Form **990**

(Rev January 2020)

Change of Accounting Period 2949309300703

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

OMB No 1545-0047

Open to Rublic Inspection

Depa	rtment of the	Treasury Service	,	Dono dou Gotou	rt enter social se rww.irs.gov/For	ecurity numbers of m990 for instruc	i this form as i tions and th	t may be ma ne l <mark>atest</mark> ir	ide public. I formatio r	'idal		Inspection	
A	For the 20	19 calend	lar year, or ta	x year be	ginning 7	/01 Internal			ig 9/:	30	,	2019	
В	Check if app	licable	С			Receive	d US Ban	₹÷USB		D Employe	r identific	ation number	
	Address	change	Ragtag Fi	ilm So	ciety		739			04-3	7704	11	
	Name c	hange	To Hitt 9			ALIA	2 2 4 202	0		E Telephon	e number	ſ	
	Initial re	eturn	Columbia,	MO 6	5201	AUG	3 2 4 202	.U		(573) 44	1-8504	
	Final retu	rn/terminated					0 1. •						
	Amende	ed return				Kan	sas City, N	NO		G Gross red	ceipts \$	229,	030.
	Applica	tion pending	F Name and add	dress of prir	cipal officer	desc		$\overline{}$	H(a) Is this	a group return	for subor	dınates? Yes	XNo
			Same As (Abov	e	-		かり	H(b) Are all	subordinates i attach a list	included?	uctions) Yes	∐ No
ī	Tax-exem	pt status:	X 501(c)(3)	501(c)	()◀	(insert no)	4947(a)(1) or	627	,	GREEN G NO	(500	uouo,	
J	Website	e: ► ra	gtagcinem	a.org					H(c) Group	exemption nur	nber 🟲		
K	Form of o	rganization	X Corporation	Trust	Association	. Other ►	L,	ear of format	on 200	3 M st	ate of leg	al domicile MO	
Pa	rtil S	Summar	у							_			
	1 Brie	fly describ	oe the organiz	ation's m	ission or mo:	st significant ac	tivities. Se	e_Sche	dule_O				
စ္တ							t		_ 				
ali		. .											
Governance	2 Ch	Check this box ►											
õ						/ (Part VI, line		osea oi iii	ore man z		3	z(S	13
∘ಶ	4 Nur	nber of in	dependent vot	ing mem	bers of the g	overning body	Part VI, line	e 1b)	11	~	4		13
ies						year 2019 (Pa			V	\	5		0
Activities	6 Tot	al number	of volunteers	(estimat	e if necessary	/)			'	J [6	_1	,000
Ą	1					column (C), lin					7a		<u>0.</u>
	b Net	unrelated	business taxa	able inco	me from Forn	n 990-T, line 39)				7b		0.
										rior Year		Current Ye	
<u> </u>	F		and grants (F							L,749,1			250.
en C	1	-	rice revenue (f			4 and 7d)				1,191, <u>6</u> 9,4			441. 215.
Revenue			icome (Part V			8c, 9c, 10c, ar	nd 11e)			40,7			$\frac{215.}{319.}$
_						ual Part VIII, co		ne 12)		2,991,0			587.
						n (A), lines 1-3			<u> </u>	36,5			
			to or for mem				,			30,0			
						(Part IX, colur	nn (A). lines	5-10)	-	840,4	51.	212.	581.
es			fundraising fe				` ''	•		<u> </u>			
Expenses			_					2 677					
핓	1		sing expenses					3,677.		3 1 7 F	<u> </u>	170	070
	1	-	es (Part IX, c				\ line 25\			$\frac{2,117,5}{2,004}$			078.
			es Add lines Lexpenses. Si			t IX, column (A	i), lifte 25)			2,994,5		-157,	<u>659.</u>
_		venue less	expenses. St	JDII act III	le 16 HOIII III	16 12			Pograpii	-3,5 ng of Current		End of Yea	
ts or	20 Tot	al accete	(Part X, line 1	6)					beginni	907,5			782.
Assets	20 Tot		s (Part X, line							126,4			384.
Net /			fund balance	•	et line 21 fro	m line 20				781,1		•	398.
,	<u>'</u>		e Block	5 3000	ict iine 21 iio	III line 20				701,1	14.	021,	330.
				vaminad thi	c return uncluding	accompanying sch	adules and state	ments and to	the best of n	ny knowledge	and helief	f it is true correct	and
com	plete Declar	ation of prepa	rer (other than offi	cer) is base	d on all information	accompanying schoon of which preparer	has any knowle	dge	THE BEST OF IT	ny kilowicago	J.110 DO.1101	, 1013 11 110, 00,11 1101,	uu
	-	N /	110	> /						8/17/	2021)	
Si	an	Signatu	re of officer						Da	ate /			
He		Bar	bie Banks)				Dire	ctor			
_		Type or	print name and til	te									
		Print/Type p	preparer's name		Preparer's	100	1_	Date	101	Check	lf P	TIN	
Pa	id	Jack I	E Beard J	r., CE	PA Jack	E Beard J	r., CPA	10/10	120	self-employe	d P	00436641	
Pr	eparer	Firm's name			ehmer, L	.L.C		τ					
	e Only	Firm's addre	ess Dne I	East B	roadway	- Suite C	-2			Firm's EIN	<u>43-</u>	1756587	
					MO 65203					Phone no	(573) 442-842	7
Ma	v the IRS	discuss th				bove? (see ins	tructions)					X Yes	No

Forn	1 990 (2019)		-37704	11	٩	age 2
Par		ement of Program Service Accomplishments				
	Chec	k if Schedule O contains a response or note to any line in this Part III				X
1	Briefly desci	ribe the organization's mission				
	See Sche	edule 0				
2	•	nization undertake any significant program services during the year which were not listed on the prior		.,		
	Form 990 or			Yes	X	No
_		cribe these new services on Schedule O	,	V	Ę.	NI -
3	•	anization cease conducting, or make significant changes in how it conducts, any program services	·′ ⊔	Yes	X	No
_		cribe these changes on Schedule O				
4	Section 501	e organization's program service accomplishments for each of its three largest program services, (c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to e, if any, for each program service reported	as measur others, the	total e	expens	ses ses,
4 8	(Code) (Expenses \$ 188,938. including grants of \$) (Reven	ue \$	3	32,92	24.)
		lse film festival				
						
41) (Expenses \$ 118,624. Including grants of \$) (Reventioning)) (Reventioning)))), and sponsoring public a, Missouri.				17.) _in_
4	c (Code) (Expenses \$ including grants of \$) (Rever	ue \$)
4	d Other progr	am services (Describe on Schedule O)				
	(Expenses)	
4		am service expenses ► 307, 562				

TEEA0102L 07/31/19

Form **990** (2019)

¢`

5

BAA

Form 990 (2019) Ragtag Film Society
Rant W | 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in 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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D. Part VI	11 a	Х	
t	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.	11 b	Х	
C	: 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	11 c		Х
c	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	11 d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
t	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ł	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
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		х
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		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes.' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	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		х
			. 000	(2010)

Pan IV	Checklist	of Required Scho	edules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		_X_
24 8	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25a	24a		х
!	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		<u> </u>
ĺ	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b	-	<u>x</u>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
	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, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		Х
	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		X
	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes, complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	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		Х
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		x
38	Note: All Form 990 filers are required to complete Schedule Q	38	Х	
Pē	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	-	Yes	No
1	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	_		
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
BA	(gambling) winnings to prize winners? TEEA0104L 07/31/19	Forn	L	(2019)
	•		'	、 · -/

X

Х

Form **990** (2019)

15

16

04-3770411 Form 990 (2019) Ragtag Film Society Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-2 a ments, 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, did the organization file all required federal employment tax returns? 2 b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3 a 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O 3 b 4 a 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)? Х 4 a b If 'Yes,' enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) X 5 a 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\overline{\mathbf{X}}$ b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were 6 b not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and 7 a services provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file X 7[°]C Form 8282? d If 'Yes,' indicate the number of Forms 8282 filed during the year X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring ژئوپەر ^م 8 organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 9 a a Did the sponsoring organization make any taxable distributions under section 4966? 9 b b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10 a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources 11 b against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13c c Enter the amount of reserves on hand _14a_Did_the_organization_receive any payments for indoor tanning services during the tax year? 14 a Х b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O 14b

excess parachute payment(s) during the year? If 'Yes,' see instructions and file Form 4720, Schedule N

If 'Yes,' complete Form 4720, Schedule O

15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

	in the state of th			
Par	Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b be a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	elow, iges c	and n	for
	Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1 a	Inter the number of voting members of the governing body at the end of the tax year of 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 on Schedule O			
t	Enter the number of voting members included on line 1a, above, who are independent 1b 13			
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, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7 a	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7 a		Х
t	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
-	a The governing body?	8 a	<u> X</u>	<u> </u>
	b Each committee with authority to act on behalf of the governing body?	8 b	X	
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 on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu		T
10	Did the accompation have level aboutors broughes or officiates?	10.0	Yes	No X
	a Did the organization have local chapters, branches, or affiliates?	10 a		_ A
	b 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?	10 ь		1
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11 a	X	Sealer de
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X	(MARKET SA)
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	X	•
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done See Schedule O	12 c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official See Schedule O	15 a	X	
Į	b Other officers or key employees of the organization	15 b	francoitta e vit	X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)			
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	(1584)44	X
	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 exempt status with respect to such arrangements?	16 b	é	数.
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			<u> </u>
18	available for public inspection Indicate how you made these available. Check all that apply	501(c)(3)s or	nly) ¯
		labla 4-		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements avail the public during the tax year See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records	iable to		
20	Teremy Brown 10 Hitt Street Columbia MO 65201 (573) 441-8504			

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

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

- 1 a 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

See instructions for the order in which to list the persons above

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

oried this box in ficture, the digulation field any in		Ī		(C)			٦			
(A) Name and title	(B) Average hours per	thar	n one s both dire	box, an o ector/	unles officer truste		n	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Shon Aguero	0.46							-		
President	0	X		X				0.	0.	0.
(2) Paul Sturtz	36.92	ļ						-		
Director	0	X						0.	0.	0.
(3) Nikki Krawitz	0.92	1								
Director	0	X					_	0.	0.	0.
(4) Ron Rottinghaus	0.69]				
Ex-Officio	0	X			<u></u>			0.	0.	0.
(5) Linda Butterfield Cupp	3.46_					1				
Director	0	Х	Ш		ļ	L		0.	0.	0.
(6) Gary Oxenhandler	0.46	ļ						·		
Director	0	Х				ļ ļ.		0.	0.	0.
<pre>O Charles Nilon</pre>	0.46]								
Vice President	0	X	Ш	X				0.	0.	0.
(8) Jeremy Root	3.46		1			1 1				
Past-President	0	X		Х				0.	0.	0.
(9) Jeremy Brown	40				ł					
Executive Dir.	0	X						0.	0.	0.
(10) Brian Booton	0.92	ļ								
Director	0	X				\perp		0.	0.	0.
(11) Carol Hurt	0.46]								
Director	0	X	L					0.	0.	0.
(12) Michael Lefebvre	4.62									
Treasurer	0	X		Х	<u> </u>			0.	0.	0.
(13) Betsy Garrett	0.46									
Director	0	Χ.	1_		<u> </u>	\perp		0.	0.	0.
(14) Sheri-Marie Harrison	0.92									
Director	0	X			<u> </u>			0.	0.	0.
RAA	TEFAN	1071	07/3	1/19						Form 990 (2019)

Partivil Section A. Officers, Directors, Tru	ustees, l	Key	En	ıplo	oye	es,	and	Highest Con	pensated Emp	loyees (continued)
	(B)			•	C)					
(A)	Average	age (do not che				e than	one	(D)	(E)	(F)
Name and title	hours	box, unless person is officer and a director/					h an	Reportable compensation from	Reportable compensation from	Estimated amount
	week							the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	of other compensation from
	hours	or director	鲁	Officer	ey e	ig g	ĬŢ.	(***21033********************************	(14-2/1033-141100)	the organization and related
	related organiza	ecto	톃	14	夏	st co	욕			organizations
	- tions below	or director	불		Key employee) mg				
	dotted	8	nstitutional trustee		"	Highest compensated employee				
		ì	1"			g	}			
(15)	<u> </u>		ļ			<u> </u>				
	1 									
(16)										
	1					1	l			
(17)		1								
	1 -	1								
(18)										
	1									
(19)										
			<u> </u>							
(20)										
				<u> </u>	<u> </u>	ļ	ļ			
(21)	 					1				
		<u> </u>	<u> </u>	ļ	_		<u> </u>			
(22)		1								
	 -	+			<u> </u>	<u> </u>	 			
(23)		-		Ì						
(0.1)	-	+	ļ	<u> </u>	\vdash	┼	-			
(24)		-				l				
(25)	 	+	┿	├	1	┼				
(25)		1								
1 b Subtotal	<u> </u>		L	I		Т	—	0.	0.	0.
c Total from continuation sheets to Part VII, Secti	ion A						•	0.	0.	0.
d Total (add lines 1b and 1c)							•	0.	0.	0.
Total number of individuals (including but not limited	to those	listed	abo	ve)	who	rece	ved			
from the organization ► 0				·					·	
										Yes No
3 Did the organization list any former officer, direct	ctor, truste	ee. k	ev e	mpl	love	e. or	hial	hest compensated	d employee	
on line 1a ⁹ If 'Yes,' complete Schedule J for suc	ch individi	ual	-, -		-,-	-,				3 X
4 For any individual listed on line 1a, is the sum of	f reportab	ole co	omp	ensa	atior	n and	oth	ner compensation	from	
the organization and related organizations great	er than \$	150,0	در00(lf "	Yes,	' con	nple	ete Schedule J for		4 X
such individual			٠,					4		A
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Ye	ie compei s.' comple	nsatio ete S	on t che	rom <i>dule</i>	any J fo	unre or su	elate ch c	ed organization or person	individuai	5 X
Section B. Independent Contractors	-,,									
Complete this table for your five highest comper	nsated ind	leper	nder	ıt co	ntra	ctors	s tha	at received more	han \$100,000 of	-
compensation from the organization Report compensation	nsation for	the c	aler	ndar	yea	r end	ing v	with or within the or	rganization's tax yea	
(A) Name and business add	dress							Description	of services	(C) Compensation
										· · · · · · · · · · · · · · · · · ·
						_				
								 		
2 Total number of independent contractors (including	but not lim	nted 1	to th	ose	liste	d abo	ove)	who received more	than than	
\$100,000 of compensation from the organization				-			,			
									K	

		Check if Schedul	e O	contains	a resp	oonse or note to an	y line in this Part V	/ 111		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts		Federated campaig	ns'		1 a					
ara our		Membership dues			1 b	26,668.	F 18 18 18 18 18 18 18 18 18 18 18 18 18			
§, €		Fundraising events.			1 c					
ia Giff	ı	Related organizatio			1 d			12.1		
Contributions, Gifts, Grants and Other Similar Amounts		Government grants (cont All other contributions, g			1 e	3,000.				从 自己,这是
rtio	'	similar amounts not incl			1 f	69,582.				
년 된	g	Noncash contributions in								
on d	١.	lines 1a-1f I Total. Add lines 1a-	1 <i>f</i>		1 g		00 350			70.0
<u>0 8</u>	n	Total. Add lines Ta	-11	 -		Business Code	99,250.	9 ALC: 31 AC		
Ž	2 2	Ticket Sales	,			711110	118,229.	118,229.	TOTAL STREET STREET STREET STREET	Met Anna Maria Santa Maria
Program Service Revenue		Miscellaneou		 income		711110	4,822.	4,822.		
Se	0			Tircomc		711110	1,390.	1,390.		
ēΞ	d					, , ,		,		
SE	e	. 								
gra	´f	All other program s	ervi	ce revenu	ie 			··		
Pro] g	Total. Add lines 2a	-2f			>	124,441.	4.5		
	3	Investment income (inclu	ding divid	ends,	interest, and	_			
		other similar amou					2,211.			2,211
	4	Income from invest	tmen	it of tax-e	exemp	t bond proceeds				
	5	Royalties				*	Proper scarrey) and property and	(b) <90000 923** Y 3 ***Coper**	T C ART WATER AT WINDS AND A	TESA DICAMANSIAN TRAMA
	_ ا	O		(i) F		(ii) Personal				
		Gross rents	6a 6b		580	'. 		ing the second	1	10 B
	l .	Less rental expenses						derministration (1975)	aromomentum II. Indicatoria	
		Rental income or (loss)	$\overline{}$		580				Total Assistantial miles in the contract of th	A Street of the Continue of th
		Net rental income of	טו (ונ	(i) Seci	urities	(ii) Other	580.	580.		
	7 a	Gross amount from sales of assets		(1) 300		(ii) Guici				
		other than inventory	7 a		4	,				
	t	Less: cost or other basis and sales expenses 7b								
		: Gain or (loss)	7c		Δ					
		Net gain or (loss)		l		<u> </u>	4	4.	// 1. 19/48500-12/10 · 2/10/10/00	h 8671 2 52 38 ways 6 - 6 7 c 08
4	ō.	Gross income from fund	raicin	a avente		,				
ž	Q Z	(not including \$	וווריוו	ij evenir			Parties 113			3.00
Ş		of contributions reported	d on li	ne 1c).	_					
æ	Ì	See Part IV, line 18			8	la				
Other Revenu	l t	Less: direct expens	ses		8	ВЬ				
ᅙ	(: Net income or (loss	s) fro	om fundra	aising	events •	•			•
	9 8	Gross income from game See Part IV, line 19	ing ac	tivities.					NEW SAME	
	ı				_)a		100		
	1	Less direct expens			_	ь	BAR SHALL STATE OF ST		100 m	
	9	: Net income or (los:	s) fro	om gamır	ng acti	vities •	·		10.7947.0003.0002.0042.0042.004	Free Committee C
	10 a	a Gross sales of inventory returns and allowances	, less				AND THE STATE OF	2.2		
	1					Da 2,544.				
	1	Less: cost of goods				3,443.	• 000		: : : : : : : : : : : : : : : : : : :	
	 	Net income or (loss	a) II (Jili Sales	01 1/10	Business Code	-899.			-899
Miscellaneous Revenue	11 8	<u> </u>					Make 2 March Control C	19-19-19-19-19-19-19-19-19-19-19-19-19-1		C SAFETTERS NATURAL STREET, ST
scellaneo Revenue		- 	- -					<u> </u>		
		· ;						<u> </u>		
Sce	,	All other revenue						 	 	
Ξ̈́		Total. Add lines 11	a-11	d		•				
		Total revenue Sec				· · · · · · · · · · · · · · · · · · ·	225 507	125 025	O CONTRACTOR OF THE CONTRACTOR	1 212

Form 990 (2019) Ragtag Film Society Part X Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a r			p.o.co co.armi (r i)	T
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
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			保禁证法: 道	
5	Compensation of current officers, directors, trustees, and key employees	32,660.	25,052.	7,608.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	161,100.	139,930.	21,170.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				,
9	Other employee benefits	4,486.	2,472	2,014.	
10	Payroll taxes	14,335.	12,199.	2,136.	
11	Fees for services (nonemployees)				
ā	a Management				
t	Legal				
(: Accounting	2,836.	456.	2,380.	
	i Lobbying			one tropheconomic traction of a Manufaction, State	
	Professional fundraising services See Part IV, line 17				
g	investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion	14,979. 5,001.	14,354. 2,025.	500. 2,976.	125.
13	Office expenses	3,001.	2,025.	2,310.	
14	Information technology			-	
15	Royalties.				
16	Occupancy	34,915.	29,535.	5,380.	
17	Travel	12,560.	8,794.	2,935.	831.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	12,000.		2,300.	331.
19 20	Conferences, conventions, and meetings Interest				
21	Payments to affiliates	-			
22	Depreciation, depletion, and amortization	7,309.	3,112.	4,197.	
23	Insurance	6,307.	921.	5,386.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e.	The state of the s	And the second of the second o		
	expenses on Schedule O)				
	Film_rental	54,150.	51,429.		2,721.
	b Equipment_expense	10,617.	4,641.	5,976.	
	<u> Food_and_Beverages</u>	9,470.	9,337.	133.	
	d Credit Cards Fees	6,189.	2,124.	4,065.	
,	e All other expenses	5,745.	1,181.	4,564.	2 (77
_25	Total functional expenses. Add lines 1 through 24e	382,659.	307,562.	71,420.	3,677.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if following SOP 98-2 (ASC 958-720).				
BAA		TEEA0110L 07	7/21/10	L	Form 990 (2019)

På	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				
$\overline{}$	1	Cash - non-interest-bearing	-			1					
	2	Savings and temporary cash investments			203,274.	2	225,230.				
	3	Pledges and grants receivable, net			203,274.	3	223,230.				
	4	Accounts receivable, net			177,961.	4	52,772.				
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe	l contr	cer, director, ibutor, or 35%		. 1.4. 5					
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), and persons described in section	· ·		6						
	7	Notes and loans receivable, net			7						
ts	8	Inventories for sale or use			14,409.	8	14,409.				
Assets	9	Prepaid expenses and deferred charges		19,699.	9	12,843.					
As	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1,0 a	575,146.							
	b	Less accumulated depreciation	10b	475,518.	106,937.	10 c	99,628.				
	11	Investments - publicly traded securities.		11							
	12,	Investments - other securities See Part IV, line 11		385,129.	12	390,640.					
	13	Investments - program-related See Part IV, line 11		13							
	14	Intangible assets		14							
	15	Other assets See Part IV, line 11	180.	15	260.						
	16	Total assets. Add lines 1 through 15 (must equal line	33)		907,589.	16	795,782.				
_	17	Accounts payable and accrued expenses			110,955.	17	120,507.				
	18	Grants payable	to the state of th								
	19	Deferred revenue			15,462.	19	47,877.				
	20	Tax-exempt bond liabilities				20					
es	21	Escrow or custodial account liability Complete Part			kain da kanara k	21	A salest an in the salest and a				
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contrib controlled entity or family member of any of these pe	utor, o	director, trustee, ir 35%		22					
	23	Secured mortgages and notes payable to unrelated the	hird pa	arties		23					
	24	Unsecured notes and loans payable to unrelated third	d partie	es		24					
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24) Com	es to r iplete	elated third parties, Part X of Schedule D		25					
	26	Total liabilities. Add lines 17 through 25			126,417.	26	168,384.				
(0)		Organizations that follow FASB ASC 958, check here	e -	X							
ᅙ		and complete lines 27, 28, 32, and 33.			EXPLICATE THE PROPERTY OF	1 3					
<u>a</u>	27	Net assets without donor restrictions			755,802.	27	602,028.				
Fund Balances	28	Net assets with donor restrictions	25,370.	28	25,370.						
Ĕ		Organizations that do not follow FASB ASC 958, che	ck he	re ► Ü							
Ē,		and complete lines 29 through 33.		•	MARKET STEELS	Fresh					
Net Assets or	29	Capital stock or trust principal, or current funds				29	-				
8	30	Paid-in or capital surplus, or land, building, or equipment			30						
As	31	Retained earnings, endowment, accumulated income	, or ot	riei iurius	701 170	31	607 300				
et	32	Total net assets or fund balances			781,172.	32	627,398.				
Z	33	Total liabilities and net assets/fund balances			907,589.	33	795,782.				

Forn	1990 (2019) Ragtag Film Society	<u>04-3770411</u>	Pa	age 12				
Pai	tIXI■ Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI	··		$\perp \perp$				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	225,	<u>587.</u>				
2	Total expenses (must equal Part IX, column (A), line 25)	2	382,	<u>659.</u>				
3	Revenue less expenses Subtract line 2 from line 1	3	-157,	072.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	781,	172.				
5	Net unrealized gains (losses) on investments	5	3,	298.				
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9		0.				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	627,	398				
IPā	tiXIII Financial Statements and Reporting		021/	550.				
1.20	····							
	Check if Schedule O contains a response or note to any line in this Part XII		Yes	No				
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		Tes I					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O							
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or re separate basis, consolidated basis, or both	viewed on a						
	Separate basis Consolidated basis Both consolidated and separate basis							
	b Were the organization's financial statements audited by an independent accountant?		2 b X					
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a s	eparate						
	basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis							
,	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2 c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O							
3	3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?							
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require or audits, explain why on Schedule O and describe any steps taken to undergo such audits	d audit	3 b					
BA/	777.000		Form 990	(2019)				

,

•

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Opento Rublica Unspection

Name o	f the	organization					Employer identifica	tion number
Rag	ta	g Film Society					04-377041	
Part	1	Reason for Public Cha	rity Status (All or	ganizations must c	omple	te this	part.) See instruct	ions.
The c	rga	nization is not a private found	ation because it is. (F	for lines 1 through 12,	check o	nly one	box)	Γ
1	Ц	A church, convention of churche	•		•		i).	19
2	Ц	A school described in section 1		•				1)1
3	Ц	A hospital or a cooperative hi						
4		A medical research organizat	ion operated in conju	nction with a hospital o	lescribe	d in sec	tion 170(b)(1)(A)(iii). E	nter the hospital's
_		name, city, and state						
5		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)						
6		A federal, state, or local gove	ernment or governme	ntal unit described in s	ection 1	70(b)(1)	(A)(v).	
7		An organization that normally rein section 170(b)(1)(A)(vi).	eceives a substantial pa Complete Part II)	art of its support from a g	governm	ental uni	t or from the general pub	lic described
8	L	A community trust described	ın section 170(b)(1)(A	A)(vi). (Complete Part I	1)			
9		An agricultural research organiz or university or a non-land-gran university	zation described in sec it college of agriculture	tion 170(b)(1)(A)(ix) opera (see instructions) Enter	ated in ca the nam	onjunctione, city, a	on with a land-grant colle and state of the college c	ge r
10	X	An organization that normally refrom activities related to its e investment income and unrel June 30, 1975 See section 5	xempt functions—sub ated business taxable	ject to certain exception in the income (less section in the income)	ns. and	(2) no r	more than 33-1/3% of it	ts support from gross
11		An organization organized ar			ety See	section	1 509(a)(4).	
12		An organization organized an or more publicly supported of lines 12a through 12d that de	rganizations describe	d in section 509(a)(1) o	r sectio	n 509(a))(2). See section 509(a)	ut the purposes of one (X3). Check the box in
а		Type I. A supporting organization organization(s) the power to recomplete Part IV. Sections A	on operated, supervised gularly appoint or elect	d, or controlled by its sup	ported o	rganizati	ion(s), typically by giving	the supported on You must
b		Type II. A supporting organiz management of the supporting must complete Part IV, Secti	ation supervised or co	ontrolled in connection the same persons that co	with its ontrol or	support manage	ed organization(s), by the supported organizati	having control or on(s) You
С		Type III functionally integrated. organization(s) (see instruction	A supporting organizati	ion operated in connection	with, ar	nd functio	onally integrated with, its	supported
d		Type III non-functionally integrated The constructions) You must com	ated A supporting orga	anization operated in cor	nection	with its s	supported organization(s) t and an attentiveness	that is not requirement (see
е		Check this box if the organization on Type III non-fu	ation received a writte	en determination from t	he IRS			
f	Er	nter the number of supported	, ,	3 3	1			
		ovide the following information						
	i) N	ame of supported organization	(ii) EIN	(III) Type of organization (described on lines 1-10 above (see instructions))	organizat	s the tion listed overning nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		`
					103	110		
<u>(A)</u>		1010101011	`	····				
(B)								
(C)								
(D)								
<u>(E)</u>				10 MAL Z. L. LOUIS AND THE STATE OF THE STAT				,
Total					i,			

_	(Complete only if you checked organization fails to qualify i	the box on line 5,	7, or 8 of Part I or	if the organization	failed to qualify und	der Part III. If the	
	ion A. Public Support ndar year (or fiscal year		4.0016	() 0017	40.0010	4 > 0010	(0.7/1)
begir	ining in) 🟲	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants')	,					
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				,	<i>[</i>	
1	The value of services or facilities furnished by a governmental unit to the organization without charge			'			
4	Total. Add lines 1 through 3					/	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Cale: begi	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities	/				12	<u> </u>
13	First five years. If the Form 990 is organization, check this box and	stop here		ird, fourth, or fifth	tax year as a section	on 501(c)(3)	▶ 🗌
	tion C. Computation of Pu			11lump (f)		14	%
14 15	Public support percentage for 20 Public support percentage from	/		ne 11, column (1),	,	14	%
	33-1/3% support test—2019. If and stop here. The organization	the organization d	id not check the l	oox on line 13, an	id line 14 is 33-1/3	L	
b	33-1/3% support test—2018. If the and stop here. The organization	he organization di	d not check a box	on line 13 or 16	a, and line 15 is 3	3-1/3% or more,	check this box
17a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact	meets the 'facts-	and-circumstance	s' test, check this	s box and stop he	re. Explain in Pa	rt VI how
b	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-ar	meets the 'facts.	and-circumstance	s' test, check this	s box and stop he s	re. Explain in Pa	e 15 is 10% rt VI how the
18	Private foundation. If the organ						nstructions ►
BAA					Sc	hedule A (Form	990 or 990-EZ) 2019

TEEA0402L 07/03/19

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support								
Calend	ar year (or fiscal year beginning in)	, (a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')	942,247.	85 ⁻ 9,773.	907,308.	969,663.	99,250.	3,778,241.	
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		1,162,420.			120,773.	4,787,101.	
	Gross receipts from activities that are not an unrelated trade or business under section 513	1,033,203.	1,102,120.		272007103.	1207:70	0.	
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or						0.	
	frie value of services of facilities furnished by a governmental unit to the organization without charge						0.	
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	1,975,513.	2,022,193.	2,139,541.	2,208,072.	220,023.	8,565,342.	
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.	
c	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.	
	Public support. (Subtract line 7c from line 6)						8,565,342.	
Sect	tion B. Total Support							
Calend	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
	Amounts from line 6	1,975,513.	2,022,193.	2,139,541.	2,208,072.	220,023.	8,565,342.	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	3,110.	5,210.	6,851.	9,603.	2,320.	<u>27,094.</u> 0.	
С	Add lines 10a and 10b	3,110.	5,210.	6,851.	9,603.	2,320.	27,094.	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0.	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						. 0.	
	Total support. (Add lines 9, 10c, 11, and 12)		2,027,403.			222,343.	8,592,436.	
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, c	or fifth tax year as	a section 501(c)(.	▶ []	
	Bublic support percentage for 20			no 13 column 4	<u> </u>	15	00 00 9	
	Public support percentage for 20	•	•	ine 13, column (t)	''	15	99.68 %	
	Public support percentage from tion-DComputation-of-Inv					16	99.74 %	
	Investment income percentage f		_		ump (f))	17	0.32 %	
17 18	Investment income percentage i	·		=	GIIII (1 <i>))</i>	18	0.32 %	
	33-1/3% support tests—2019. If is not more than 33-1/3%, check	the organization o	did not check the	box on line 14, ar		than 33-1/3%, an	d line 17	
,	33-1/3% support tests—2018. If line 18 is not more than 33-1/3% Private foundation. If the organi	the organization of 6, check this box	lid not check a bo and stop here. Th	ox on line 14 or lin le organization qu	ne 19a, and line 1 Jalifies as a public	6 is more than 33 ly supported orga	-1/3%, and	
	are reasonable in the organi			,				

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.)

Section A. All Supporting Organizations

- 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
- 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)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below
- **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
- c 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
- 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
- **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
- c 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
- 5a 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)
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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)
- 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)
- 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
- **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**
- 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
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding eertain-Type-II-supporting-organizations, and all Type-III_non_functionally integrated supporting organizations)? If 'Yes, answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		<u>, </u>	
	21.64	Yes	No
	1		
	競技	%(7) (8)	
		*	
Ī	2		
ŀ	\$ 44.64		
ļ	3a	Ll	
Ī	(FF) [27]		
ĺ	in a		
-	3b		
}	200 S	Comment.	1. 20%
	<u> </u>		100
	3c	L .	
Ì	16 (5)		1
Ì	4a		التشتينين
ļ	. ¥* 2.5	1. 500 m	y i sesti
ŀ	gry i		4, 4%
	4b		
	£ 4.	25 15 15 15 15 15 15 15 15 15 15 15 15 15	
ļ	¥0.2	1	(in the
İ	4c		
1		. ^6	a 6 a2d
			10,4
	's :		
		ستفكك	السسنا
ļ	5a		
	e11 t		, 11 TZ
	5b		
	J.J		
	5c		
	14 ·	1 3%	
	6		
	Y.		
	6		
		s appeared	F 64458
	7]
,	2.3		500
	8		
		109X.2	30.874
			1000 F
	9a		
	Page 4	经数	137233
	9b		
	90	\$5000E00	10 1 mars
			270
	9c	<u></u>	<u> </u>
	1.47		
,			445
,	70a		
			70.2
	10h		2011

Pa	IntilV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		1	
	a 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	**************************************	120.324
	b A family member of a person described in (a) above?	11b		
	c 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		<u> </u>
Se	ction 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		
	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		
Se	ction C. Type II Supporting Organizations			
	•	N	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 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 the supported organization(s)	1		
Se	ction 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 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 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 the organization maintained a close and continuous working relationship with the supported organization(s)	2		65 (1)
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 supported organizations played in this regard	3		
Se	ction E. Type III Functionally Integrated Supporting Organizations			-
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
•				
	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	ınstruc	tions)	
2	Activities Test Answer (a) and (b) below.	L wra	Yes	No
	a 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 those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
۰, ۰	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more 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		
				7 0
3	Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of			
	each of the supported organizations? Provide details in Part VI .	3a	4+ sĭ . 29£	W. 20 W.
	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		84.63

Rar 1	Type III Non-Functionally Integrated 509(a)(3) Supporting Orga Check here if the organization satisfied the Integral Part Test as a qualifying trusinstructions. All other Type III non-functionally integrated supporting organization	t on N	lov 20, 1970 (explain in	Part VI) See through E
Sec	tion 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		
Sec	tion 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		·
t	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	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		
Sec	tion C — Distributable Amount	<u> </u>		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		3	医生生物 经基础协会	
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 emergency temporary reduction (see instructions)	6		<u>-</u>
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions)	egrate	ed Type III supporting org	ganization
BAA			Schedule A (Fo	orm 990 or 990-EZ) 2019

Par	Type III Non-Functionally Integrated 509(a)(3) Si	upporting Organizat	ions (continued)	
Sec	tion D — Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	ırposes		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	of supported organizations	,	ч
3	Administrative expenses paid to accomplish exempt purposes of s	upported organizations	· · · · · · · · · · · · · · · · · · ·	
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	,		
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization ${\bf Part\ VI}$). See instructions	ion is responsive (provide o	details	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required — explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
ь	From 2015	իման անագրագրեր այր արդանում և այր ինն		Jude To work with the state of
C	From 2016			
d	From 2017			
e	From 2018	allige international alignment of the second and an international and a second and a second and a second and a	out to a standarding during and the standard of the standard o	Agginganini muminanga (* 44 - sanganhunda m sanganininin o mangan se * * sanganhundan m
	f Total of lines 3a through e		3.00	
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount	Man Andrews		1
i	Carryover from 2014 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2019 from Section D,		minor thinks a second to the second	Mark Super.
	line 7 \$		was Indiagramman state of	Judiono a valentina :
	Applied to underdistributions of prior years	PARTIES FOR STANKE		
	Applied to 2019 distributable amount Remainder Subtract lines 4a and 4b from 4		TO COMPANY TO SERVE AND THE SE	
				CONTRACTOR OF THE CONTRACTOR O
5	Remaining underdistributions for years prior to 2019, 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 2019 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7	Excess distributions carryover to 2020. Add lines 3j and 4c			
8	Breakdown of line 7			Park State
a	Excess from 2015		CASE AND THE ACTION	
	Excess from 2016		G S A A Sile	Contact March
	Excess from 2017			
	Excess from 2018		第一次	
_	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

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.)

SCHEDULE D (Form 990)

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.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Ragtag Film Society 04-3770411 Partil 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 1 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 No are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit? Yes Partill 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 (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements. 2 a **b** Total acreage restricted by conservation easements 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No 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 7 **-**\$ 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 Partille Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under FASB 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 FASB 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 ► S (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 FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X **►** \$

Part{ Organizations Waintai	ning Collection	s of Art, Histor	icai Treasures, o	r Other Similar Ass	ets (co	วทแทน	ieu)
Using the organization's acquisition items (check all that apply)	, accession, and other	r records, check any	of the following that n	nake significant use of its	collection	n	
a Public exhibition		d Loan or	exchange program				
b Scholarly research		e Other					. <u>-</u>
c Preservation for future generation	ations						
4 Provide a description of the organiz Part XIII	ation's collections an	d explain how they f	urther the organization	's exempt purpose in			
5 During the year, did the organiza to be sold to raise funds rather th	nan to be maintaine	d as part of the org	janization's collectior	17	Yes		No
Partiva Escrow and Custodia line 9, or reported an	Arrangements amount on Form	. Complete if the 1990, Part X, Ii	e organization ar ne 21.	nswered 'Yes' on Fo	rm 990), Par 	t Ⅳ,
1 a Is the organization an agent, trus on Form 990, Part X?				ner assets not included	Yes	[No
b If 'Yes,' explain the arrangement	in Part XIII and cor	nplete the following	g table.				
A							
c Beginning balance				1 c			
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				1 f			
2 a Did the organization include an a	mount on Form 990), Part X, line 21, fo	or escrow or custodia	al account liability?	Yes		No
b If 'Yes,' explain the arrangement	ın Part XIII Check	here if the explana	ition has been provid	ed on Part XIII	_	ſ	٦
							_
Part V Endowment Funds. C	omplete if the o	rganization ans	wered 'Yes' on F	orm 990, Part IV, lı	ne 10.		
	(a) Current year	(b) Prior year	(c) Two years bad			Four year	rs back
1 a Beginning of year balance	290,811	. 247,31	3. 196,43	30. 157,062		90,	,029.
b Contributions		21,00					,750.
						<u>·</u>	
c Net investment earnings, gains, and losses	4,658	. 22,49	8. 15,63	33. 16,118	-	8,	,283.
d Grants or scholarships							
e Other expenditures for facilities and programs				0	-		
f Administrative expenses	005 460	000 01	1 047 33	106 120	+	1.57	0.60
g End of year balance	295,469				ᆚ	15/,	<u>,062.</u>
2 Provide the estimated percentage			ig, column (a)) neic	ı as			
a Board designated or quasi-endowm		<u>00.00</u> %					
b Permanent endowment	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~						
c Term endowment	%						
The percentages on lines 2a, 2b, a			- 1-14 4 - 4	. d for a bloo			
3 a Are there endowment funds not in to organization by:	ne possession of the	organization that ar	e neid and administere	ed for the	ſ	Yes	No
(i) Unrelated organizations					3a(i)		Х
(ii) Related organizations					3a(ii)		X
b If 'Yes' on line 3a(ii), are the rela	ated organizations li	sted as required or	Schedule R?		3b		
4 Describe in Part XIII the intended	•	-		rt XIII	55		Л
		Zation's endowiner	it lulius See Fa.	IC VIII			
Partivii Land, Buildings, and Complete if the organ		d 'Yes' on Form	ı 990, Part IV, lın	e 11a. See Form 99	30, Par	t X, lı	ne 10.
Description of property	(a) Co	st or other basis investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) [Book v	alue
1 a Land.							
b Buildings.							
c Leasehold improvements.			86,828.	45,515.		41	,313.
d Equipment			369,218.	346,483.	-		,735.
e Other	-		119,100.	83,520.			, 580.
Total. Add lines 1a through 1e (Colum	nn (d) must equal F	orm 990 Part X co		03,320.			, 628.
BAA	in (a) mast equal i	J 550, 1 arc 71, 00	(2), 1110 100.)	Schei	dule D (F		
					VI		-,

(a) Description of security or category (including name of security)	(b) Book value	(c)	Method of	valuation: Co:	st or end-	of-year market value
(1) Financial derivatives					_	
(2) Closely held equity interests						
(3) Other Vanguard	281,320.	End of	Year	Market	Valu	e
(A) Landmark	109,320.	End of	Year	Market	Valu	e
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)		_				
(I)						
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	390,640.	<u></u>		 		
PartWIIII Investments – Program Related. Complete if the organization answered	'Ves' on Form 99	0 Part IV	N/A	1c See	Form (990 Part Y June 13
(a) Description of investment	(b) Book value	(c) Metho	nd of valu	iation Cos	t or end	1-of-year market value
	(b) Book Value	(c) metric	or var	3011011 005	or or orre	2 or year market value
(1)						<u> </u>
(3)						
(4)				· · · · ·		
(5)						· · · · · · · · · · · · · · · · · · ·
(6)	<u></u>					
(7)						
(8)			•			
(9)						
(10)						
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets.	N/A					
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IIX Other Assets. Complete if the organization answered	'Yes' on Form 99	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) PartilX Other Assets. Complete if the organization answered (a) Des	N/I 'Yes' on Form 99 scription	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answered (a) Dec.	'Yes' on Form 99	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15 (b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answered (a) Dec. (1) (2)	'Yes' on Form 99	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15 (b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answered (1) (2) (3)	'Yes' on Form 99	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15 (b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answered (1) (2) (3) (4)	'Yes' on Form 99	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15 (b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answered (1) (2) (3)	'Yes' on Form 99	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15 (b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IIX Other Assets. Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7)	'Yes' on Form 99	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15 (b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IIX Other Assets. Complete if the organization answered (a) December (1) (2) (3) (4) (5) (6) (7) (8)	'Yes' on Form 99	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15 (b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IIX Other Assets. Complete if the organization answered (a) Description (a) (b) (c) (a) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	'Yes' on Form 99	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15 (b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Partix Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (B) line 13) (a) Description (b) must equal Form 990, Part X, column (B) line 13) (a) Description (c) Descr	Yes' on Form 99	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15 (b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Partix Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (B) line 13) (a) Description (Column (b) must equal Form 990, Part X, column (B) line 13) (a) Description (Column (b) must equal Form 990, Part X, column (B) Total. (Column (b) must equal Form 990, Part X, column (B)	Yes' on Form 99	0, Part IV	, line 1	1d. See	Form 9	990, Part X, line 15 (b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answered (a) Description (Column (b) must equal Form 990, Part X, column (Deart X Column (b) must equal Form 990, Part X, column (Deart X Column (b) must equal Form 990, Part X, column (Deart X Column (b) must equal Form 990, Part X, column (Deart X Column (Yes' on Form 99 scription B) line 15)	0, Part IV				(b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) PartilX Other Assets. Complete if the organization answered (a) Description (b) Column (c) Column (c) must equal Form 990, Part X, column (c) PartiX Other Liabilities. Complete if the organization answered 'Yes' on F	3) line 15) orm 990, Part IV, line 1	0, Part IV				(b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Partition Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (B) line 13) (a) Description (b) must equal Form 990, Part X, column (B) Partition Complete if the organization answered 'Yes' on Factorial. (c) Description (d) Description (e) Description (a) Description (b) must equal Form 990, Part X, column (B) (c) Description (d) Description (e) Description (f) Description (g) Description (g) Description (h) Des	Yes' on Form 99 scription B) line 15)	0, Part IV				(b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Partitix Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (B) line 13) (b) (c) (a) Description (Column (b) must equal Form 990, Part X, column (B) (Column (b) must equal Form 990, Part X, column (Column (b) Federal income taxes	3) line 15) orm 990, Part IV, line 1	0, Part IV				(b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Partition Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (B) line 13) (a) Description (b) must equal Form 990, Part X, column (B) Partition Complete if the organization answered 'Yes' on Factorial. (c) Description (d) Description (e) Description (a) Description (b) must equal Form 990, Part X, column (B) (c) Description (d) Description (e) Description (f) Description (g) Description (g) Description (h) Des	3) line 15) orm 990, Part IV, line 1	0, Part IV				(b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) PartilX Other Assets. Complete if the organization answered (a) Description (Column (b) must equal Form 990, Part X, column (b) (c) (d) (d) (d) (e) (e) (e) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	3) line 15) orm 990, Part IV, line 1	0, Part IV				(b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Partition Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (B) line 13) (c) (a) Description (a) Description (a) Description (b) must equal Form 990, Part X, column (B) Partix Other Liabilities. Complete if the organization answered 'Yes' on F (c) (a) Description (c)	3) line 15) orm 990, Part IV, line 1	0, Part IV				(b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Partilix Other Assets. Complete if the organization answered (a) Description (b) Description (c)	3) line 15) orm 990, Part IV, line 1	0, Part IV				(b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) PartilX Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (b) (c) (d) (e) (f) (f) (g) (g) (g) (g) (h) (g) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h	3) line 15) orm 990, Part IV, line 1	0, Part IV				(b) Book value
(10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) PartilX Other Assets. Complete if the organization answered (a) Description (Column (b) must equal Form 990, Part X, column (b) (c) (d) (d) (d) (e) (e) (e) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	3) line 15) orm 990, Part IV, line 1	0, Part IV				(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Partilix Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (B) line 13) (c) (a) Description (d) Description (a) Description (a) Description (b) must equal Form 990, Part X, column (B) (c) Partix Other Liabilities. Complete if the organization answered 'Yes' on Financial income taxes (c) (d) Pederal income taxes (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	3) line 15) orm 990, Part IV, line 1	0, Part IV				(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13) PartilX Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (B) line 13) (c) (a) Description (d) Column (b) must equal Form 990, Part X, column (B) (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	3) line 15) orm 990, Part IV, line 1	0, Part IV				(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Partilix Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (B) line 13) (c) (a) Description (d) Description (a) Description (a) Description (b) must equal Form 990, Part X, column (B) (c) Partix Other Liabilities. Complete if the organization answered 'Yes' on Financial income taxes (c) (d) Pederal income taxes (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	3) line 15) orm 990, Part IV, line 1	0, Part IV				(b) Book value (b) Book value

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total revenue, gains, and other support per audited financial statements 232,328. 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 a a Net unrealized gains (losses) on investments. 3,298. **b** Donated services and use of facilities 2 b 2 c c Recoveries of prior year grants d Other (Describe in Part XIII) See Part XIII 2 d 3,443 e Add lines 2a through 2d 2 e 6,741. 3 Subtract line 2e from line 1 3 225,587. 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a **b** Other (Describe in Part XIII) 4 b 4 c c Add lines 4a and 4b 5 225,587. 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Raconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 386,102. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities 2 a **b** Prior year adjustments 2 b c Other losses 2 c d Other (Describe in Part XIII) See Part XIII 2 d 3,443. e Add lines 2a through 2d 2 e 3,443. 3 3 Subtract line 2e from line 1 382,659. 4 Amounts included on Form 990. Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a 4 b **b** Other (Describe in Part XIII) 4 c c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 382,659.

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

Part V, Line 4 - Intended Uses Of Endowment Fund

PartiXIII Supplemental Information.

Endowment established to assure the long-term health, vitality and sustainability of the cinema and fest; extend the community and educational outreach programs of the cinema and fest; and assure the cinema and fest remain affordable for the average Columbia resident.

Schedule D (Form 990) 2019 Ragtag Film Society Part XIII Supplemental Information (continued)	04-3770411	Page 5
Schedule D, Part XI, Line 2d Other Revenue Included In F/S But Not Included On Form 990		
Cost of goods sold	Total <u>\$</u>	3,443. 3,443.
Schedule D, Part XII, Line 2d Other Expenses And Losses Per Audited F/S		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2019

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

OMB No 1545-0047

Ragtag Film Society

Employer identification number 04-3770411

Form 990, Part I, Line 1 - Organization Mission or Significant Activities

To champion independent film and the arts in ways that stimulate and enrich downtown Columbia and all of central Missouri by presenting film as an art form; promoting media literacy, education, and new ideas; supporting local media artists; and hosting community events. Ragtag presents an annual documentary film festival that highlights the innovative work with a cinematic scope, creative takes on contemporary currents, and work that provokes dialogue about its subject and the documentary form itself.

Form 990, Part III, Line 1 - Organization Mission

To champion independent film and the arts in ways that stimulate and enrich downtown Columbia and all of central Missouri by presenting film as an art form; promoting media literacy, education, and new ideas; supporting local media artists; and hosting community events. Ragtag presents an annual documentary film festival that highlights the innovative work with a cinematic scope, creative takes on contemporary currents, and work that provokes dialogue about its subject and the documentary form itself.

Form 990, Part VI, Line 11b - Form 990 Review Process

Tax return is reviewed by board prior to filing return.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Board members are required to disclose conflicts or potential conflicts.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

Board of directors approves the executive directors salary based on salary levels in the local area.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Copy of tax return available through Guidestar.org. Copy of tax return and organizational documents also available upon request from organization.