	xcess over \$500,000		
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the e	xcess over \$1,000,000.		
Over \$1,500,000 but not over \$17,			cess over \$1,500,000	•	
Over \$17,000,000	\$1,000,	000		•	
					
g Grassroots nontaxable amount (en					
h Subtract line 1g from line 1a. If zer	•		}		
i Subtract line 1f from line 1c If zero					<u>.l</u>
j If there is an amount other than ze		line 11, did the organ	ization file Form 4/20		Yes No
reporting section 4911 tax for this			or costion 501/h)		res No
(Some organizations the	nat made a section 5		ot have to complete all o lines 2a through 2f.)	of the five columns	below.
	Lobbying Expe	nditures During 4-Y	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))	<u> </u>	ļ			
c Total lobbying expenditures	-				
d Grassroots nontaxable amount			,		
e Grassroots ceiling amount (150% of line 2d, column (e))	 			•	

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990 EZ) 2017 RENO RODEO ASSOCIATION 88-0234480 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)).

he lobbying activity				
	Yes	No	Am	ount
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?				
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?				
f Grants to other organizations for lobbying purposes?				
Direct contact with legislators, their staffs, government officials, or a legislative body?			- · · ·	
Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
Other activities?				
Total Add lines 1c through 1		_		
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			<u> </u>	
of If "Yes," enter the amount of any tax incurred under section 4912				
of 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				
	 			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Int III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	ion 501(c)	(5) or se	ction	
501(c)(6).		(5), 01 36	Clion	
			Yes	N
Were substantially all (90% or more) dues received nondeductible by members?		1_	X	
Did the organization make only in house lobbying expenditures of \$2,000 or less?		2		
Did the organization agree to carry over lobbying and political campaign activity expenditures from	the prior year	7 3		7
answered "Yes."				
Dues, assessments and similar amounts from members		1		
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	tical			
expenses for which the section 527(f) tax was paid).				
·		2a		
Current year Carryover from last year		2b		
a Current year Curryover from last year		2b 2c		
Current year Carryover from last year		2b		
a Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e		2b 2c		
a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		2b 2c		
a Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the e		2b 2c		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

►Go to www.irs.gov/Form990 for instructions and the latest information.

2017
Open to Public Inspection

Name of the organization

Employer identification number

RENO RODEO ASSOCIATION 88-0234480 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only 6 for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last 2 day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure 2d listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Schedule D (Form 990) 2017

732051 10-09-17

		DEO ASSOCI					<u>88-02</u>	34480	Page 2
Pa	t III Organizations Maintaining C	collections of A	rt, Historica	<u>il Treasures, c</u>	or Othe	r Simil	ar Asse	ts(continu	ed)
3	Using the organization's acquisition, access	on, and other record	ls, check any o	of the following tha	it are a sig	gnificant	use of its	collection	items
	(check all that apply)								
а	Public exhibition	d		r exchange progra					
b	Scholarly research	е	Other_						
С	Preservation for future generations								
4	Provide a description of the organization's co						ose in Par	t XIII	
5	During the year, did the organization solicit of				er sımılar	assets	_	7	
	to be sold to raise funds rather than to be m							_ Yes	<u>No</u>
Pai	t IV Escrow and Custodial Arran		ete if the organ	zation answered '	"Yes" on I	Form 990	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa			-					
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contrib	utions or other as	sets not i	ncluded	_	٦	
	on Form 990, Part X?						L.	_ Yes	∟_ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table				_		
						-		Amount	
	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
	Ending balance	000 0-171	04 6			<u>1f</u> _		7,,	
2a	, , , , , , , , , , , , , , , , , , , ,					⊢ No			
	b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10								
_ a.	Endowment Lands: Complete						aare hack	(a) Four v	agre back
4	Danimping of wear belongs	(a) Current year	(b) Prior yea	ar (C) (WO year	S Dack	u) Tillee y	Cais Dack	(e) i oui y	cars back
1a	Beginning of year balance			- 			 -		
Ь	Contributions			-					
С.	Net investment earnings, gains, and losses								
а	Grants or scholarships				-				
е	Other expenditures for facilities								
	and programs								
T	Administrative expenses			- 1					
g	End of year balance	ront waar and halana	o (line 1 a colu	mp (a)) held as				L	
	2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi endowment ▶								
a	Permanent endowment	%	~_^70						
b	Temporarily restricted endowment	^							
С	The percentages on lines 2a, 2b, and 2c sho								
20	Are there endowment funds not in the posse	•	ation that are h	eld and administe	red for th	e Organi:	zation		
Ja	by	Solon of the organiza	20011 11141 410 11			g		[v	es No
	(i) unrelated organizations							3a(ı)	117
	(ii) related organizations							3a(ii)	
h	If "Yes" on line 3a(ii), are the related organizations	itione lieted as requir	ed on Schedul	le R?				3b	
4	Describe in Part XIII the intended uses of the	•							
	t VI Land, Buildings, and Equipm		WWITTER TOTAL						
	Complete if the organization answere). Part IV. line 1	1a See Form 990). Part X. I	ine 10			
	Description of property	(a) Cost or o		Cost or other		cumulate	ed	(d) Book	value
	bescription of property	basis (investr	', '	asis (other)		reciation	I .	(0) = 00	
12	Land			 	'				
b				280,268.		95,8	49.	184	,419.
	Leasehold improvements		1	,958,326.		73,8			,435
	Equipment		- -	229,958.		96,3			,636.
	Other			126,487.		81,7			738.
	Add lines 1a through 1e (Column (d) must e	gual Form 990, Part	Y column (B)						,228.

Schedule D (Form 990) 2017

(1)(2)(3)(4)(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 15)

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f See Form 990, Part X, line 25

1	(a) Description of liability	(b) Book value
(1) Federa	Income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column	(b) must equal Form 990, Part X, col (B) line 25)	•

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII. X

Schedule D (Form 990) 2017

2017.05000 RENO RODEO ASSOCIATION

Schedule D (Form 990) 2017

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 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.

Go to www.lrs.gov/Form990 for the latest instructions.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization				1 ' -	entification number
	DEO ASSOCIATION	-1 1134 - 11		88-0234	
required to complete this par	 Complete if the organization answit 	ered "Yes"	on Form 990, Part IV,	line 17 Form 990-E	Z filers are not
Indicate whether the organization rais a	e Solicita f Solicita g Special or oral agreement with any individua art VII) or entity in connection with products or entities (fundraisers) pursurduals or entities (fundraisers)	ition of non ition of gove I fundraising I (including professiona	government grants ernment grants g events officers, directors, tru I fundraising services	stees, or	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(III) Did fundraiser have custed or control or contributions	f from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes No			
			<u> </u>		
•		, ,			
Total					
3 List all states in which the organization	n is registered or licensed to solicit	contributio	ns or has been notified	d it is exempt from re	egistration
or licensing					·
					_
					
LHA For Paperwork Reduction Act Noti	ce, see the Instructions for Form	990 or 990	-EZ. \$	Schedule G (Form 9	90 or 990-EZ) 2017

Sch Pa	<u>edu</u> irt	II Fundraising Events. Complete if the	DEO ASSOCIA	TION	88-	0234480 Page 2
		of fundraising event contributions and gi				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
ē			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts				
	2	Less Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
w	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
irect E	7	Food and beverages				
۵	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary Add lines 4 throug	h 9 ın column (d)		>	
_	11		ine 3, column (d)			<u></u>
Pa	π	, ,	answered "Yes" on Fo	rm 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a	T	(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col. (c))
Rev	1	Gross revenue			_71,731.	71,731.
es	2	Cash prizes			31,842.	31,842.
Expenses	3	Noncash prizes				
Direct (4	Rent/facility costs				
	5	Other direct expenses	<u> </u>			
	6	Volunteer labor	Yes % No	% Yes % No	Yes 100,00 % X No	
	7	Direct expense summary Add lines 2 through	h 5 ın column (d)		•	31,842.
	8	Net gaming income summary Subtract line 7	from line 1, column (d)		39,889.
а	ls t	er the state(s) in which the organization condi he organization licensed to conduct gaming a	ctivities in each of thes	e states?		Yes X No
b	If "	No," explain 50/50 RAFFLE DOE	S NOT REQUI	RE A LICENSE.		
		re any of the organization's gaming licenses re				Yes X No
b		Yes," explain				
	_					
70000		10.47			Sahadula C /Ear	m 990 or 990-F7) 2011

Sch	nedule G (Form 990 or 990-EZ) 2017 RENO RODEO ASSOCIATION	88-0	234480	Page 3
11	Does the organization conduct gaming activities with nonmembers?		X 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	X No
13	Indicate the percentage of gaming activity conducted in			
	a The organization's facility		13a 100	.00 %
	o An outside facility		13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and record	de	100	
1-4		15		
	Name ► MIKE TORVINEN			,
	Address ► PO BOX 12335 - RENO, NV 89510			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	X No
b	o If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amou	unt		
	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 > \$			
	Garming manager compensation			
	Description of services provided			
	Becomplied of delivious provides p			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
Ĭ	retain the state gaming license?		Yes	X No
٠	enter the amount of distributions required under state law to be distributed to other exempt organizations or spent is	n the		
_	organization's own exempt activities during the tax year > \$			
Pa	Supplemental Information. Provide the explanations required by Part i, line 2b, columns (iii) and (v), and P	art III, III	nes 9, 9b, 1(b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions			
				
				

09431128 794311 264195

Schedule G (Form 990 or 990-EZ)	RENO RODEO ASSOCIATION ormation (continued)	88-0234480 Page 4
Part IV Supplemental Int	ormation (continued)	
		<u> </u>
······································		
· · · · · · · · · · · · · · · · · · ·		1
		•
,		
		
<u></u>		

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No 1545-0047	2017	Open to Public	Inspection
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► Go to www.irs.gov/Form990 for the latest information.

Name of the organization					•		Employer identification number
RENO KODEO ASSOCIATED ASSOCIATED General Information on Grants and Assistance	O ASSISTANCE	TTON					00-0734400
1 Does the organization maintain records to substantiate the amount of	o substantiate the		or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	tion
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monit	oring the use of grant	funds in the United	States			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Domestic Organi	zations and Domesti	c Governments. Co	omplete if the orga	nization answered "Y	'es" on Form 990, Parl	. IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	55,000 Part II can	be duplicated if addit	ional space is need	pa			
1 (a) Name and address of organization or government	(b) EIN	(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 noncash assistance	(h) Purpose of grant or assistance
PROFESSIONAL RODEO COWBOYS ASSOCIATION INC - 101 PRORODEO DRIVE - COLORADO SPRINGS CO 80919	84-0913588	50103	9	C			UNRESTRICTED CHARITABLE
							GRANT TO FOR-PROFIT
4840 VISTA BLVD STE 108 SPARKS, NV 89436	46-2143521		20,050.	0			ORGANIZATION SERVING CHILDREN
							-
JUSTINHOPE FOUNDATION PO BOX 13383							UNRESTRICTED CHARITABLE
RENO, NV 89507	45-2490664	501C3	30,000.	0			CONTRIBUTION
							מיניים מחחרים מחרים מינים
LIFE CHANGING COMMUNITY COINEACH	47-3399162	50163	27 500	c			UNRESITICIED CHARITABLE
PUEDN NEVADA DAVE FAMTI							
FOUNDATION - PO BOX 2072 - SPARKS							UNRESTRICTED CHARITABLE
	94-3236921	50103	30,000.	0.			CONTRIBUTION
- 1							
, 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	ind government or	ganizations listed in th	ne line 1 table				4
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table					1.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990	see the Instruct	ions for Form 990.					Schedule I (Form 990) (2017)

Schedule I (Form 990) (2017) (f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information FUNDS ARE AWARDED TO US PUBLIC CHARITIES THAT SUPPORT THE MISSION OF THE Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed (d) Amount of non-cash assistance 30 (c) Amount of cash grant (b) Number of recipients RENO RODEO ASSOCIATION OR VETERANS. (a) Type of grant or assistance PART I, LINE 2: 732102 11-01-17 Part III

Page 2

88-0234480

RENO RODEO ASSOCIATION

Schedule | (Form 990) (2017)

SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

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

Internal Revenue Service Name of the organization

RENO RODEO ASSOCIATION

Employer identification number

88-0234480 FORM 990, PART VI, SECTION A, LINE 2: THE FOLLOWING MEMBERS OF THE GOVERNING BOARD ARE RELATED AS NOTED. TERRY DONSHICK AND FRANCINE DONSHICK ARE BROTHER AND SISTER. CRAIG DOWNIE IS FATHER TO SPENSER DOWNIE AND ZACH DOWNIE, HIS SONS. GREG TORVINEN AND MIKE TORVINEN ARE BROTHERS. FORM 990, PART VI, SECTION A, LINE 7A: CURRENT BOARD MEMBERS ARE ELIGIBLE TO ELECT DIRECTORS TO THE GOVERNING BOARD FROM THE SLATE OF AVAILABLE CANDIDATES APPROVED BY THE BOARD AND THE BOARD ELECTS THE BOARD'S OFFICERS. GENERAL MANAGER. PRESIDENTS ARE VOTING MEMBERS OF THE GOVERNING BOARD FOR LIFE. FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 IS REVIEWED BY THE GENERAL MANAGER, BOOKKEEPER, AND TREASURER THE 990 IS AVAILABLE TO ALL MEMBERS OF THE PRIOR TO FILING THE RETURN. GOVERNING BODY FOR REVIEW UPON REQUEST. FORM 990, PART VI, SECTION C, LINE 18: THE TAX RETURN IS NOT MADE AVAILABLE TO THE GENERAL PUBLIC BUT IS AVAILABLE UPON REQUEST FOR A PARTICULAR NEED ON A CASE-BY-CASE BASIS. FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST TO MEMBERS, THE BOARD OF DIRECTORS, AND GRANTORS. LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization RENO RODEO ASSOCIATION	Employer identification number 88-0234480
FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTI	ONAL EXPENSES:
ADDED PURSE:	
PROGRAM SERVICE EXPENSES	365,300.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	365,300.
SECURITY AND CLEAN-UP:	
PROGRAM SERVICE EXPENSES	315,475.
MANAGEMENT AND GENERAL EXPENSES	18,754.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	334,229.
DONATIONS:	
PROGRAM SERVICE EXPENSES .	250,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	250,000.
ANNOUNCERS AND PERFORMERS:	
PROGRAM SERVICE EXPENSES	241,800.
MANAGEMENT AND GENERAL EXPENSES	1,238.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	243,038.
OTHER OPERATING:	
PROGRAM SERVICE EXPENSES	44,657.
732212 09-07-17	Schedule O (Form 990 or 990-EZ) (2017)

Schedule O (Form 990 or 990-EZ) (2017) Name of the organization	Page 2 Employer identification number
RENO RODEO ASSOCIATION	88-0234480
MANAGEMENT AND GENERAL EXPENSES	112,003.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	156,660.
AWARDS:	
PROGRAM SERVICE EXPENSES	47,902.
MANAGEMENT AND GENERAL EXPENSES	63,360.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	111,262.
REPAIRS AND MAINTENNANCE:	
PROGRAM SERVICE EXPENSES	102,952.
MANAGEMENT AND GENERAL EXPENSES	5,485.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	108,437.
BEDDING AND HAY:	
PROGRAM SERVICE EXPENSES	57,395.
MANAGEMENT AND GENERAL EXPENSES	1,016.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	58,411.
TAXES AND PERMITS:	
PROGRAM SERVICE EXPENSES	16,248.
MANAGEMENT AND GENERAL EXPENSES	8,201.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	24.442

Schedule O (Form 990 or 990-EZ) (2017) Name of the organization	Page 2 Employer identification number
RENO RODEO ASSOCIATION	88-0234480
MUSIC:	
PROGRAM SERVICE EXPENSES	13,450.
MANAGEMENT AND GENERAL EXPENSES	1,100.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	14,550.
TRADE:	
PROGRAM SERVICE EXPENSES	7,750.
MANAGEMENT AND GENERAL EXPENSES	3,400.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	11,150.
BAD DEBT:	
PROGRAM SERVICE EXPENSES	91.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	91.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL	A 1,677,577.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
PENALTY	-47.
990, PAGE 12, PART XII, LINE 2C	
THE FINANCE COMMITTEE IS RESPONSIBLE FOR THE ANNUAL REVIE	W OR AUDIT.
THERE HAVE BEEN NO CHANGES FROM THE PRIOR YEAR.	

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

► Go to www.irs.gov/Form990 for instructions and the latest information.

RENO RODEO ASSOCIATION

Employer identification number 88-0234480

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2017 Š × entity? Direct controlling Yes entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year Direct controlling entity End-of-year assets <u>ම</u> status (if section Public charity 501(c)(3)) Total income Exempt Code Ð section 501(C)(3) Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or Legal domicile (state or foreign country) foreign country) TEVADA CHARITABLE SCHOLARSHIPS, Primary activity Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. Name, address, and EIN (if applicable) RENO RODEO FOUNDATION - 88-0230538 Name, address, and EIN of related organization of disregarded entity 500 RYLAND STREET SUITE 200 89502 RENO, NV Part II Part

88-0234480

Page 2

Schedule R (Form 990) 2017 RENO RODEO ASSOCIATION

Part III

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

General or Percentage managing ownership Schedule R (Form 990) 2017 (i) Section 512(b)(13) controlled entity? Yes No Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. 3 Percentage ownership Yes 9 Ξ Code V-UBI amount in box n 20 of Schedule K-1 (Form 1065) Share of end-of-year assets <u>6</u> Disproportionate Yes No allocations? Ξ Share of total income Share of end-of-year assets Type of entity (C corp, S corp, or trust) **e** Share of total income $\boldsymbol{\varepsilon}$ (d)
| Direct controlling | entity Predominant income (related, unrelated, excluded from tax under sections 512-514) **e** Legal domicile (state or foreign country) 36 ত (d)
| Direct controlling | Primary activity 9 (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization 732162 09-11-17 Part IV

Page 3

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36 Part V

Ñ Schedule R (Form 990) 2017 × × × × × × × × × × × × × Yes × **1**p 9 19 ŧ Ę 무 (d) Method of determining amount involved 무 ပ္ ā = 두 ٩ 뭐 ţ ¥ = ¥ ÷ ÷ 250,000.PERCENTAGE OF NET INCOME 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? (c) Amount involved (b) Transaction type (a-s) 37 ф I Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity k Lease of facilities, equipment, or other assets from related organization(s) Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule j Lease of facilities, equipment, or other assets to related organization(s) Other transfer of cash or property from related organization(s) c Gift, grant, or capital contribution from related organization(s) Reimbursement paid by related organization(s) for expenses Reimbursement paid to related organization(s) for expenses r Other transfer of cash or property to related organization(s) b Gift, grant, or capital contribution to related organization(s) d Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) (a)
Name of related organization e Loans or loan guarantees by related organization(s) Purchase of assets from related organization(s) Exchange of assets with related organization(s) (1) RENO RODEO FOUNDATION Sale of assets to related organization(s) f Dividends from related organization(s) 732163 09-11-17 a 3 ପ୍ର € ଉ 9

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Schedule R (Form 990) 2017 RENO RODEO ASSOCIATION

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

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

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(h) (i) (j) (k) Dispropor- Dispr					Schedule R (Form 990) 2017
(h) spropor- tonate ocations?					
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(g) Share of end-of-year assets	:				
(f) Share of total					
(e) Are all partners sec 501(c)(3) Orgs 7 Yes No			 	 	
Parting 501		 		 	
(d) Predominant income presculded, unrelated, excluded from tax under sections 512-514)	<u></u>				
(c) Legal domicile (state or foreign e					
(b) Primary activity					
(a) Name, address, and EIN of entity					

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Supplemental Information.	, , , ,
Provide additional information for responses to questions on Schedule R. Se	ee instructions
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