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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.

DLN: 93493102014111 OMB No. 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

For the 2019 calendar year, or tax year beginning 09-01-2019 , and ending 08-31-2020 C Name of organization D Employer identification number B Check if applicable: HOUSTON LIVESTOCK SHOW AND RODEO INC ☐ Address change 74-1142851 % JENNIFER HAZELTON ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P.O. box if mail is not delivered to street address) Room/suite ☐ Application pending (832) 667-1000 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 79,495,764 Name and address of principal officer: H(a) Is this a group return for JENNIFER HAZELTON □Yes ☑No subordinates? 3 NRG PARK H(b) Are all subordinates HOUSTON, TX ☐ Yes ☐No included? Tax-exempt status: **✓** 501(c)(3) 4947(a)(1) or 501(c) () **◀** (insert no.) If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ▶ www.hlsr.com L Year of formation: 1932 M State of legal domicile: TX **K** Form of organization: lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other Summary 1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 425 Number of voting members of the governing body (Part VI, line 1a) . 419 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5 1,245 **6** Total number of volunteers (estimate if necessary) 6 35,000 Total unrelated business revenue from Part VIII, column (C), line 12 **7**a -435,649 **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 32,674,371 8 Contributions and grants (Part VIII, line 1h) . 45,002,271 Ravenue 104,779,044 39,686,646 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,768,388 5,730,237 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -131,931 -505,392 151,417,772 77,585,862 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 8,690,014 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 18,977,153 20,447,776 Expenses 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶8,125,538 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 106,040,891 71,016,265 133,708,058 92,359,041 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 17,709,714 -14,773,179 Revenue less expenses. Subtract line 18 from line 12 . Net Assets or Fund Balances Beginning of Current Year End of Year 367,174,438 373,631,947 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 117,073,825 130,195,542 22 Net assets or fund balances. Subtract line 21 from line 20 . 250,100,613 243,436,405

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sian

Signature of officer JENNIFER HAZELTON CFO Type or print name and title Print/Type preparer's name Preparer's signature Check \square if P00460263 self-employed Firm's name PricewaterhouseCoopers LLP Firm's EIN ▶

Paid Preparer Use Only

Firm's address ► 2001 MARKET ST SUITE 1800 Phone no. (267) 330-3000 PHILADELPHIA, PA 19103

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form 990 (2019)

☑ Yes ☐ No

Form	990 (2019)					Page 2
Pa	t III Statement	of Program Servi	ce Accomplis	hments		
	Check if Schee	dule O contains a resp	onse or note to	any line in this Part III .		🗹
1	Briefly describe the o	rganization's mission:				
SEE S	SCHEDULE O					
	Did the consciontion	dambalca anu ainnifia		vices during the year wh	iah wasa sak liakad as	
2	-	r 990-EZ?	. 3	,	nich were not listed on	☐ Yes ☑ No
	'	se new services on Sc				□ res ☑ No
3	•			changes in how it condu	cte any program	
3	services?		lake significant	changes in now it condu	cts, any program	□yes ▼No
		se changes on Schedu				L les L No
4	Describe the organiza Section 501(c)(3) and	ation's program service	e accomplishmer ons are required	to report the amount of	argest program services, as mea f grants and allocations to others	
4a	(Code:) (Expenses \$	68,576,888	including grants of \$	0) (Revenue \$	39,686,566)
	See Additional Data		, ,		, ,	, , ,
4b	(Code:) (Expenses \$	895,000	including grants of \$	895,000) (Revenue \$	0)
	See Additional Data					
4c	(Code:) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other program consis	ces (Describe in Sched	ulo O)			
+u	(Expenses \$	•	ule 0.) luding grants of	\$) (Revenue \$)
	/ I			7	, (· · · · · · · · · · · · · · · · · · ·	,

Par	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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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 2	3		No
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	Yes	
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 3	5		No
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? <i>If "Yes," complete Schedule D,</i> Part I	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		No
	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.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
	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	11f		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
	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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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		No
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
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	Yes	
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		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	20b 21	Yes	
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			0 (2019)

orm	990 (2019)			Page 4
Par	Checklist of Required Schedules (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		No
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		No
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		No
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		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	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	28 c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
4 -	Entor the number reported in Pay 2 of Form 1006. Fatar 0, if ask soulistics.		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 3,725 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c	Yes	

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Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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)? If "Yes," enter the name of the foreign country:	4a		No
E ~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 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?	5c 6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	90		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	7a	Yes	
	provided to the payor?	, a	163	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	_	No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No

	Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "N 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI								
Se	ection A. Governing Body and Management								
	February and Control of the Control	435	Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	425							
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
b	Enter the number of voting members included in line 1a, above, who are independent 1b	419							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any oth officer, director, trustee, or key employee?	er 2	Yes						
3	Did the organization delegate control over management duties customarily performed by or under the direct superv of officers, directors or trustees, or key employees to a management company or other person? .	sion 3		No					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			No					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No					
6	Did the organization have members or stockholders?	6	Yes						
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or m members of the governing body?	7a	Yes						
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		Yes	1					
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year the following:			1					
a	The governing body?	8a	Yes						
b	,,,,	. 8b	Yes						
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No					
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Rev	enue Code		NI.					
100	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate			110					
	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the state or the copy of the copy o	10b							
	form?	11a		No					
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	120	Yes						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise t	12a	res						
	conflicts?	12b	Yes						
	Schedule O how this was done	12c	Yes						
13	Did the organization have a written whistleblower policy?	13	Yes						
14	Did the organization have a written document retention and destruction policy?	14	Yes						
15	Did the process for determining compensation of the following persons include a review and approval by independer persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
	The organization's CEO, Executive Director, or top management official	15a	Yes						
b	Other officers or key employees of the organization	15b	Yes						
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
	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		No					
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participat in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exem status with respect to such arrangements?	pt							
Se	ection C. Disclosure	16b							
17	List the states with which a copy of this Form 990 is required to be filed▶								
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.								
	☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records: Note: The person who possesses the organization's books and records: Note: The person who possesses the organization's books and records: Note: The person who possesses the organization's books and records:								
				n (2019					

Name and title

Part VII

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

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

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

 \checkmark

(F)

Estimated

amount of other

compensation

from the

Reportable

compensation

from related

organizations

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

• 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, or 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) (C) (B) (D) (E)

Position (do not check more

than one box, unless person

is both an officer and a

director/trustee)

Reportable

compensation

from the

organization

Average

hours per

week (list

any hours

	for rolated							(14/ 2/1000	(1)/ 2/1000	organization and
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
See Additional Data Table										

HOUSTON, TX 77007

HOUSTON, TX 77054

TWO NRG PARK HOUSTON, TX 77054 ARAMARK FACILITY SERVICES, TWO NRG PARK

ARAMARK SPORTS AND ENTERTAINMENT,

compensation from the organization ▶ 50

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	1	//	<u></u>	-,, -							1		
(A) Name and title	(B) Average hours per week (list any hours	than o	one bo	ox, u an off	ot che unles fficer	eck moss ss pers r and a tee)	son	Rep- comp fro orga	(D) ortable ensation m the nization	(E) Reportable compensation from related organizations		(F) Estima mount of compens from t	ited f other sation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Truste	Officer	Key employee	Highest compensat employee	Former		2/1099- ISC)	(W-2/1099- MISC)		rganizati relate organiza	ed
		Stee	Trustee		₽	pensated							
See Additional Data Table													
											_		
1b Sub-Total													
c Total from continuation sheets to Pad Total (add lines 1b and 1c)	<u> </u>					>	<u>_</u>		035,155	0			758,940
2 Total number of individuals (including of reportable compensation from the			e liste	ed al	bove	e) who	rece	eived mo	ore than \$10	00,000		Yes	N.
3 Did the organization list any former of line 1a? If "Yes," complete Schedule 3	,			•		oyee, d		_	mpensated	employee on	3	res	No No
4 For any individual listed on line 1a, is organization and related organization individual										the	4	Yes	
5 Did any person listed on line 1a receive services rendered to the organization	n?If "Yes," compl								tion or indi	vidual for	5		No
Section B. Independent Contract													
Complete this table for your five high- from the organization. Report comper										's tax year.	pensa		
-	(A) and business addre	ess								(B) iption of services		(C) Compen	sation
LD SYSTEMS INC, PO BOX 10620 HOUSTON, TX 77206									AUDIO/VIDE	O SERVICES		5,	.127,235
RAY CAMMACK SHOWS INC, 4950 WEST SOUTHERN AVE LAVEEN, AZ 85339									CARNIVAL S	ERVICES		3,	.620,321
GETZ Transport Solutions LLC, 5535 Memorial Dr F260									TRANSPORT	ATION SRVCS		2,	966,369

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

FOOD SERVICES

CLEANING SERVICES

2,339,194

2,034,445

10 Telephone 10			(2019)								Page 9
Total Personal Processor Total Personal Processor Total Personal Processor Total Personal Processor Total Personal Personal Processor Total Personal Pers	Part	VIII				resno	onse or note to any	line in this Part VIII			П
Page			Check if Sched	iule	O Contains a	respo	inse of flote to any	(A)	(B) Related or exempt function	Unrelated business	Revenue excluded from tax under sections
Note Construction Construction		1a	Federated campa	igns		1a			revenue		512 - 514
Note Construction Construction	nts ints		•	_	. i		3,631,942				
Note Construction Construction	3ra nou		·		. [1c	682,101				
Note Construction Construction	S, (_		<u> </u>		<u>, </u>				
Note Construction Construction	Giff		•		<u> </u>						
Note Construction Construction	S. III.				· L						
Note Construction Construction	tio er S	and similar amounts not included above 1f					28,360,328				
Note Construction Construction	휼	و	g Noncash contributio	ns in	cluded in						
2a RODEO SMOW RECEIPT	ont of (L	1g	291,216				
2a AUDICH SHOW RECEIT 7,11300 31,685,546 32,685,6	ھ ت	'	h Total. Add lines :	la-1	f	• •	•	32,674,371			
Title Titl			DODEO CHOW DECE	D.T.			Business Code	39 686 646	39 686 646		_
F All other program service revenue. 9 Total. Add lines 2a-2f.	e)	2a	RODEO SHOW RECEI	ы			711300	33,000,010	33,000,010		
F All other program service revenue. 9 Total. Add lines 2a-2f.	enu	h									
F All other program service revenue. 9 Total. Add lines 2a-2f.	æ ≥										
## All other program service revenue.	ńce	С									
## All other program service revenue.	Ser	d									
## All other program service revenue.	ını	_	-								
## All other program service revenue.	rogr	е									
1	Δ.	f	All other program	serv	ice revenue.						
Treatment income (Including dividends, Interest, and other similar amounts) 2,725,022 -50,795 2,725,02						•	39,686,646				
4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6a Gross rents 6b 579,145 c Rental income c (ross) d Net rental income or (loss) 7a 3,054,985 (ii) Other 7a 3,054,985 (iii) Other 7a 3,054,985 d Net gain or (loss) 7b contributions reported on line 1(1) Seless cross or or other basis and sales expenses (on including \$ 463,015 or contributions reported on line 1(2) Seless cross from the form fundrasing events (on including \$ 463,015 or contributions reported on line 1(2) Seless cross from the form fundrasing events (on including \$ 463,015 or contributions reported on line 1(2) Seless cross from the form fundrasing events (on including \$ 463,015 or contributions reported on line 1(2) Seless cross from the form fundrasing events (on including \$ 463,015 or contributions reported on line 1(2) Seless cross from the form fundrasing events (on including \$ 463,015 or contributions reported on line 1(2) Seless cross from the form fundrasing events (on including \$ 463,015 or contributions reported on line 1(2) Seless cross from the form fundrasing events (on including \$ 463,015 or contributions reported on line 1(2) Seless cross from the form gaming activities. See Part IV, line 13		3]	Investment income				nterest, and other	2.675.253		F0.705	2 726 047
S Royalties (i) Real (ii) Personal			,							-50,/93	2,726,047
Comparison Com							_				
Description Companies C											
Description Companies C		63	Gross rents	62	3(04 629					
Exemplate Color				Va	31	94,038	3	_			
## Of Net rental income or (loss)			expenses	6b	5	79,145	5				
Taggress amount Taggress a		С		6c	-18	84,507	,				
Ta Gross smount Ta 3,054,985		d		or (7	-184,507	
Total color						ies	(ii) Other				
Second Price Seco		7a Gross amount from sales of 7a 3.054.98				54.985	5				
Description			assets other								
Solid State Reparties C Gain or (loss) 7c 3,054,985 3,		b		7h							
Net gain or (loss) Netgain or (70							
Net gain or (loss) Netgain or (los		C	Gain or (loss)	7c	3.0	54.985	5				
10a 10a						-		3,054,985	5		3,054,985
9a Gross income from gaming activities. See Part IV, line 19	a)	8a									
9a Gross income from gaming activities. See Part IV, line 19	Š		contributions reported	d on l	line 1c).						
9a Gross income from gaming activities. See Part IV, line 19	eve		See Part IV, line 18	٠		8a					
9a Gross income from gaming activities. See Part IV, line 19	r H										120 459
9a Gross income from gaming activities. See Part IV, line 19	the	C	: Net income or (los	5) 11	om fundralsii	ng ev	ents >	-120,430	7		-120,430
b Less: direct expenses		9a									
c Net income or (loss) from gaming activities .		l.									
10a Gross sales of inventory, less returns and allowances 10a 704,269 10b 926,495			•					_			
10a 704,269 10b 926,495			The meaning of (188	٠, ١،	om gammig a			1			
b Less: cost of goods sold		10a					704.260				
C Net income or (loss) from sales of inventory . ▶ -222,226		h				_	•				
Miscellaneous Revenue Business Code 11aCOCA-COLA SPONSORSHIP 900099 b SPONSOR OFFERS TO MEMBERS & VOLUNTEERS 900099 c 11,799 d All other revenue							<u> </u>	_	-80	-222,14 6	
b SPONSOR OFFERS TO MEMBERS & 900099 111,799 111,799 CC						TV CH					
d All other revenue		11	aCOCA-COLA SPON	ISO	RSHIP		90009	10,000		10,000	
d All other revenue											
d All other revenue ■ e Total. Add lines 11a-11d		b		ТО	MEMBERS &		90009	11,799		11,799	
d All other revenue											
e Total. Add lines 11a-11d		C	}								
e Total. Add lines 11a-11d			All								
12 Total revenue. See instructions							.				
77,585,862 39,686,566 -435,649 5,660,5						• •	•	21,799			
		12	rotal revenue. Se	ee ir	istructions .	•	• • • •	77,585,862	39,686,566	-435,649	5,660,574 Form 990 (2019)

7b, 8b, 9b, and 10b of Part VIII.

7 Other salaries and wages .

9 Other employee benefits . . .

10 Payroll taxes

11 Fees for services (non-employees):

a Management **b** Legal

12 Advertising and promotion . . .

19 Conferences, conventions, and meetings

21 Payments to affiliates

a CONTRIBUTIONS TO SHOW EXHIB.

b EQUIPMENT RENTAL & MAINT.

c FOOD AND BEVERAGE SERVICES

22 Depreciation, depletion, and amortization .

13 Office expenses . .

15 Royalties .

17 Travel .

16 Occupancy . .

23 Insurance . .

14 Information technology .

20 Interest

expenses on Schedule O.)

d ENTERTAINER EXPENSE

e All other expenses

f Investment management fees

e Professional fundraising services. See Part IV, line 17

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e

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).

g Other (If line 11g amount exceeds 10% of line 25, column

. . .

Do not include amounts reported on lines 6b,

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

3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15

4 Benefits paid to or for members Compensation of current officers, directors, trustees, and

6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)

8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)

orm 990 (2019)	Page 10
Part IX	Statement of Functional Expenses	
	Costion FO1(a)(3) and FO1(a)(4) agraphical moust complete all actions at All ather agraphications moust complete actions (A)	

X	Statement of Functional Expenses	
	Section F01(c)(2) and F01(c)(4) organizations must complete all columns. All other organizations must complete column (A)	

(A)

Total expenses

895,000

0

0

n

0

2,482,705

12,970,410

1,836,934

2,123,906

1,033,821

525,039

134,681

187,789

19,316,201

3,406,101

1,499,887

1,654,744

896,812

137,338

71,227

3,343,712

4,650,622

1,225,779

8,820,300

6,619,987

4,573,207

4,159,909

9,792,930

92,359,041

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Program service

expenses

895,000

162,193

7,646,510

1,278,191

17,236,057

2,869,489

867,436

258,938

752,153

111,461

30,199

3,343,712

4,031,122

8,820,300

6,112,026

1,899,148

3,969,009

7,241,536

69,471,888

520,590

554,390

872,428

Management and

general expenses

2,308,962

4,117,537

792,540

634,413

393,557

525,039

125,167

187.789

1,074,469

99,734

270,842

9,069

37,595

528,119

617,725

325.446

126,263

1,196,256 14,761,615

1,391,093

Fundraising

expenses

11,550

1,206,363

171,966

211,302

85,874

9,514

1,005,675

436,878

361,609

144,659

16,808

3,433

91,381

87,464

182,515

2,547,796

190,900

1,355,138

8,125,538

Form 990 (2019)

4,713

nclude amounts reported on lines 6b.	(A)		(B			(C)							(D)	
Check if Schedule O contains a response or note to any														
Section $501(c)(3)$ and $501(c)(4)$ organizations must co	. All ot	her c	rgai	nizati	ions	mu	ıst c	omp	olete	e co	lumr	(A)		

✓

Section $501(c)(3)$ and $501(c)(4)$ organizations must con	mplete all columns.	All ot	her or	ganıza	tions	mus	t con	nplete	colu	ımn	(A).	
Check if Schedule O contains a response or note to any	line in this Part IX											

Form 990 (2019)

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Assets

11

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23

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25

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 Intangible assets .

Grants payable .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Other assets. See Part IV, line 11 . . .

Tax-exempt bond liabilities . . .

Accounts payable and accrued expenses .

23,851,762

605.469

4.015.851

685.865

3,356,191

170,115,180

124,834,402

20.692.227

25,475,000

373,631,947

13,437,420

34.438.256

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0

0

22,671,628

130.195.542

243,436,405

243,436,405

373,631,947

Form 990 (2019)

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(B) End of year

Page **11**

Cash-non-interest-bearing Savings and temporary cash investments . . . Pledges and grants receivable, net . . .

Accounts receivable, net

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled Notes and loans receivable, net . . .

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). Inventories for sale or use . . Prepaid expenses and deferred charges .

10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that follow FASB ASC 958, check here <a> \square and

Unsecured notes and loans payable to unrelated third parties .

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

b Less: accumulated depreciation

10a 10b Investments—publicly traded securities .

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

Investments—other securities. See Part IV, line 11 . . .

Investments—program-related. See Part IV, line 11 .

231,731,869 61,616,689

Beginning of year

27,921,472

1,236,439

5.534.870

2,773,573

172,178,745

115,271,557

22.934.035

19,013,066

367,174,438

6,763,790

35,319,421

53,456,986

21,533,628

117.073.825

250,100,613

250,100,613

367,174,438

310.681

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> 21 22 59,648,238 23 24

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Form 990 (2019)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 74-1142851

Name: HOUSTON LIVESTOCK SHOW AND RODEO INC.

Form 990 (2019)

Form 990, Part III, Line 4a:

Overall Demographics for 2020 (includes Grounds, Season Ticket Holders, and Individual Ticket Buyers): Average Age 37, 35% male and 65% female. - Together with the HLSR Educational Fund, the Houston Livestock Show and Rodeo made an educational commitment of more than \$27 million for 2020. Premiums to exhibitors and calf scramble participants are paid from HLSR operations. Scholarships, grants and graduate assistantships are awarded through the HLSR Educational Fund. The commitment included: - \$14,286,000 in scholarships to be awarded this summer - \$8,309,250 for junior show exhibitors and calf scramble participants - \$3,746,720 in educational program grants - \$662,240 in graduate assistantships - More than 35,000 volunteers on more than 108 different committees donated their time and talent to the show, reducing expenses and assisting in the above listed program accomplishments. - The Worlds Championship Bar-B-Que Contest helped kick off the Show with 219,457 people in attendance from February 27-29. - The Houston Livestock Show and Rodeo was scheduled for March 3-22, 2020. The City of Houston ordered the Livestock Show to close on March 11, 2020 because of the continued spread of COVID-19, shortening the planned 20 day run by 12 days. This unexpected occurrence resulted in reduced revenues from operations. The extent of the impact of the COVID-19 pandemic on operational and financial performance will depend on future developments, including the duration of the outbreak and related travel advisories and restrictions, all of which are highly uncertain and cannot be predicted. - Considering the pandemic, the Houston Livestock Show and Rodeo hosted auctions online to support 2020 Junior Exhibitors. These online auctions were for pre-registered donors who would have otherwise attended these live auctions. Houston Livestock Show and Rodeo awarded more than \$9.3 million in premiums to 2020 Junior exhibitors impacted by the early closure. These premiums were possible thanks to the generosity shown during the Rodeos fi

Form 990, Part III, Line 4b: Houston Livestock Show and Rodeo makes grants to the affiliated organization Houston Livestock Show & Rodeo Educational Fund (EIN: 76-0260204) in support of approximately \$18.9 million in scholarships and educational grants awarded.

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation week (list person is both an officer compensation from the from related any hours and a director/trustee) organization organizations from the

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251,275

221,916

210,926

249,909

234,733

209,432

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89,211

96,517

83,008

29,693

21,904

37,048

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	f					,	,	(11, 2,4,000	(14) 2/1000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JOEL COWLEY President (THROUGH 5/22/20)	50.0			х				487,515	0	106,495
ANDY SLOAN	1.0 50.0					X		368,177	0	111,572
CHIEF INFORMATION OFFICER	0.0							·		·
JENNIFER HAZELTON CHIEF FINANCIAL OFFICER	50.0			x				357,724	0	85,662
SHERRY HIBBERT GENERAL COUNSEL	50.0			х				337,082	0	97,830
MICHAEL T DEMARCO	50.0									

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CHIEF FINANCIAL OFFICER
SHERRY HIBBERT
GENERAL COUNSEL
MICHAEL T DEMARCO
CHIEF SHOW OPERATIONS OFFICER

STEVE GUMERMAN

CHRIS BOLEMAN

GEORGE BAYLESS

LISA GAGNON

MANAGING DIRECTOR - IS

JILL HABENICHT CLEMENT

......

DIR; FRMR EXEC DIR TICKETS&ADIM

PRESIDENT (STARTING 05/25/20)

EXECUTIVE DIRECTOR - MARKETING

Managing Director - Entertain.

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	ally llouis			CCCC	,,, с.	usice,	,	Organización	(IV 2/4 000	- Holli the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JAMES OLIVER BLOODWORTH EXECUTIVE COMMITTEE	0.25	Х						106,466	0	0	
BRADY FARLEY CARRUTH CHAIRMAN OF THE BOARD	10.0	Х		х				0	0	0	
THOMAS JAMES BAKER III VP/DIRECTOR	5.0	Х		х				0	0	0	
LAWRENCE JOSEPH BIEDIGER VP/DIRECTOR (STARTING 6/1/20)	5.0	Х		х				0	0	0	
BRYAN JAY BLONDER VP/DIRECTOR (STARTING 6/1/20)	5.0	Х		×				0	0	0	

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LAWRENCE JOSEPH BIEDIGER
VP/DIRECTOR (STARTING 6/1/20)
BRYAN JAY BLONDER
VP/DIRECTOR (STARTING 6/1/20)

ROGER CRAIG CAMP

VP/DIRECTOR

VP/DIRECTOR

ROBERT HAMPTON CLAY

JOHN WILLIAM DAUBERT III

EDWIN ALBERT DECORA

ALAN BOYNTON FOLGER

VP/DIRECTOR (THROUGH 5/31/20)

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VP/DIRECTOR (THROUGH 5/31/20)

VP/DIRECTOR (STARTING 6/1/20)

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation person is both an officer week (list compensation from the from related and a director/trustee) any hours organization organizations from the

	formulated	L	a un			usice	′ I	(M. 2/1000	(14/ 2/1000	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
TERENCE HILLARY FONTAINE VP/DIRECTOR (THROUGH 5/31/20)	5.0	Х		х				0	0	0	
JUAN CARLOS GARCIA VP/DIRECTOR (STARTING 6/1/20)	5.0	Х		х				0	0	0	
JOHN NICHOLAS GIANNUKOS VP/DIRECTOR	5.0	Х		х				o	0	0	
JOHN CHARLES GLITHERO VP/DIRECTOR	5.0	Х		x				0	0	0	
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JOHN CHARLES GLITHERO	
VP/DIRECTOR	
ELISEO GUERRERO	Ī
VP/DIRECTOR	

WILLIAM DAVID HANNA

ALICIA B JIMERSON-KNOX

CAROL MICHELLE LILIE

ROBERT MICHAEL MOSS

EMMETT OLIN STORY JR

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VP/DIRECTOR (STARTING 6/1/20)

VP/DIRECTOR (THROUGH 5/31/20)

VP/DIRECTOR

VP/DIRECTOR

VP/DIRECTOR

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

and Independent Contractors

TILMAN JOSEPH FERTITTA

GEORGE RAYMOND HINSLEY III

EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE

WAYNE HOLLIS JR

	formulated	unu	u un	CCCC		usicc)	'	(14/ 2/1000	(14/ 2/1000	avannization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
DARIN SCOTT SULLIVAN	5.0	х		x				0	0	0	
VP/DIRECTOR (STARTING 6/1/20)	0.0			L^				Ŭ	0		
CHRIS UNDERBRINK VP/DIRECTOR	5.0	Х		х				0	0	0	
DUNCAN KNAPP UNDERWOOD VP/DIRECTOR	5.0	х		х				0	0	0	
JOSEPH TAYLOR WHITAKER	5.0	Х		Х				0	0	0	

VP/DIRECTOR	0.0	Α	^		9	3	
JOSEPH TAYLOR WHITAKER	5.0	X	X		0	0	
VP/DIRECTOR (THROUGH 5/31/20)	0.0						
TONYA LEIGH YURGENSEN-JACKS	5.0	×	X		0	C	
VP/DIRECTOR	0.0	^`	Ĺ,		0	0	L

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0.25 2.5

0.25 2.5

0.25

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VP/DIRECTOR (THROUGH 5/31/20)	0.0	^				0		
TONYA LEIGH YURGENSEN-JACKS	5.0	×	×		0	0	ſ	- 1
VP/DIRECTOR	0.0	^				0	,	_
DON ALBERT BUCKALEW	2.5							-

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VP/DIRECTOR	0.0						
DON ALBERT BUCKALEW	2.5	Y			0	0	0
EXECUTIVE COMMITTEE	0.25	^				0	0

VP/DIRECTOR	0.0						
DON ALBERT BUCKALEW	2.5						
		X			0	0	
EXECUTIVE COMMITTEE	0.25						
WARNER DEAN ERVIN	2.5						

	0.0						
DON ALBERT BUCKALEW	2.5						
		X			0	0	
EXECUTIVE COMMITTEE	0.25						
WARNER DEAN ERVIN	2.5						

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DON ALBERT BUCKALEW	2.5	×			0	0	
EXECUTIVE COMMITTEE	0.25	^				3	
WARNER DEAN ERVIN	2.5						

EXECUTIVE COMMITTEE	0.25						
WARNER DEAN ERVIN	2.5						
		X			0	0	0
EXECUTIVE COMMITTEE	0.25						

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(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation from the

	any hours		a dir	ecto		ustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JULIAN PERRY HUNNICUTT III	2.5										
EXECUTIVE COMMITTEE	0.25	Х						0	U	0	
PARKS CASE JOHNSON	2.5	Х						0	0	0	
EXECUTIVE COMMITTEE	0.25								O		
DONLEY DUARD JORDAN	2.5	Х						0	0	0	
EXECUTIVE COMMITTEE	0.25										
KELLY J LARKIN EXEC. COMMITTEE(START. 6/1/20)	0.25	Х						0	0	0	
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EXECUTIVE COMMITTEE
KELLY J LARKIN
EXEC. COMMITTEE(START. 6/1/20)
JACK ALLEN LYONS
EXECUTIVE COMMITTEE

......

PATRICIA MANN PHILLIPS

EDWARD WINSTON MCMAHON

HUGH CHRISTIAN RICHARDSON

CHARLES RAYMOND ROBINSON

EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE

EXECUTIVE COMMITTEE

WESLEY EDWARD SINOR

EXECUTIVE COMMITTEE

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

and Independent Contractors

EXECUTIVE COMMITTEE

EXEC. COMM. (THROUGH 7/19/20)

...... EXECUTIVE COMMITTEE

JAMES MARVIN WINDHAM JR

JAMES ALFRED WINNE III

EXECUTIVE COMMITTEE

JESSIE JOHN ACY

DIRECTOR

......

P MICHAEL WELLS

	any hours	and	. a dir	recto		ustee)	·	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JOHN OLIVER SMITH EXECUTIVE COMMITTEE	0.25	Х						0	0	0	
NOEL ROBERT SMITH EXEC. COMMITTEE(START. 6/1/20)	0.25	Х						0	0	0	
PAUL GARY SOMERVILLE	2.5	х						0	0	0	

EXEC. COMMITTEE(START. 6/1/20)	0.25						
PAUL GARY SOMERVILLE	2.5				•		
EXECUTIVE COMMITTEE	0.25	Х			U	U	
KEITH ALBERT STEFFEK	2.5						
EXECUTIVE COMMITTEE	0.25	X			O	0	
RUDOLPH HARROLL STEVENS JR	2.5						
		Х			0	o	

EXECUTIVE COMMITTEE	0.25								
KEITH ALBERT STEFFEK	2.5								
		X					0	0	
EXECUTIVE COMMITTEE	0.25								
RUDOLPH HARROLL STEVENS JR	2.5								
		Х					0	0	
EVECUTE (F COMMITTEE	I	1	ı	ı	l	I			l

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EXECUTIVE COMMITTEE	0.25							
RUDOLPH HARROLL STEVENS JR	2.5	V						
EXECUTIVE COMMITTEE	0.25	Х			0	0	0	
JOE VAN MATRE	2.5							

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(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

and Independent Contractors

RUSSELL WAYNE ALLEN

LEE STIDHAM ANDERSON

SCOTT KEITH ANDERSON

MARIE DENISE ARCOS

JEFFREY DAVID ARONOFF

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

	any hours	and	a dir	ecto		ustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
COURTNEY CELLUM ADAME	1.0										
		X						0	0	0	
DIRECTOR	0.0										
JOSEPH THOMAS ADAMEK III	1.0										
DIRECTOR		X						0	0	0	
——————————————————————————————————————	0.0				<u> </u>						
JAKE WORTHAM ALLEE	1.0								_	_	
DIRECTOR (STARTING 6/1/20)	0.0	X						0	0	0	
	1.0										
GARY DEAN ALLEN		×						0	n	0	
DIRECTOR	0.0	^									
37444475 55 41 51	1.0										

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JAKE WORTHAM ALLEE	1.0	V			0	
DIRECTOR (STARTING 6/1/20)	0.0	^				
GARY DEAN ALLEN	1.0					
DIRECTOR	0.0	X			0	
JIMMIE LEE ALLEN	1.0	V				
DIRECTOR	0.0	X				

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(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

and Independent Contractors

LINDA SUE BARNES

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

LOUIS P BART

JASON WILLIAM BEAL

DIRECTOR (THROUGH 6/1/20)

CHARLES MITCHELL BARRIER

FRANK THOMAS BARNETT

	ally hours	anu	a un	ecto		ustee,	,	Organization	organizations	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
THOMAS WAYNE AVARA II DIRECTOR	0.0	Х						0	0	0	
SAMUEL REX AYERS DIRECTOR	0.0	Х						0	0	0	
STEPHANIE EARTHMAN BAIRD DIRECTOR	0.0	Х						0	0	0	
DAVID GORDON BAKER DIRECTOR	1.0	Х						0	0	0	

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BINEET ON	0.0					
STEPHANIE EARTHMAN BAIRD	1.0	V			0	
DIRECTOR	0.0	^			0	
DAVID GORDON BAKER	1.0	_			9	
DIRECTOR	0.0	^			0	
CONNARD EDWIN BARKER	1.0	V			0	
DIRECTOR	0.0	^				

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(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	l ally llouis	i and	u un	CCCO	•	usccc)	′ I	(14 2 /4 2 2 2	(14/ 2/4 200	mom the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
CLAUDE ARNOLD BEASLEY DIRECTOR	1.0	Х						0	0	0
ROBERT LLOYD BECKER JR DIRECTOR	0.0	Х						0	0	0
JOHN STUART BEKEN DIRECTOR	0.0	Х						0	0	0
MICHAEL DWAYNE BELL	1.0	Х						0	0	0

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JOHN STUART BEKEN
DIRECTOR
MICHAEL DWAYNE BELL
DIRECTOR
1USTIN EMILIO BENNETT

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

FRED BOAS III

CAROL MAY BENTLEY

ROGER HOWELL BETHUNE

JAMES MARTIN BILLINGS

JESS MICHAEL BLASINGAME

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(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation

	any hours	and	a dir	ecto	r/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
DANNY RAY BOATMAN	1.0	Х						0	0	0
DIRECTOR	0.0	^								
THERESA A BODKIN	1.0	Х						0	0	0
DIRECTOR	0.0	,							-	
WILLIAM CHILES BOOHER	1.0	X						0	0	0
DIRECTOR	0.0	^							0	
MORRIS DAVID BOOTHE	1.0	Х						0	0	0
DIRECTOR	0.0									
DOLLO: 10 DD741 D000	1.0		I	I	l	i I		1		l

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DIRECTOR
MORRIS DAVID BOOTHE
DIRECTOR
DOUGLAS BRIAN BOSCH
DIRECTOR

DWIGHT ANTHONY BOYKINS

CLAIR BARCLAY BRANCH

CLAIR MAURICE BRANCH

JOHN RALPH BRANIFF JR

JOHN RALPH BRANIFF

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

	any hours		a dir	ecto		ustee))	organization (W- 2/1099-	organizations (W- 2/1099- MISC)	from the organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustée	Officer	Key employee	Highest compensated employee	Former	MISC)		related organizations	
SCOTT FRANKIE BRAST DIRECTOR (STARTING 6/1/20)	1.0	Х						0	0	0	
MICHAEL LAMAR BREM DIRECTOR	0.0	х						0	0	0	
CURTIS RAY BRENNER DIRECTOR	0.0	Х						0	0	0	
CATHRYN MICHELLE BRIDGES-PAHL DIRECTOR	0.0	Х						0	0	0	
BRANDON LEE BRIDWELL	1.0										

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DIRECTOR
CATHRYN MICHELLE BRIDGES-PAHL
DIRECTOR
BRANDON LEE BRIDWELL

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JAMES RAY BROCK

PAM JANKOWSKI BROOKS

GINGER ELICE BROWN

TERRY MACK BROWN

JANE ANN TAMPLIN BURNAP

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation

	any hours	and	a dir	recto		ustee)	·	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
TIMOTHY PATRICK BURNS DIRECTOR	0.0	Х						0	0	0	
THOMAS ANTHONY BURT DIRECTOR	1.0	х						0	0	0	
GEORGE A BUSCHARDT JR DIRECTOR	0.0	Х						0	0	0	
GEORGE ALFRED BUSCHARDT DIRECTOR	0.0	Х						0	0	0	
JOSEPH LUKE BUTERA	1.0	x						0	0	0	

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DIRECTOR

RICHARD BRIAN BUTLER

KEVIN EUGENE CAGLE

ROBERT RYAN CAIN

ROXIE REGAN CAMPBELL

JOHN JOSEPH CANGELOSI

DIRECTOR (STARTING 6/1/20)

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the from related compensation

	any hours					ustee)		organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
RUDY CANO DIRECTOR	0.0	Х						0	0	0	
ANDREW PORTALES CANTU DIRECTOR	1.0 0.25	Х						0	0	0	
NAPHTALI NUSBAUM CARLSON DIRECTOR (STARTING 6/1/20)	0.0	Х						0	0	0	

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ANDREW PORTALES CANTU
DIRECTOR
NAPHTALI NUSBAUM CARLSON
DIRECTOR (STARTING 6/1/20)
LARRY LEE CARROLL

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DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JANUARY JAY CARTER

VICTOR CASTANEDA JR

JOHN MICHAEL CAUSEY

MARTHA GARCIA CEBALLOS

DIRECTOR (STARTING 6/1/20)

MICHAEL WAYNE CHAMBERS

JOSEPH EDWARD CHASTANG

DIRECTOR (THROUGH 6/1/20)

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

HOWARD THOMAS CORDELL

JERRY MICHAEL CREWS

SANDRA LOWE CROOK

CHRISTOPHER W CUNNINGHAM

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	any hours	and	a dir	ecto	r/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
CHARLES MICHAEL CHRIST	1.0	X						0	0	0	
DIRECTOR (STARTING 6/1/20)	0.0							0	0		
CHAD JACOB CLAY	1.0	X						9	0	0	
DIRECTOR	0.0							0	O		
MICHAEL EUGENE CLEPPER	1.0	×						0	0	0	
DIRECTOR	0.0							9	0		

DIRECTOR	0.0						
MICHAEL EUGENE CLEPPER	1.0	_					
DIRECTOR	0.0	^			0	0	,
CURTIS W CLERKLEY JR	1.0	V			0	0	
DIRECTOR	0.0	^					
MATTHEW THOMAS CONE	1.0						

DIRECTOR	0.0						
CURTIS W CLERKLEY JR	1.0						
		Х			0	0	
DIRECTOR	0.0						
MATTHEW THOMAS CONE	1.0						
		Х			0	0	
DIRECTOR	0.0						
SEAN ROBERT CONGDON	1.0						

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CURTIS W CLERKLEY JR	1.0	×				٥	,
DIRECTOR	0.0	^					
MATTHEW THOMAS CONE	1.0	Y			0	0	,
DIRECTOR	0.0	^			0		
CEAN DODERT CONCRON	1.0						

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(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation

	any hours		a dir	ecto		ustee))	organization	organizations (W- 2/1099- MISC)	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	organization (W- 2/1099- MISC)		organization and related organizations	
MICHAEL CHARLES CURLEY DIRECTOR	0.0	X						0	0	0	
CLAYTON RICHARD DALLAS DIRECTOR	0.0	Х						0	0	0	
DANIEL R D'ARMOND DIRECTOR	0.0	Х						0	0	0	
CHARLES HAYWOOD DAVIS DIRECTOR	0.0	Х						0	0	0	
ROBERT NORMAN DAVIS	1.0										

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DIRECTOR

THOMAS CALVIN DAVIS

CARL RAPIER DAWSON

GARY ALAN DEBAKEY

JOHN GUS DEMERIS

GARY MAXWELL DEITCHER

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

ANDREW DOW

DOUGLAS LAMAR DOYLE

FREEMAN BARNABAS DUNN

DIRECTOR (THROUGH 6/5/20)

KELLY KASSERMAN DUNNAVANT

KEVIN DEAN DUKE

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
GEORGE ALBERT DEMONTROND DIRECTOR	0.0	Х					0	0	0
CARL AUSTIN DETERING JR DIRECTOR	0.0	Х					0	0	0
CHARLES ROBERT DEVINE JR DIRECTOR	0.0	Х					0	0	0
THOMAS EDWARD DOMPIER	1.0	Х					0	0	0

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CHARLES ROBERT DEVINE JR	1.0					
		X			0	
DIRECTOR	0.0					
THOMAS EDWARD DOMPIER	1.0					
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DIRECTOR	0.0					
RODNEY EDMUND DOUTEL	1.0					

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(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	any nours							Organization	organizations	arganization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JOHN LOUIS EBELING DIRECTOR	0.0	Х						0	0	0	
LANDON DANIEL EHLINGER DIRECTOR (STARTING 6/1/20)	0.0	Х						0	0	0	
STEVE BRENT EHRIG DIRECTOR	0.0	Х						0	0	0	
FRANK JAMES EHRMAN JR DIRECTOR	0.0	Х						0	0	0	
CHRISTOPHER BLAIR ENNIS DIRECTOR	0.0	Х						0	0	0	
JAMES CRTIGHTON EPPS III	1.0										

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FRANK JAMES EHRMAN JR	
DIRECTOR	
CHRISTOPHER BLAIR ENNIS	
DIRECTOR	
1AMES COTIGHTON EDDS III	

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

SUZANNE H EPPS

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STEPHEN CLAYTON ESTES

RONALD GARY EUBANKS

MELBA WILLIS EVELER

DIRECTOR (THROUGH 6/1/20)

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

	any hours and a director/trustee)							organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
CAROLYN CHIPMAN FAULK DIRECTOR	1.0	Х						O	0	0
CHARLES LEE FISHER DIRECTOR	1.0	X						0	0	0
THOMAS GARNET FLEISSNER DIRECTOR	0.0	Х						o	0	0
RIGOBERTO FLORES DIRECTOR (STARTING 6/1/20)	0.0	Х						0	0	0
CHARLENE CASEY FLOYD	1.0						\bigcap		· '	

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DIRECTOR
RIGOBERTO FLORES
DIRECTOR (STARTING 6/1/20)
CHARLENE CASEY FLOYD
DIRECTOR

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MICHAEL SCOTT FRANCISCO

LLOYD ROBERT FRENCH IV

MATTHEW RICHARD FUQUA

ALBERT LEE FURNACE

STEPHEN HAROLD GANEY

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

1	any hours and a director/trustee)							organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
RICHARD THOMAS GARCIA DIRECTOR (STARTING 6/1/20)	1.0	Х						0	0	0
GARY TAYLOR GARRISON DIRECTOR	1.0	х						0	0	0
CYNTHIA MARIE GARZA DIRECTOR	1.0	Х						0	0	0
DIANE ROWE GAUTREAUX DIRECTOR	0.0	Х						0	0	0
EDWARD ARMS GAYLORD DIRECTOR	0.0	Х						0	0	0

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DIANE ROWE GAUTREAUX	
DIRECTOR	
EDWARD ARMS GAYLORD	
DIRECTOR	

GEORGE BOGDAN GEORGIADES

GREGORY NORWIN GERHART

GRETCHEN GILLIAM SIMMEN

RAYMOND MICHAEL GILLIAM

DIRECTOR (STARTING 6/1/20)

GARY WAYNE GLOVER

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation

	any hours and a director/trustee)							organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
REFUGIO GONZALES JR	1.0	.,								
DIRECTOR	0.0	Х						0	0	0
STEVEN HAROLD GORDON	1.0									
DIRECTOR	0.0	Х						0	0	0
RANDAL TAYLOR GOSHORN	1.0									
DIRECTOR	0.0	Х						0	0	0
RICK ALAN GREENE	1.0									
DIRECTOR	0.0	Х						0	0	0
EDGAR CLAY GRIFFIN	1.0									
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DIRECTOR

JOHN ALBERT GRIMES

RONNIE EUGENE GULIHUR

ROBERT CARLYSLE GULLEDGE

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

FREDA J GUZMAN

JOE BRUCE HANCOCK

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) organizations any hours organization from the

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JEFFREY S HAYES

LANCE MARK HEACOCK

DARRELL NICK HARTMAN

MICHAEL DAVID HARTWIG

JASON TIMOTHY HAWTHORNE

	any nours	and	a dir	ecto		ustee)		organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JOHN SOMMESE HANTAK DIRECTOR (STARTING 6/1/20)	1.0	Х						0	0	0	
JENNIFER LYNN HARMEL DIRECTOR	1.0	Х						0	0	0	
JEFFRY LEWIS HARRIS DIRECTOR	0.0	Х						0	0	0	
KEVIN HUNTER HARRIS	1.0	Х						0	0	0	

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DIRECTOR	0.0						
JEFFRY LEWIS HARRIS	1.0					0	
DIRECTOR	0.0	^				Ŭ	l
KEVIN HUNTER HARRIS	1.0						
IRECTOR	0.0	^					
STERLING T HARRISON	1.0	V					
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(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	for related		u un	CCCC	-	astee,	'	(14/ 3/1000	(M. 3/1000	overnientien and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
LYNN BARNETT HEDRICK DIRECTOR	1.0	Х						0	0	0	
LINDA RENEE HENSON DIRECTOR	0.0	Х						0	0	0	
KATHLEEN ANDREW HERD DIRECTOR	0.0	Х						0	0	0	

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DIRECTOR	0.0				, and the second	
KATHLEEN ANDREW HERD	1.0	X			0	
DIRECTOR	0.0					
ANGELA ROSE HERNANDEZ	1.0	×			0	
DIRECTOR	0.0				J	
ARTHUR ALLEN HERRING	1.0					

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and Independent Contractors

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DIRECTOR (THROUGH 6/1/20)

BRADFORD GLENN HILDEBRAND

JEFFERY DEE HILDEBRAND

PATRICIA ANN HILLMAN

JERRY H HICKMAN

TOBY DALE HICKS

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

	any hours	and	a dii	ecto	r/tr	ustee))	organization	organizations (W- 2/1099- MISC)	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)		organization and related organizations	
DAVID SCOTT HINSLEY DIRECTOR	0.0	Х						0	0	0	
ROBERT WAYNE HINTON DIRECTOR	1.0	Х						0	0	0	
JENNIFER GOETZMAN HIRSCH DIRECTOR	1.0	Х						0	0	0	
ROBERT RAY HODGE	1.0	X						0	0	0	

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and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JOHN E HOLLIS

LINDSAY SHAYNE HOLMES

STANLEY KEITH HORTON

DIRECTOR (STARTING 6/1/20)

DIRECTOR (STARTING 6/1/20)

RICHARD THOMAS HUDGINS

ERIC MARTIN HUEGELE

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(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other

	week (list any hours				office ustee)		from the organization	from related organizations	compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
KRISTIE HUETTEL DIRECTOR	0.0	Х					0	0	0
PHILLIP MASON HUNT DIRECTOR	0.0	х					0	0	0
ROBERT ELLIOT HUNTER JR DIRECTOR	0.0	Х					0	0	0
MARY JANICE HUTCHINSON	1.0	Х					0	0	0

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ROBERT ELLIOT HUNTER JR
DIRECTOR
MARY JANICE HUTCHINSON
DIRECTOR (THROUGH 6/1/20)
JOHN ATKINS HUTCHISON III

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

ROBERT CHARLES HUX

......

JAMES JERI JANKE

KIRBY JAMES JANKE

KYLE THOMAS JANKE

MICHELLE IVERSEN JEFFERY

(A) (E) (B) (C) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related compensation from the

and Independent Contractors

MONTE EDWARD JONES

RICKEY LYNN JONES

RUSSELL LANE JONES

WILLIAM LEWIS JORDAN III

.......

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JAMES KELLY JOY

	any hours		a dir	recto	-	ustee)	1	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JESSIE MARIE JEWELL DIRECTOR	1.0	Х						0	0	0
DAVID LYONS JOHNSON DIRECTOR	1.0	х						0	0	0
DIANE MARIE JOHNSON DIRECTOR	1.0	Х						0	0	0
CURTIS FRANKILIN JONES	1.0	Х						0	0	0

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DIRECTOR	0.0					
DIANE MARIE JOHNSON	1.0	v				
DIRECTOR	0.0	^			0	
CURTIS FRANKILIN JONES	1.0	v			0	
DIRECTOR	0.0	^				
JEFF MICHAEL JONES	1.0	v		·	0	
DIRECTOR	0.0	^			Ĭ	

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(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JAMES GROVER KELLEY DIRECTOR	1.0	Х						0	0	0	
THOMAS MARK KELLY DIRECTOR	0.0	х						0	0	0	
GERALD WENDELL KENT DIRECTOR	0.0	Х						0	0	0	
JAMES ALAN KENT DIRECTOR	0.0	Х						0	0	0	
LARRY RAY KERBOW DIRECTOR	0.0	Х						0	0	0	
ROBERT BEN KNEPPLER JR	1.0										

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ROBERT BEN KNEPPLER JR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

TUCKER SPENCE KNIGHT

PATRICIA MARY KOCH

DAVID WAYNE KOONCE

GARY ARTHUR KRAMER

(A) (E) (B) (C) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

	any hours	and	a dir	ecto		ustee)		organization	organizations	from the organization and related organizations 0 0 0
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	related
THOMAS RAY LAIRD	1.0									
	•••••	X						0	0	0
DIRECTOR	0.0									
DANIEL MEYER LANG JR	1.0									
NINECTOR	•••••	X						0	0	0
DIRECTOR	0.0									_
KEVIN JAMES LECK	1.0									
DIRECTOR		X						0	0	0
DIRECTOR	0.0									
PHILIP LLOYD LEGGETT	1.0									
DIRECTOR		X						0	0	0
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DIRECTOR
PHILIP LLOYD LEGGETT
DIRECTOR
SEAN MATTHEW LEHANE
DIRECTOR

PAUL FREDRICK LEHNHOFF

EDGAR DEE LESTER

LAWRENCE S LEVY

JEFF ALAN LEWIS

WALTER ALVIE LEWIS JR

DIRECTOR (THROUGH 11/26/19)

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

PAUL WAYNE LONG

FRANK ALLEN LYONS

ROBERT TED LYONS

THOMAS JOHN MACH

STEPHEN ARTHUR MAHALITC

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	any hours	and	a dir	ecto		ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	1 ()	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
WENDY LANELLE LEWIS DIRECTOR	0.0	Х						0	0	0
JAMES HUNTER LIGHTFOOT DIRECTOR	0.0	Х						0	0	0
GLENN TERRELL LILIE	1.0									

JAMES HUNTER LIGHTFOOT	1.0	v			0	0	
DIRECTOR	0.0	^					
GLENN TERRELL LILIE	1.0	V					
DIRECTOR	0.0	Α			0	0	
THOMAS MERRITT LIPPINCOTT	1.0	V			0		
DIRECTOR	0.0	^			0	0	
PAMELA MARIE LOGSDON	1.0	.,					

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(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

	any hours		a dir	ecto		ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
RICHARD WARNER MARBURGER DIRECTOR	0.0	Х						0	0	0
BRADLEY HOWARD MARKS DIRECTOR	0.0	Х						0	0	0
ROY ALVIN MARSH III DIRECTOR	0.0	Х						0	0	0
DAWNE COLE MARTIN DIRECTOR	0.0	Х						0	0	0
MICHAEL ROBERT MARTIN	1.0	Х						0	0	0

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DIRECTOR

PHILIP KEVIN MARTIN

OTILIA GIGI MAYORGA

EDMUND JOHN MCALEER

KENNETH DEE MCGUYER

SYLVIA CAROLINE MCINTOSH

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) organizations any hours organization from the

, !	any nours			ecto	•	rustee)	′ I	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
MICHAEL STEVEN MCKINNEY DIRECTOR	0.0	х						0	0	0
RICHARD ANDREW MCLEOD DIRECTOR	0.0	х						0	0	0
GARY LUTHER MCMULLEN DIRECTOR	0.0	х						0	0	0
PETE ANTHONY MEDINA DIRECTOR	0.0	X						0	0	0
CHARLES MARKLEY MELTON DIRECTOR	1.0	х						0	O	0

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PETE ANTHONY MEDINA
DIRECTOR
CHARLES MARKLEY MELTON
DIRECTOR
CHARLES WAYNE MELTON

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DIRECTOR (THROUGH 8/18/20)

DONALD WAYNE MIDDLETON

AMY PINKHAM MILLER

BRADLEY ROBERT MILLER

GREGORY NELSON MILLER

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

CURTIS LEE MORGAN

JOHN ROGER MORTON

NANCY ELONIDE MOTLEY

DIRECTOR (STARTING 6/1/20)

KENNETH C MOURSUND JR

	and a director, cruste							diganization	organizations		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
HARRY EDWIN MILLER DIRECTOR	0.0	Х						0	0	0	
REGAN ELIZABETH MILLER DIRECTOR	0.0	Х						0	0	0	
DOROTHY MARTIN MITCHELL DIRECTOR (THROUGH 6/1/20)	0.0	Х						0	0	0	
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DIRECTOR	0.0							
DOROTHY MARTIN MITCHELL	1.0							
DIRECTOR (THROUGH 6/1/20)	0.0	X				0	0	
JOHN JOSEPH MONTALBANO	1.0	×				0	0	
DIRECTOR	0.0	^					0	
YANCE SAMUEL MONTALBANO	1.0	v					0	
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DIRECTOR (THROUGH 6/1/20)	0.0	^			١		
JOHN JOSEPH MONTALBANO	1.0	×			0	0	
DIRECTOR	0.0	^			9	ŭ	
YANCE SAMUEL MONTALBANO	1.0	~			0	0	
DIRECTOR	0.0	^			0	o o	
JAMES ROBERT MORA	1.0						

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DIRECTOR (THROUGH 6/1/20)	0.0	,,			, and the second	J	
JOHN JOSEPH MONTALBANO	1.0	¥			0	0	
DIRECTOR	0.0	^					
YANCE SAMUEL MONTALBANO	1.0	V				0	
DIRECTOR	0.0	X				U	

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer compensation week (list from related from the

and Independent Contractors

DEMETRIUS GERALDO NAVARRO

ROBINSON KEEBLE NEBLETT

GARY RAYMOND NESLONEY

DIRECTOR (THROUGH 7/8/20)

LISA CHRISTINE NGUYEN

DONALD WAYNE NEUENSCHWANDER

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

	any hours	and	a dir	ecto		ustee)		organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
KENNETH CARROLL MOURSUND DIRECTOR	0.0	Х						0	0	0
DAVID EUGENE MOUTON DIRECTOR	0.0	Х						0	0	0
SHELLY DOMPIER MULANAX DIRECTOR	1.0	Х						0	0	0
PHILLIP ELVIN MURPHY DIRECTOR (THROUGH 6/1/20)	1.0	Х						0	0	0

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SHELLY DOMPIER MULANAX	1.0	X			0	
DIRECTOR	0.0	Χ				
PHILLIP ELVIN MURPHY	1.0	>				
DIRECTOR (THROUGH 6/1/20)	0.0	Α.			U	
JAMES MICHAEL MUSHINSKI	1.0	~			0	
DIRECTOR	0.0	^			١	

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(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list compensation from the from related and a director/trustee) any hours organization organizations from the

	any nours		a dir	ecto		ustee)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
SCOTT NICHAEL NICHOLS DIRECTOR	0.0	Х						0	0	0
GERALD LYNN NUNEZ DIRECTOR	0.0	Х						0	0	0
MICHAEL KEITH O'KELLEY DIRECTOR	0.0	Х						0	0	0
KELLY LYNN O'SHIELES DIRECTOR	0.0	Х						0	0	0
ROBERT LEN O'SHIELES DIRECTOR	0.0	Х						0	0	0
WILLIAM ALLEN OWEN	1.0									

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KELLY LYNN O'SHIELES	
DIRECTOR	
ROBERT LEN O'SHIELES	
DIRECTOR	
WILLIAM ALLEN OWEN	

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

MARILYN ANN PAGE

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ROBERT EDWARD PAINE IV

WILLIAM RIGHT PARKER IV

GARY EDWIN PARKS

(A) (E) (B) (C) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

	any hours	and	. a dir	recto		ustee)		organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
PATRICK DECLAN PENNINGTON DIRECTOR	1.0	Х						0	0	0
HARRY ALLEN PERRIN	1.0	_		\vdash	\top			0	0	0
DIRECTOR	0.0									
PATRICK RICHARD PERRY	1.0	X						0	0	0
DIRECTOR	0.0							U	U	0
GERALD KEVIN PEYTON DIRECTOR (STARTING 6/1/20)	0.0	Х						0	0	0
GARRY RAE PIGG	1.0	×						0	0	0

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GERALD KEVIN PEYTON
DIRECTOR (STARTING 6/1/20)
GARRY RAE PIGG
DIRECTOR

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MICHAEL ADRAIN PILLOW

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DIRECTOR

DIRECTOR

DIRECTOR

ERIC R POTTS

TIM WILLIAM PING

ROBERT LOUIS PORTER

RODNEY MACK PORTER

DIRECTOR (STARTING 6/1/20)

DIRECTOR (THROUGH 6/1/20)

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

1	for related							////- 2/1000-	/\\/_ 2/1000_	organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustée	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	related organizations	
OZELL PRICE DIRECTOR	1.0	Х						0	0	0	
TERRY RAY PRUITT DIRECTOR	0.0	Х						0	0	0	
MILTON BYRD PURVIS DIRECTOR	0.0	Х						0	0	0	
WILLIAM LOWELL RAMSEY JR DIRECTOR	0.0	X						0	0	0	
STEPHEN RAY RANSON	1.0	Х						0	0	0	

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DIRECTOR
WILLIAM LOWELL RAMSEY JR
DIRECTOR
STEPHEN RAY RANSON
DIRECTOR

JEN MARIE RAU

DUDLEY CLARENCE RAY

KEVIN KAISER RECH

KYLE LEIGHTON REPPOND

GREGORY MILLER RAYMOND

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
ANTHONY PAUL RICH DIRECTOR	1.0	×						0	0	0
DIRECTOR	0.0									
GORDON RICHARDSON DIRECTOR	0.0	х						0	0	0
TODD ARLIS RIDDLE	1.0							0	0	
DIRECTOR	0.0							0	O	U
CHARLES ANDREW ROBINSON	1.0	×						0	0	0

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TODD AKLIS KIDDLL
DIRECTOR
CHARLES ANDREW ROBINSON
DIRECTOR
STEVEN LEE ROE

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DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

PETE ALAN RUMAN

RANDY DUANE RUSSELL

DARRELL EDWIN ROGERS

JOHNNIE LEE ROUNTREE JR

JULIUS MACDONALD RUFFENO

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer from related week (list from the compensation

	any hours				r/tr	ustee)		organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
MIKE G RUTHERFORD JR	1.0										
DIRECTOR	0.0	Х						0	0	0	
DWAYNE DAVID SABLATURA	1.0	Х						0	0	0	
DIRECTOR	0.0							0			
JULIE ANN SACCO	1.0	X							0	0	
DIRECTOR	0.0							0			
ROSA LINDA SAENZ DIRECTOR	0.0	Х						0	0	0	
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ROSA LINDA SAENZ	
DIRECTOR	
JOHN ALAN SANDLING	
DIRECTOR	
JAMES DINSMORE SARTWELLE III	

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

ANNE ELISE SARTWELLE

JAMES D SARTWELLE JR

BRETT LYNN SARVER

RALPH LAWRENCE SAVAGE JR

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

and Independent Contractors

RICHARD RANDAL SCOTT

JULIE JONES SHANNON

LINDA ROSE SHARTZER

DIRECTOR (STARTING 6/1/20)

KATHERINE JEAN SHIREY-LORD

KENNETH CHARLES SHAW

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

	formulated	unu	u un	CCCC		usice,	'	(14/ 2/1000	(14/ 2/4000	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
VANESSA RENEE SCHILLACI DIRECTOR	0.0	Х						0	0	0	
JOSEPH LEROY SCHINDLER DIRECTOR	1.0	х						0	0	0	
GREGORY ALLAN SCHRODER DIRECTOR	0.0	Х						0	0	0	
DARRYL ALLAN SCHROEDER DIRECTOR	0.0	Х						0	0	0	

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GREGORY ALLAN SCHRODER	1.0	V			0	
DIRECTOR	0.0	X			U	
DARRYL ALLAN SCHROEDER	1.0	_			0	
DIRECTOR	0.0				ŭ	
EDWARD BRUNO SCHULZ III	1.0	v			0	
DIRECTOR	0.0	^				

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(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

RYAN OLIVER SMITH

JAMES SHERMAN SPRING

PAMELA DUGAN SPRINGER

GEORGE WILLIAM STALLINGS

DIRECTOR (THROUGH 6/1/20)

LUTHER LODIE STAPLETON JR

	any hours	and	a dir	ecto	r/tr	ustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
SHARON LANGFORD SIMMONS DIRECTOR	0.0	Х						0	0	0	
MARSHALL ROY SMITH III DIRECTOR	0.0	Х						0	0	0	
DAVID LEE SMITH DIRECTOR	0.0	Х						0	0	0	
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DIRECTOR	0.0					
DAVID LEE SMITH	1.0					
DIRECTOR	0.0	^			0	
NAOMI MAE CHARLOTTE SMITH	1.0	×			0	
DIRECTOR	0.0	^				
ROBERT PATRICK SMITH	1.0					

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(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

								1 (1) 2 (4000	/M 2/1000	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
ROBERT STERLING STEELE DIRECTOR	0.0	Х						0	0	0	
GINA RUMORE STEERE DIRECTOR	0.0	Х						0	0	0	
GREGG EDWARD STEFFEN DIRECTOR	0.0	Х						0	0	0	
HUGH DENNIS STEGER DIRECTOR	0.0	Х						0	0	0	
JAY HOWARD STEWART	1.0										

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HUGH DENNIS STEGER	
DIRECTOR	
JAY HOWARD STEWART	
DIRECTOR	

DAVID MICHAEL STONE JR

DAVID LESLIE STRATTON

VANESSA KENT STROBERG

CLAIRE EATON STUEWER

BRENDA BAKER STUBBS SHORT

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

BILL TRUMAN TEAGUE

RANDLE JAMES TRAHAN

TRACY RAY TROUP

ARCHIE RALPH THOMPSON JR

DIRECTOR (STARTING 6/1/20)

DIRECTOR (THROUGH 6/1/20)

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DENNIS WAYNE TURNER

	any hours	and	a di	recto	or/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
ADAM F SUHR DIRECTOR	1.0	Х						0	0	0
EDWARD BERRY SUMMEROUR III DIRECTOR	0.0	Х						0	0	0
JUSTIN JACOBS TANKERSLEY DIRECTOR	0.0	Х						0	0	0
LAUDIC TADVCD	1.0									

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BIRECTOR .	0.0							
JUSTIN JACOBS TANKERSLEY	1.0	~						
DIRECTOR	0.0	Х					0	
LAURIE TARVER	1.0							
DIRECTOR	0.0	X					0	
JAMES ROBERT TAYLOR	1.0				·			
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(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the from related compensation

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JAMES DARYL VERBOIS III

PATRICK AARON WALKER

SCOTT WILLIAM WALKER

THOMAS ANTHONY WALKER

SHARLEEN LAWING WALKOVIAK

	any hours	and	a dir	ecto	r/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
RICHARD N TYLER DIRECTOR	1.0	Х						0	0	0
MICHAEL JAMES UPCHURCH DIRECTOR	0.0	Х						0	0	0
WENDY VANDEVENTER DIRECTOR	0.0	Х						0	0	0
JAMES CHARLES VANHOOZER IR	1.0									

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DIRECTOR	0.0					
WENDY VANDEVENTER	1.0					
		Х			0	
DIRECTOR	0.0					
JAMES CHARLES VANHOOZER JR	1.0					
		Х			0	
DIRECTOR	0.0					
JOSEPH RAY VARA	1.0				·	
JOSEI II IVAT VAIVA		×			ا ا	

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(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) organizations any hours organization from the

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

PERRY MICHAEL WELLS JR

CONSTANCE ANN WHITE

JUSTIN CONSTANIA WHITE

WILLIAM ROBERT WHITE

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								organization	organizations	rrom the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
WESLEY RALPH WARD	1.0										
		Х						0	0	0	
DIRECTOR	0.0										
MICHELLE VERBOIS WASAFF	1.0										
NINECTOR		Х						0	0	0	
DIRECTOR	0.0									_	
DONNA KAY WEBSTER	1.0										
DIDECTOR		Х						0	0	0	
DIRECTOR	0.0									_	
RICHARD BYRON WEIMAN	1.0										
DIRECTOR		Х						0	0	0	
DIRECTOR	0.0										
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DIRECTOR	0.0	, ,			Į.	
RICHARD BYRON WEIMAN	1.0	_			0	
DIRECTOR	0.0	^			0	
LANCE PAT WELCH	1.0	x			0	
DIRECTOR	0.0					
CLAYTON THOMSON WELLS	1.0	v			0	
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(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer compensation week (list from the from related and a director/trustee) any hours organization organizations from the

								Organization	arganization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JAMES RAYMOND WHITFILL JR	1.0									
		X						0	0	0
DIRECTOR	0.0									
SAMM BRIMER WIGGINS	1.0	Х							0	0
DIRECTOR	0.0	λ						U	U	
GREGORY TEAL WILLBANKS	1.0									
DIRECTOR		Х						0	0	0
	0.0									
JASON PRICE WILLIAMS	1.0	V							0	
DIRECTOR	0.0	Х						U U	U	0
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GREGORY TEAL WILLBANKS	1.0	x			0	
DIRECTOR	0.0				o o	
JASON PRICE WILLIAMS	1.0	×			0	
DIRECTOR	0.0				S	
RODNEY WAYNE WILLIAMS	1.0	v			0	
DIRECTOR	0.0	_ ^			١	

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and Independent Contractors

KIRK ERNEST WILLIAMSON II

BRIAN JOSEPH WISCHNEWSKY

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

GRIFFIN DALE WINN

KENNETH PRICE WISE

BETTY BROWN WISEMAN

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other compensation person is both an officer from the from related compensation

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

NEIL OSCAR YELDERMAN

ROBIN LYNN YOUNG

TODD JEFFREY ZUCKER

	any hours					ustee		organization (W- 2/1099-	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	(W- 2/1099- MISC)	organization and related organizations
DENNIS DUANE WOLFORD DIRECTOR	1.0	Х						0	0	0
JAMES MICHAEL WOLLAM DIRECTOR	1.0	х						0	0	0
MELVIN JACK WRIGHT JR DIRECTOR	0.0	Х						0	0	0
DAVID BRYAN YATES DIRECTOR	0.0	Х						0	0	0

DIRECTOR	0.0						
MELVIN JACK WRIGHT JR	1.0						
		Χ			0	0	
DIRECTOR	0.0						
DAVID BRYAN YATES	1.0						
		Χ			0	0	
DIRECTOR	0.0						
WILLIAM ARTHUR YATES JR	1.0						

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SCI	HFD	ULE A	- Dublic 4	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047		
	m 99			rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2019		
		f the Treasury	► Go to <u>www.irs</u>	gov/Form990 for i			ormation.	Open to Public Inspection		
Nam	e of th	nue Service he organiza VESTOCK SHOV	tion W AND RODEO INC				Employer identific			
							74-1142851			
	rt I		for Public Charity State a private foundation because				See instructions.			
1 1	organiz		onvention of churches, or as	•			(A)(i)			
2		,	,				. , . ,			
_			scribed in section 170(b)(,					
3		·	or a cooperative hospital serv	-			-			
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's		
5			ation operated for the benefi (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170		
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).			
7			ation that normally receives ('0(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the gener	al public described in		
8		A communi	ty trust described in sectior	170(b)(1)(A)(vi).	(Complete Part I	I.)				
9			ural research organization de ant college of agriculture. S					ege or university or a		
10	✓	from activit investment	ation that normally receives: lies related to its exempt fun income and unrelated busin See section 509(a)(2). (Co	ections—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross		
11		An organiza	ation organized and operated	d exclusively to test fo	r public safety. S	See section 509	(a)(4).			
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a			
a		organizatio	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	appoint or elect a majo						
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar						
С		Type III f	unctionally integrated. A sorganization(s) (see instruction)	supporting organizatio				ted with, its		
d		Type III n	on-functionally integrated integrated integrated. The organization in You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar			
е		Check this	box if the organization receiv or Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally		
f	Enter				-					
g	Provi	de the follow	ing information about the su	pported organization(s).			_		
	(i) N	Name of supp organization		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
			<u> </u>							
Tota			tion Act Notice, see the Ir		Cat. No. 11285		 Schedule A (Form 9			

Page 2

	(Complete only if you cl If the organization faile						under Part III.
S	ection A. Public Support			, ,	.		
_	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	(or fiscal year beginning in) ▶	(a) 2013	(D) 2016	(0) 2017	(d) 2018	(e) 2019	(I) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	40,486,130	40,203,116	42,726,528	45,002,271	32,674,37	201,092,41
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	40,486,130	40,203,116	42,726,528	45,002,271	32,674,37	1 201,092,41
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						5,459,71
	amount shown on line 11, column (f).						
6	Public support. Subtract line 5						195,632,70
_	from line 4. Section B. Total Support						
	Calendar year	() 2045	(1.) 2016	() 2047	(1) 2010	() 2010	(0.7.1
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 4	40,486,130	40,203,116	42,726,528	45,002,271	32,674,37	1 201,092,41
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,161,975	2,211,005	2,628,905	3,195,779	2,772,15	12,969,82
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0		0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	282,630	226,463	391,922	347,916	283,80	1,532,73
11	Total support. Add lines 7 through 10						215,594,97
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	390,409,71
13	First five years. If the Form 990 is f	or the organization	n's first, second, th	ird, fourth, or fifth	tax year as a sec	tion 501(c)(3) or	ganization,
	check this box and $\boldsymbol{stop\ here}\ \boldsymbol{.}\ \boldsymbol{.}\ \boldsymbol{.}$					🕨	
S	ection C. Computation of Publi						
14	Public support percentage for 2019 (I	ine 6, column (f) d	livided by line 11,	column (f))		14	90.741 %
15	Public support percentage for 2018 Se	chedule A, Part II,	line 14			15	90.698 %
16 a	33 1/3% support test—2019. If the	e organization did	not check the box	on line 13, and lin	e 14 is 33 1/3% o	r more, check thi	s box
b	and stop here. The organization qua 33 1/3% support test—2018. If the	lifies as a publicly he organization dic	supported organization	ation on line 13 or 16a, a			▶ ☑ eck this
	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization meets	n qualifies as a pul st— 2019. If the or on meets the "fact:	blicly supported or ganization did not s-and-circumstanc	ganization check a box on lin es" test, check this	ie 13, 16a, or 16b s box and stop he		
b	organization	st—2018. If the of ization meets the " on meets the "fact	organization did no 'facts-and-circums :s-and-circumstand	t check a box on li tances" test, check es" test. The orga	ne 13, 16a, 16b, o this box and sto nization qualifies a	or 17a, and line p here. as a publicly	
18	supported organization	ion did not check a		 7b, check this box	and see	▶□

	art III Support Schedule for	or Organization	s Described in	Section 509(a	1)(2)		Page 3
	(Complete only if you	checked the box	on line 10 of Pa	art I or if the org	ganization failed		Part II. If
Se	the organization fails	to qualify under	the tests listed b	pelow, please co	mplete Part II.))	
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	(or fiscal year beginning in) 🕨	(a) 2015	(D) 2010	(6) 2017	(u) 2010	(6) 2019	(1) TOTAL
•	membership fees received. (Do not include any "unusual grants.") .	40,486,130	40,203,116	42,726,528	45,002,271	32,674,371	201,092,416
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	75,549,098	83,546,746	86,868,032	104,713,080	39,732,758	390,409,714
3	Gross receipts from activities that are not an unrelated trade or business under section 513						C
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						(
5	The value of services or facilities furnished by a governmental unit to the organization without charge						(
6	Total. Add lines 1 through 5	116,035,228	123,749,862	129,594,560	149,715,351	72,407,129	591,502,130
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	10,453,903	11,595,204	12,164,883	13,329,427	4,476,042	52,019,459
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.						C
c	Add lines 7a and 7b	10,453,903	11,595,204	12,164,883	13,329,427	4,476,042	52,019,459
8	Public support. (Subtract line 7c from line 6.)						539,482,671
Se	ection B. Total Support	l l		L	I	L	
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	(or fiscal year beginning in) ► Amounts from line 6	116,035,228	123,749,862	129,594,560	149,715,351	72,407,129	591,502,130
L0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,161,975	2,211,005	2,628,905	3,195,779	2,772,159	12,969,823
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						C
C	Add lines 10a and 10b.	2,161,975	2,211,005	2,628,905	3,195,779	2,772,159	12,969,823
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.	О	0	0	0	0	C
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	282,630	226,463	391,922	347,916	283,804	1,532,735
13	Total support. (Add lines 9, 10c, 11, and 12.).	118,479,833	126,187,330	132,615,387	153,259,046	75,463,092	606,004,688
14	First five years. If the Form 990 is	_					
-	check this box and stop here ection C. Computation of Public						▶ ⊔
<u> </u>	Public support percentage for 2019 (column (f))		15	89.023 %
16	Public support percentage from 2018					16	88.634 %
Se	ection D. Computation of Inves						
17	Investment income percentage for 2				· =	17	2.140 %
18 10=	Investment income percentage from 331/3% support tests—2019. If th		•			18 33 1/3%, and line	2.004 % 17 is not
	more than 33 1/3%, check this box and 33 1/3% support tests—2018. If the	d stop here. The d	organization qualific	es as a publicly su	pported organizat	ion	▶ ☑

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ □

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

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

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. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination. 3b 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. 3с

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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

4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c 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 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5с Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

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. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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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.
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Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

	edule A (101111 330 01 330 E2) 2013			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
S	ection 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		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	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	2		
	organization.			
S	ection C. Type II Supporting Organizations			1
			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	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		14	
_			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		
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		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.		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		
	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.			
2		2b		
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. b Did the approximation approximation of the provided details in Part VI. 	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (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):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported 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.	
_		

7 Total annual distributions. Add lines 1 through 6.						
8 Distributions to attentive supported organizations to who details in Part VI). See instructions						
9 Distributable amount for 2019 from Section C, line 6	9 Distributable amount for 2019 from Section C, line 6					
10 Line 8 amount divided by Line 9 amount						
Section E - Distribution Allocations (see instructions) (i) (ii) Underdistributions Pre-2019			(iii) Distributable Amount for 2019			
Distributable amount for 2019 from Section C, line 6						

details in Part VI). See instructions		(
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section 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:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018.			

Schedule A (Form 990 or 990-EZ) (2019)

f Total of lines 3a through e

instructions)

See instructions.

a Excess from 2015. **b** Excess from 2016. c Excess from 2017. **d** Excess from 2018. e Excess from 2019.

3j and 4c. 8 Breakdown of line 7:

\$

g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a Applied to underdistributions of prior years b Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines

Additional Data

Software ID:

Software Version: EIN: 74-1142851

Name: HOUSTON LIVESTOCK SHOW AND RODEO INC

Schedule A	(Form 990 or 990-EZ) 2019 Page
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).

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).

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

DLN: 93493102014111

Internal Revenue Service

EZ)

5

SCHEDULE C (Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

Department of the Treasury ▶Go to www.irs.gov/Form990 for instructions and the latest information. Inspection If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. • Section 527 organizations: Complete Part I-A only. If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** HOUSTON LIVESTOCK SHOW AND RODEO INC. 74-1142851 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 ☐ Yes □ No Was a correction made? ☐ Yes ☐ No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b....... Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds. If none, enter and promptly and -0-. directly delivered to a separate political organization. If none, enter -0-. 2

Grassroots lobbying expenditures

Return Reference

or each	Form 5768 (election under section 501(h)). "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	(b	
ctivity.	, , , , , , , , , , , , , , , , , , ,	Yes No		Amo	unt
	uring the year, did the filing organization attempt to influence foreign, national, state or local legislation, cluding any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a Vo	lunteers?				
b Pai	id staff or management (include compensation in expenses reported on lines 1c through 1i)?				
с Ме	dia advertisements?				
d Ma	illings to members, legislators, or the public?				
e Pul	blications, or published or broadcast statements?				
f Gra	ants to other organizations for lobbying purposes?				
g Dir	rect contact with legislators, their staffs, government officials, or a legislative body?				
h Ra	llies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Otl	her activities?				
j Tot	tal. Add lines 1c through 1i				
a Did	d the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If	"Yes," enter the amount of any tax incurred under section 4912				
c If	"Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If t	the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
u 1					
Part II		(5), o	r secti	on	
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), o	r secti	on Ye:	s N
Part II			r secti		s N
Part II	501(c)(6).		r secti	Ye	5 N
Part III We Did	501(c)(6). ere substantially all (90% or more) dues received nondeductible by members?		E	Yes	s N
Part II We Dic Dic art II	the organization make only in-house lobbying expenditures of \$2,000 or less?	(5), o	 r secti	Yes 1 2 3 on 501(
We Did Did The Did	the organization make only in-house lobbying expenditures of \$2,000 or less? The complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." The complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	 (5), o	 r secti	Yes 1 2 3 on 501(
We Dick	the organization make only in-house lobbying expenditures of \$2,000 or less?	(5), o	 r secti	Yes 1 2 3 on 501(
Week Dicks D	sere substantially all (90% or more) dues received nondeductible by members?	(5), o	 r secti	Yes 1 2 3 on 501(
. We 2 Did 3 Did 2 TII . Du 2 Se ex a Cu b Ca	bere substantially all (90% or more) dues received nondeductible by members?	(5), o III-A	 r secti	Yes 1 2 3 on 501(
. We Did Did Did Did Did Did Did Did Did Did	sere substantially all (90% or more) dues received nondeductible by members? determined the organization make only in-house lobbying expenditures of \$2,000 or less? dethe organization agree to carry over lobbying and political expenditures from the prior year? dethe organization agree to carry over lobbying and political expenditures from the prior year? dethe organization agree to carry over lobbying and political expenditures from the prior year? dethe organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." despenses seements and similar amounts from members dethe organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." despenses for which the section 527(f) tax was paid). Trent year Tryover from last year	(5), o III-A 1 2a 2b	 r secti	Yes 1 2 3 on 501(
. We b Ca C Total Age I If the	ere substantially all (90% or more) dues received nondeductible by members?	(5), o IIII-A 2a 2b 2c 3	 r secti	Yes 1 2 3 on 501(
Well Well Well Well Well Well Well Well	sere substantially all (90% or more) dues received nondeductible by members? If the organization make only in-house lobbying expenditures of \$2,000 or less? If the organization agree to carry over lobbying and political expenditures from the prior year? IT-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Ites, assessments and similar amounts from members Iter, assessments and similar amounts from for the prior of the section for the section for the section for the section for the section for the section for the section for the section for the section for the section for the section for the section for the	(5), o IIII-A 2a 2b 2c 3	 r secti	Yes 1 2 3 on 501(
Well Well Well Well Well Well Well Well	are substantially all (90% or more) dues received nondeductible by members? If the organization make only in-house lobbying expenditures of \$2,000 or less? If the organization agree to carry over lobbying and political expenditures from the prior year? IT B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." It is, assessments and similar amounts from members It is, assessments and similar amounts of political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). It is is in the organization agree to carryover to the reasonable estimate of nondeductible section 162(e) dues is organization agree to carryover to the reasonable estimate of nondeductible lobbying and political penditure next year? It is is in the organization of lobbying and political expenditures (see instructions)	(5), o IIII-A 2a 2b 2c 3	 r secti	Yes 1 2 3 on 501(

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE D

(Form 990)

Department of the Treasury

DLN: 93493102014111

OMB No. 1545-0047

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.

Open to Public Inspection

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization **Employer identification number** HOUSTON LIVESTOCK SHOW AND RODEO INC 74-1142851 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 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2b Number of conservation easements on a certified historic structure included in (a) 20 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 3 tax year 🟲 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

d Equipment .

Sche	dule D (Form 990) 2019								P	age 2
Par	Organizations Ma	intaining Collections o	of Art, Histori	cal Treas	ures, or	Other S	imilar As	sets (conti	inued)	
3	Using the organization's acquitems (check all that apply):	isition, accession, and other	records, check	any of the f	ollowing t	hat are a s	ignificant u	se of its coll	lection	
а	Public exhibition		d	☐ Loar	n or excha	ange progra	ams			
b	☐ Scholarly research		e	☐ Oth	er					
С	Preservation for future	generations								
4	Provide a description of the o Part XIII.	rganization's collections and	explain how the	ey further th	ne organiz	ation's exe	mpt purpos	se in		
5	During the year, did the organ assets to be sold to raise fund							☐ Yes	□ No	
Par		odial Arrangements. anization answered "Yes	" on Form 990	, Part IV,	line 9, or	r reported	an amou	nt on Forn	n 990, Pa	rt
1 a	Is the organization an agent,									
	included on Form 990, Part X	<i>.</i>						☐ Yes	∐ No	
	TE "Was " sometime that a management			4-1-1	ı		Λ.	nount		
b c	If "Yes," explain the arranger Beginning balance	•	-		ŀ	1c	AI	ilount		
d	Additions during the year				l	1d				
e	Distributions during the year					1e				
f	• •					1f				
•	Ending balance				,					
2a	Did the organization include a	an amount on Form 990, Par	t X, line 21, for	escrow or c	ustodial a	ccount liab	ility?	∐ Yes	∐ No	
b	If "Yes," explain the arrangen	nent in Part XIII. Check her	e if the explanat	ion has beei	n provided	d in Part XI	II			
Pa	rt V Endowment Fund		U am Farma 000	Deut IV	lina 10					
	Complete if the org	anization answered "Yes (a) Currer		rior year		ears back (d) Three yea	rs back (e)	Four years b	ack
1 a	Beginning of year balance .	_ · · ·	(-)	, , , , , , , , , , , , , , , , , , , ,	(-)	,	,	(-)	, ,	
b	Contributions									_
С	Net investment earnings, gains	s, and losses								
d	Grants or scholarships									
e	Other expenditures for facilities									
f	Administrative expenses .									
g	End of year balance									
2	Provide the estimated percen	tage of the current year end	l balance (line 1	a, column (a	a)) held a	s:		<u> </u>		_
а	Board designated or quasi-en	ndowment >		, ,	,,					
b	Permanent endowment >									
С	Temporarily restricted endow	ment >								
_	The percentages on lines 2a,	***************************************	0%.							
3a	Are there endowment funds no organization by:	not in the possession of the	organization tha	t are held a	nd admini	stered for t	the		Yes N	lo
	(i) unrelated organizations							3a(i)		
	(ii) related organizations .							3a(ii)		
b	If "Yes" on 3a(ii), are the rela	-	•					3b		
4	Describe in Part XIII the inter		n's endowment	funds.						
Pai	t VI Land, Buildings, a		" on Form 000	Dart IV	lino 11a	Soo Form	1 000 Day	+ V lino 1	Λ	
	Description of property	anization answered "Yes (a) Cost or other basis	(b) Cost or other			umulated der			ook value	
	= 135p.s.s or property	(investment)	2 , 22 2. 22.00	- (/	``			(-, 0		
1 2	Land	118,575		120,715,810	1				120,83	4 385
	Buildings	110,575			+				120,03	-,505
	Leasehold improvements			37,702,873	3	1	8,417,078		19 28	35,795

45,792,716

27,401,895

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

30,281,948

12,917,663

15,510,768

14,484,232

170,115,180

	Complete if the organization answered "Yes" on (a) Description of security or category	(b) Book value	(c) Metho	d of valuation:	
1) Financial	(including name of security)		Cost or end-of	-year market value	
(2) Closely-l	held equity interests				
	ATIVE INVESTMENTS	20,692,227		F	
В)					
C)					
D)					
E)					
F)					
G)					
H)					
	The second second Second COO Book V and COV (Sec. 12.)	20.602.227			
Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12.) Investments—Program Related.	20,692,227			
	Complete if the organization answered 'Yes' on (a) Description of investment	Form 990, Part IV, line 1	1c. See Form 990, (b) Book value	Part X, line 13. (c) Method of valuation:	
	(a) Description or investment		(B) Book Value	Cost or end-of-year market	
1)				value	
2)					
3)					
4)					
5)					
6)					
7)					
8)					
9)					
otal. (Columi	n (b) must equal Form 990, Part X, col.(B) line 13.)				
			▶		
Part IX	Other Assets.	Form 000 Down TV Brook	1d Co- F 000 F	- V line 15	
	Other Assets. Complete if the organization answered 'Yes' on (a) Description	Form 990, Part IV, line 1	1d. See Form 990, Par	(b) Book value	
1)DUE FRO	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES	Form 990, Part IV, line 1	1d. See Form 990, Par	(b) Book value 25,421,972	
1)DUE FRO 2)INTERES	Other Assets. Complete if the organization answered 'Yes' on (a) Description	Form 990, Part IV, line 1	1d. See Form 990, Par	(b) Book value	
1)DUE FRO 2)INTERES	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES	Form 990, Part IV, line 1	1d. See Form 990, Pai	(b) Book value 25,421,972	
1)DUE FRO 2)INTERES 3)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES	Form 990, Part IV, line 1	1d. See Form 990, Pai	(b) Book value 25,421,972	
1)DUE FRO 2)INTERES 3) 4)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES	Form 990, Part IV, line 1	1d. See Form 990, Par	(b) Book value 25,421,972	
1)DUE FRO 2)INTERES 3) 4) 5)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES	Form 990, Part IV, line 1	▶ 1d. See Form 990, Pai	(b) Book value 25,421,972	
1)DUE FRO 2)INTERES 3) 4) 5) 6)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES	Form 990, Part IV, line 1	1d. See Form 990, Pai	(b) Book value 25,421,972	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES	Form 990, Part IV, line 1	1d. See Form 990, Pai	(b) Book value 25,421,972	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE	Form 990, Part IV, line 1	▶ 1d. See Form 990, Pai	(b) Book value 25,421,972 53,028	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7) 8) 9)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.)	Form 990, Part IV, line 1	1d. See Form 990, Pai	(b) Book value 25,421,972	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7) 8) 9)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE			(b) Book value 25,421,972 53,028 25,475,000 990, Part X, line 25.	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of	Form 990, Part IV, line 1		(b) Book value 25,421,972 53,028	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of income taxes	Form 990, Part IV, line 1		(b) Book value 25,421,972 53,028 25,475,000 990, Part X, line 25. (b) Book value 0	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7) 8) 9) Otal. (Column Part X 1) Federal i 2) PENSION	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of income taxes	Form 990, Part IV, line 1		(b) Book value 25,421,972 53,028 25,475,000 25,475,000 990, Part X, line 25. (b) Book value	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7) 8) 9) fotal. (Column Part X 1) Federal in 2) PENSION 3) DEPOSIT 4) INTERES	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of income taxes	Form 990, Part IV, line 1		(b) Book value 25,421,972 53,028 25,475,000 25,475,000 990, Part X, line 25. (b) Book value 0 15,014,838	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal i 2) PENSION 3) DEPOSIT 4) INTERES 5)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of income taxes I LIABILITY	Form 990, Part IV, line 1		(b) Book value 25,421,972 53,028 25,475,000 25,475,000 990, Part X, line 25. (b) Book value 0 15,014,838 1,847,809	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7) 8) 9) fotal. (Column Part X 1) Federal i 2) PENSION 3) DEPOSIT 4) INTERES 5)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of income taxes I LIABILITY	Form 990, Part IV, line 1		(b) Book value 25,421,972 53,028 25,475,000 25,475,000 990, Part X, line 25. (b) Book value 0 15,014,838 1,847,809	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal in 2) PENSION 3) DEPOSIT 4) INTERES 5) 6)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of income taxes I LIABILITY	Form 990, Part IV, line 1		(b) Book value 25,421,972 53,028 25,475,000 25,475,000 990, Part X, line 25. (b) Book value 0 15,014,838 1,847,809	
1)DUE FRO 2)INTERES 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1. 1) Federal i 2) PENSION 3) DEPOSIT 4) INTERES 5) 6) 7)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of income taxes I LIABILITY	Form 990, Part IV, line 1		(b) Book value 25,421,972 53,028 25,475,000 25,475,000 990, Part X, line 25. (b) Book value 0 15,014,838 1,847,809	
(1) DUE FRO (2) INTERES (3) (4) (5) (6) (7) (8) (9) (otal. (Colunt Part X (1) Federal i (2) PENSION (3) DEPOSIT (4) INTERES (5) (6) (7) (8)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of income taxes I LIABILITY	Form 990, Part IV, line 1		(b) Book value 25,421,972 53,028 25,475,000 25,475,000 990, Part X, line 25. (b) Book value 0 15,014,838 1,847,809	
(1) DUE FRO (2) INTERES (3) (4) (5) (6) (7) (8) (9) Fotal. (Column Part X L. (1) Federal in (2) PENSION (3) DEPOSIT (4) INTERES (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of income taxes I LIABILITY	Form 990, Part IV, line 1		(b) Book value 25,421,972 53,028 25,475,000 25,475,000 990, Part X, line 25. (b) Book value 0 15,014,838 1,847,809	
(2) INTERES (3) (4) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal in (2) PENSION (3) DEPOSIT (4) INTERES (5) (6) (7) (8) (9) (10)	Other Assets. Complete if the organization answered 'Yes' on (a) Description M AFFILIATES T RECEIVABLE mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities. Complete if the organization answered 'Yes' on (a) Description of income taxes I LIABILITY	Form 990, Part IV, line 1	1e or 11f.See Form	(b) Book value 25,421,972 53,028 25,475,000 25,475,000 990, Part X, line 25. (b) Book value 0 15,014,838 1,847,809	

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

	Complete if the organization answered 'Yes' on Form 990, Part	IV, li	ne 12a	١.		
1	Total expenses and losses per audited financial statements				1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
_	Other losses	20				1

Other (Describe in Part XIII.) Add lines 2a through 2d . . 2e 3 3 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4b b

Add lines **4a** and **4b** 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5

Part XIII Supplemental Information

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) 2019

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

Return Reference Explanation

Page 4

Schedule D (Form 990) 2019 Part XIII Supplemental Inform	mation (continued)	Page 5
Return Reference	Explanation	
		Schedule D (Form 990) 2019

efile GRAPHIC print - DO NOT PROCESS DLN: 93493102014111 As Filed Data -OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2019 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** HOUSTON LIVESTOCK SHOW AND RODEO INC 74-1142851 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (such as, program service, describe for and investments and independent fundraising, program specific type of in the region region contractors in the services, investments, grants service(s) in the region region to recipients located in the region) Central America and the Investments 6,192,484 Caribbean 6,192,484 3a Sub-total . b Total from continuation sheets to Part I . . . 6,192,484 c Totals (add lines 3a and 3b)

	uplicated if addit	(c) Number of		(a) Mannay of as -1-	(f) Amount of	(a) Decembring	(h) Math
ype of grant or assistance	(b) Region	recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page 4
Par	TIV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☑ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)		
	Corporations. (See Instructions for Form 3471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	☑ Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see Instructions for Form 6665)	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	Yes	☑ No

	Page	chedule F (Form 990) 2019	Schedu
required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting m vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting olumn (c) (estimated number of recipients), as applicable. Also complete this part to pr	ditures per region); Part II, line 1 (accounting method); Part III (accounting (estimated number of recipients), as applicable. Also complete this part to provide	amounts of investments vs.	Part
Explanation	Explanation	ReturnReference	
		_	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493102014111 OMB No. 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization HOUSTON LIVESTOCK SHOW AND RODEO INC 74-1142851 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations ☐ Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50083H Schedule G (Form 990 or 990-EZ) 2019

Pa	Fundraising Events. Complet than \$15,000 of fundraising e				
	gross receipts greater than \$		gross income on Form	1 990-LZ, ililes I aliu o	b. List events with
		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		Western Gala	Silent Auction	<u>5</u>	col. (c))
		(event type)	(event type)	(total number)	
Revenue					
	1 Gross receipts	221,730	156,850	587,325	965,905
	2 Less: Contributions	84,610	121,465	476,026	682,101
	3 Gross income (line 1 minus line 2)	137,120	35,385	111,299	283,804
	4 Cash prizes				
se	5 Noncash prizes	1,223	112	15,167	16,502
Direct Expenses	6 Rent/facility costs			39,900	39,900
ភ្ន	7 Food and beverages 8 Entertainment	71,904	37,788	55,741	165,433
ਰ	9 Other direct expenses	800 52,697	3,650 22,449	26,700 76,131	31,150 151,277
<u>-</u> ∣] 32,03/	22,773	70,131	131,277
בֿ	· ·	through 9 in column (d)		•	404 262
ΔĪ	10 Direct expense summary. Add lines 4 t	. ,		.	404,262 -120,458
	10 Direct expense summary. Add lines 4 t 11 Net income summary. Subtract line 10 11 Gaming. Complete if the organization.	from line 3, column (d)	s" on Form 990, Part I	▶ V, line 19, or reported	-120,458
Par	10 Direct expense summary. Add lines 4 t	from line 3, column (d)	(b) Pull tabs/Instant bingo/progressive bingo	V, line 19, or reported (c) Other gaming	-120,458
	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 till Gaming. Complete if the organism on Form 990-EZ, line 6a.	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-120,458 more than \$15,000 (d) Total gaming (add
S Revenue	10 Direct expense summary. Add lines 4 t 11 Net income summary. Subtract line 10 11 Gaming. Complete if the organization.	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-120,458 more than \$15,000 (d) Total gaming (add
S Revenue	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 111 Gaming. Complete if the organism on Form 990-EZ, line 6a.	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-120,458 more than \$15,000 (d) Total gaming (add
S Revenue	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-120,458 more than \$15,000 (d) Total gaming (add
Par	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-120,458 more than \$15,000 (d) Total gaming (add
S Revenue	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-120,458 more than \$15,000 (d) Total gaming (add
S Revenue	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	from line 3, column (d) anization answered "Ye (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	-120,458 more than \$15,000 (d) Total gaming (add
S Revenue	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	rom line 3, column (d) anization answered "Ye (a) Bingo Yes	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	-120,458 more than \$15,000 (d) Total gaming (add
S Keverkie	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	rom line 3, column (d) anization answered "Ye (a) Bingo Yes % No Chrough 5 in column (d)	(b) Pull tabs/Instant bingo/progressive bingo Yes % No	(c) Other gaming Yes	-120,458 more than \$15,000 (d) Total gaming (add
S Revenue	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organ on Form 990-EZ, line 6a. 1 Gross revenue	rom line 3, column (d) anization answered "Ye (a) Bingo Yes % No Chrough 5 in column (d) t line 7 from line 1, column (d) anization answered "Yes The second of the s	(b) Pull tabs/Instant bingo/progressive bingo Yes % No n (d)	(c) Other gaming Yes % No	-120,458 more than \$15,000 (d) Total gaming (add
u Bured Expenses Reversing a	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organization on Form 990-EZ, line 6a. 1 Gross revenue	(a) Bingo Yes % No Chrough 5 in column (d) It line 7 from line 1, column (d) aming activities in each of	(b) Pull tabs/Instant bingo/progressive bingo Yes	(c) Other gaming Yes % No	-120,458 more than \$15,000 (d) Total gaming (add col.(a) through col.(c))
u Bured Expenses Reversing a	10 Direct expense summary. Add lines 4 to 11 Net income summary. Subtract line 10 to 11 Gaming. Complete if the organization on Form 990-EZ, line 6a. 1 Gross revenue	(a) Bingo (a) Bingo Yes % No Chrough 5 in column (d) It line 7 from line 1, column con conducts gaming activities in each of the column (d) The conducts gaming activities in each of the column (d) The conducts gaming activities in each of the column (d)	(b) Pull tabs/Instant bingo/progressive bingo Yes % No No (d)	(c) Other gaming Yes % No	-120,458 more than \$15,000 (d) Total gaming (add col.(a) through col.(c))

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age 3
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	Пио	
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes		
13	Indicate the percentage of gam	ing activity conducted in:					
а	The organization's facility .			13a			%
b	An outside facility			13b			%
14	Enter the name and address of	the person who prepares the organ	nization's gaming/special events books and	records:			
	Name •						
	Address >						
15a			m the organization receives gaming		· 🗆 Yes	Пио	
b	If "Yes," enter the amount of g	aming revenue received by the orgained by the third party $ ightharpoons$ $ angle$	anization ▶ \$ and	the			
c	If "Yes," enter name and addre	ss of the third party:					
	Name •						
	Address •						
16	Gaming manager information:						
	Name 🟲						
	Gaming manager compensation	1 ▶ \$					
	Description of services provided	d ▶					
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions:						
а	•		stributions from the gaming proceeds to		□Yes	Пио	
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spen	Ī	□ 1es		
		pt activities during the tax year 🕨	•				
Pai			ions required by Part I, line 2b, colum licable. Also provide any additional inf				s.
	Return Reference		Explanation				

efile GRAPHIC print - DO N	NOT PROCESS	As Filed Data -					DL	N: 93493102014111
Note: To capture the full co	ntent of this d	ocument, please sel	lect landscape mode	e (11" x 8.5") whe	n printing.			
Schedule I		Grants and O	thar Accietanc	o to Organiz	ations			DMB No. 1545-0047
(Form 990)			ther Assistanc		•			2019
			and Individuals		-			4017
	Co	mplete if the organiza	tion answered "Yes," o Attach to Form		, line 21 or 22.			Open to Public
Department of the Treasury		► Go to www	v.irs.gov/Form990 for		on.			Inspection
Internal Revenue Service								
Name of the organization HOUSTON LIVESTOCK SHOW AND	PODEO INC						Employer identific	cation number
HOUSTON LIVESTOCK SHOW AND	KODEO INC						74-1142851	
Part I General Informa	tion on Grants	and Assistance						
 Does the organization maint the selection criteria used to Describe in Part IV the organization Part II Grants and Other And the control of the con	o award the grants nization's procedur	or assistance? es for monitoring the use	e of grant funds in the Un	ited States.		·	990 Part IV line	Yes No
		can be duplicated if add		iits: complete ii the o	rgamzacion answered Tes	3 011101111	1 JJO, Tart IV, IIIIe	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		Description of ash assistance	(h) Purpose of grant or assistance
(1) HOUSTON LIVESTOCK SHOW & RODEO EDUCATIONAL FUND 3 NRG Park HOUSTON, TX 77054	76-0260204	501(C)(3)	895,000		N/A	N/A		THE EDUCATION FUND SUPPORTS HLSR'S PURPOSE.
2 Enter total number of section	n 501(c)(3) and go	overnment organizations	listed in the line 1 table .				•	1
3 Enter total number of other							•	
For Paperwork Reduction Act Notice				Cat. No. 50055				edule I (Form 990) 2019

FORM 990, SCHEDULE I, PART I, GRANT POLICY HOUSTON LIVESTOCK SHOW AND RODEO MAKES GRANTS TO THE AFFILIATED ORGANIZATION, HOUSTON LIVESTOCK SHOW AND RODEO LINE 2 EDUCATIONAL FUND (EIN: 76-0260204), IN SUPPORT OF SCHOLARSHIP AND EDUCATIONAL GRANTS AWARDED.

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49310	2014	111
Sch	nedule J	Co	mpensati	ion Information	0	MB No.	1545-0	0047
(For	m 990)	For certain Office	rs, Directors, T	rustees, Key Employees, and Hig	hest			
		► Complete if the orga		ited Employees ered "Yes" on Form 990, Part IV,	, line 23.	20)
Б			▶ Attach	to Form 990. instructions and the latest inform		Open i		
•	tment of the Treasury al Revenue Service	P do to <u>www.ms.gov</u>	7 <u>77 01111990</u> 101	mstructions and the latest mion		Insp	ectio	n
	me of the organizations of the organization of	ation SHOW AND RODEO INC			Employer identifica	tion nu	ımber	
					74-1142851			
Pa	rt I Questi	ons Regarding Compensat	ion				I	
1 a	Check the appro	oniate hov(es) if the organization	provided any of	the following to or for a person liste	d on Form		Yes	No
La				y relevant information regarding the				
	☐ First-class	s or charter travel		Housing allowance or residence for	personal use			
		companions		Payments for business use of perso	nal residence			
	✓ Tax idemi	nification and gross-up payments		Health or social club dues or initiation				
	☐ Discretion	nary spending account		Personal services (e.g., maid, chauf	ffeur, chef)			
b	If any of the bo	xes on Line 1a are checked, did t	he organization	follow a written policy regarding pay	ment or			
		•		ve? If "No," complete Part III to expl	ain	1 b	Yes	
2				or allowing expenses incurred by all r, regarding the items checked on Lir	ne 1a? . .	2	Yes	
_	•	•						
3		if any, of the following the filing i EO/Executive Director. Check all		d to establish the compensation of the not check any boxes for methods	ne			
				CEO/Executive Director, but explain i	in Part III.			
	✓ Compens	ation committee		Written employment contract				
	✓ Independ	ent compensation consultant	✓	Compensation survey or study				
	☑ Form 990	of other organizations	\checkmark	Approval by the board or compensa	tion committee			
4	During the year related organiza		90, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	-	ance payment or change-of-cont	rol payment?			4a	Yes	
b		r receive payment from, a supple				4b	103	No
c	Participate in, o	r receive payment from, an equit	y-based comper	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	provide the app	licable amounts for each item in Part	t III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9				
5			_	the organization pay or accrue any				
	compensation c	ontingent on the revenues of:						
а	The organization	n?				5a		No
b		anization?				5b		No
•	,	,		bb				
6		ontingent on the net earnings of:		the organization pay or accrue any				
а	The organization	n?				6a		No
b	Any related orga	anization?				6b		No
	· ·	6a or 6b, describe in Part III.						
7				the organization provide any nonfixe rt III		7		No
8				red pursuant to a contract that was	occribo			
				section 53.4958-4(a)(3)? If "Yes," de		8		No
9	If "Yes" on line	8. did the organization also follow	v the rebuttable	presumption procedure described in	Regulations section			110
-						9		
For F	Panerwork Redu	iction Act Notice, see the Inst	ructions for Fo	orm 990. Cat No. 5	50053T Schedule	(Forn	990)	2019

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

(A) Name and Title	(B) Breal	kdown of W-2 and/o compensation	or 1099-MISC	and other	(D) Nontaxable benefits	columns	(F) Compensation in
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prio Form 990
See Additional Data Table							

Schedule J (Form 990) 2019	Page 3
Part III Supplemental Inform	nation
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
Return Reference	Explanation
	Senior managers have split dollar life insurance policy. Taxable benefit is reported on W-2 and salary is grossed up to cover the tax on this benefit. not provided on lany other benefits.
	The state of the s

Schedule 1 (Form 990) 2019

Additional Data

1JILL HABENICHT CLEMENT (i)

DIR: FRMR EXEC DIR TICKETS&ADIM

President (THROUGH 5/22/20)

2CHRIS BOLEMAN

05/25/20)

PRESIDENT (STARTING

3JENNIFER HAZELTON

4SHERRY HIBBERT

GENERAL COUNSEL

CHIEF INFORMATION OFFICER

6STEVE GUMERMAN

7MICHAEL T DEMARCO

8GEORGE BAYLESS

Managing Director -Entertain.

EXECUTIVE DIRECTOR -MARKETING

9LISA GAGNON

MANAGING DIRECTOR - IS

CHIEF SHOW OPERATIONS

5ANDY SLOAN

OFFICER

CHIEF FINANCIAL OFFICER

1JOEL COWLEY

(ii)

(i)

(ii)

(i)

(ii)

(i)

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i) Base Compensation

147,714

458,634

231,956

333,012

312,066

340.594

216,090

228,640

224,622

192.326

Software ID:

(ii)

Bonus & incentive

compensation

Software Version:

EIN: 74-1142851

(iii)

Other reportable

compensation

50,212

3,881

1,253

1,512

6,781

6,083

2,026

5,635

6,401

906

other deferred

compensation

52,528

75,494

6,264

72,173

84,341

84,171

65,673

75,861

-1,221

6,369

benefits

30,480

31,001

23,429

13,489

13,489

27,401

30,844

13,350

23,125

30,679

(E) Total of columns

(B)(i)-(D)

293,934

594,010

279,602

443,386

434,912

479,749

318,433

340,486

256,637

246,480

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

Name:	HOUSTON LIVESTOCK SHOW AND RODEO INC	

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable

13,000

25,000

16,700

23,200

18,235

21,500

3,800

17,000

3,710

16,200

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Schedule L Transacti			sactio	ns with li	ntereste	d Persor	าร			OI	MB No.	1545	0047
(Form 990 or 990	-EZ) ► Compl	ete if the org	anization a	answered "Yes	on Form 9	90, Part IV, li	ines 2	5a, 2	25b, 26	5,	20	11	Q
			► Atta	8c, or Form 99 ch to Form 99	0 or Form 99	0-EZ.							
Department of the Trea Internal Revenue Servi	,	•Go to <u>www.i</u>	rs.gov/Fo	<u>m990</u> for inst	ructions and	the latest inf	forma	tion.		9	Open t Insp		
Name of the orga	anization						Er	nplo	yer ide	ntifica	ation n		
HOUSTON LIVESTO	OCK SHOW AND ROI	DEO INC					74	-114	2851				
Part I Exce	ss Benefit Tra	ansactions (section 501	(c)(3), section	501(c)(4), and	d section 501(c				s only)).		
	lete if the organiz												
1 (a) Name of disqua	alified person	(b)	Relationship be	etween disqua organization	lified person ar	nd		escript ansacti		(d) Y e		ected? No
							+				1	:5	NO
							+						
2 Enter the ar	mount of tax incu	urred by the ord	ganization r	managers or dis	qualified perso	ons during the	year u	ınder	section	n			
4958	nount of tax, if a						·			\$ —			
3 Enter the ar	mount of tax, if a	iny, on line 2, a	above, reim	bursed by the c	rganization .		•			\$			
Con	ans to and/or nplete if the orga orted an amount	nization answe	red "Yes" o	n Form 990-EZ	. Part V, line 3	38a, or Form 99	90, Pai	rt IV,	line 26	; or if	the org	anizat	ion
(a) Name of	(b) Relationshi	p (c) Purpose	(d) Loan	to or from the	(e) Original		(g)			h)) Writ	
interested person	with organizatio	on of loan	orga	nization?	principal amount	due	defa	uit?	Appro boar	vea by rd or	ag	reem	ent?
					1					nittee?	ļ., ,		
			То	From			Yes	No	Yes	No	Yes		No
Total .				1	<u> </u> ▶ \$								
	nts or Assista	nce Benefit	ina Inter										
	plete if the or	ganization an	swered "Y	es" on Form 9	990, Part IV,	, line 27.							
(a) Name of inter		b) Relationship		(c) Amount	of assistance	(d) Type (of assi	stanc	e	(e) Pu	rpose o	f assi	stance
	"	nterested perso organizat											
		<u>-</u>											
For Paperwork Red	luction Act Notice	. see the Instru	ctions for Fo	rm 990 or 990-l	-7 - C	at. No. 50056A		Sci	adula I	(Form	990 or	990-1	7) 201

No

Nο

No

Nο

Nο

No

Nο

Schedule L (Form 990 or 990-EZ) 2019

organization's

revenues? Yes

Page 2

Lone Star ExLet it FlyMonte Caro
Buckles of TXJustin Time
STI Graphics Inc

(1)

(2)

(4) Executive Toys

(6) S V Surveying Inc

Part V

(5) BAYOU CITY EVENT CENTER

Return Reference

(a) Name of interested person

(b) Relationship between interested person and the organization
OWNED BY BOARD MEMBER

Complete if the organiza	ation answered "Yes" on Form	n 990, Part IV, line 28	3a, 28b, or 28c.
Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction
ar ExLet it FlyMonte Caro	OWNED BY BOARD MEMBER	1,032,654	PROVIDER OF PRODUCT
of TXJustin Time	OWNED BY BOARD MEMBER	678,895	PROVIDER OF PRODUCT
ohics Inc	OWNED BY BOARD MEMBER	829,442	PROVIDER OF PRODUCT
re Toys	OWNED BY BOARD MEMBER	231,148	PROVIDER OF PRODUCT
CITY EVENT CENTER	OWNED BY BOARD MEMBER	241,874	PROVIDER OF FACILITY
veying Inc	owned by board member	111,855	provider of services
Supplemental Inform Provide additional information	ation ion for responses to questions on	Schedule L (see instruc	tions).
eturn Reference	·	Explana	tion

DLN: 93493102014111 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection **Employer identification number** Name of the organization HOUSTON LIVESTOCK SHOW AND RODEO INC 74-1142851 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art—Historical treasures **3** Art—Fractional interests 4 Books and publications 5 Clothing and household goods Cars and other vehicles **7** Boats and planes . . . 8 Intellectual property . . . Securities—Publicly traded . Χ 291,216 VALUE ON RECEIPT 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (______ Other ▶ (______) 26 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2
	tion. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization
is reporting in Part I, colu complete this part for an	umn (b), the number of contributions, the number of items received, or a combination of both. Also y additional information.
Return Reference	Explanation
	Schedule M (Form 990) (2019)

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CCHEDIII	ΕΛ	0 1		. =	00 57	OMB No. 1545-0047
► Attach		vide information fo or 990-EZ or to prov	r responses to specific questi ide any additional informatio	ons on	2019	
			n 990 or 990-EZ. <u>90</u> for the latest information.		Open to Public Inspection	
Namel Betherofg HOUSTON LIVESTO 990 Schedule	OCK SHOW AND	RODEO INC	n		74-1142851	fication number
Return Reference				Explanation		
FORM 990, PART I , LINE 1 & FORM 990, PART III, LINE 1	ANNUAL, F	AMILY-FRIENDLY EXP	ERIENCE THAT EDU	CK SHOW AND RODEO PROMO CATES AND ENTERTAINS THE YEAR-ROUND EDUCATIONAL	E PUBLIC, SUPPO	RTS TEXAS YOUTH,

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	FAMILY AND BUSINESS RELATIONSHIPS THE FOLLOWING RELATIONSHIPS EXIST BETWEEN OFFICERS AND D IRECTORS: DOUGLAS LAMAR DOYLE & JAMES ROBERT TAYLOR: BUSINESS RELATIONSHIP RONALD GARY EUB ANKS & JAMES HUNTER LIGHTFOOT: BUSINESS RELATIONSHIP GERALD LYNN NUNEZ & STEVEN LEE ROE: B USINESS RELATIONSHIP SERVEN LEE ROE: B USINESS RELATIONSHIP PANDE SAMUEL MONTALBANO & JOHN JOSEPH MONTALBAND: BUSINESS RELATIONSHIP GERALD LYNN NUNEZ & JAMES MICHAEL MUSHINSKI: BUSINESS RELATIONSHIP ROBERT BEN KNEPPLER, JR., JACK ALLEN LYONS, ROBERT EDWARD PAINE IV, RYAN OLIVER SMITH, & REGAN ELIZABETH MILLE R: BUSINESS RELATIONSHIP POBERT CHARLES HUX, BRADY FARLEY CARRUTH, EDGAR CLAY GRIFFIN, & H UGH DENNIS STEGER: BUSINESS RELATIONSHIP PARES OLIVER SUSINESS RELATIONSHIP PARES OLIVER BUSINESS RELATIONSHIP PARES OLIVER BLOODWORTH, MICHAEL T. DEMARCO, DONLEY DUARD JORDAN, JOHN OLIVER SMITH, P. MICHAEL WELLS, JAMES MARVIN WINDAM JR., WESLEY EDWARD SINOR, PATTRICIA MANN PHILLIPS, JULIAN PERRY HUNNICUTT III, & GEORGE RAYMOND HINSLEY III: BUSINESS RELATIONSHIP HUGH CHRISTIAN RICHARDSON, JENNIFER GOETZMAN HIRSCH, & MATTHEW RICHARD FUQUA: BUSINESS RELATIONSHIP JOE VAN MATRE & JAMES ALFRED WINNEE III: BUSINESS RELATIONSHIP HUGH DENNIS STEGER & ROBERT HAMPTON CLAY: BUSINESS RELATIONSHIP RUSSELL WAYNE ALLEN, TODD ARLIS RIDDLE, & GARY ALAN DEBAKEY: BUSINESS RELATIONSHIP JOE BRUCE HANCOCK & LARRY RAY KERBOW: BUSINESS RELATIONSHIP JAMD ARY JAY CARTER & JOHN NICHOLAS GANNUKOS: BUSINESS RELATIONSHIP DENNIS DUANE WOLFORD & ALI CIA B. JIMERSON-KNOX: BUSINESS RELATIONSHIP MICHAEL EUGENE CLEPPER & MICHAEL DWAYNE BELL: BUSINESS RELATIONSHIP JOHN OLIVE R SMITH, JOE VAN MATRE, & MICHAEL SUSINESS RELATIONSHIP JOHN OLIVE R SMITH, JOE VAN MATRE, & MICHAEL SUSINESS RELATIONSHIP JOHN OLIVE R SMITH, JOE VAN MATRE, BUSINESS RELATIONSHIP DAVID WAYNE KOONCO & CARLY HURDERSHINK: BUSINESS RELATIONSHIP JOHN OLIVE R SMITH SO

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	ERT LEN O'SHIELES & KELLY LYNN O'SHIELES: FAMILY RELATIONSHIP RUDOLPH HARROLL STEVENS, JR. & JAMES ROBERT TAYLOR: FAMILY RELATIONSHIP RUDOLPH HARROLL STEVENS, JR. & Robert Lloyd Be cker Jr.: FAMILY RELATIONSHIP JAMES ROBERT TAYLOR & Robert Lloyd Becker Jr.: FAMILY RELATIONSHIP P. MICHAEL WELLS & PERRY MICHAEL WELLS TAYLOR & Robert Lloyd Becker Jr.: FAMILY RELATIONSHIP P. MICHAEL WELLS & PERRY MICHAEL WELLS JR. & CLAYTON THOMSON WELLS: FAMILY RELATIONSHIP Hugh Christian Richardson & Matthew Richard Fuqua: FAMILY RELATIONSHIP Patrick Aaron Walker & Thomas Anthony Walker: FAMILY RELATIONSHIP John ROGER Morton & E ric Martin Huegele: FAMILY RELATIONSHIP JOHN RALPH BRANIFF & JOHN RALPH BRANIFF JR.: FAMILY RELATIONSHIP JEFFREY DEE HILDEBRAND & BRADFORD GLENN HILDEBRAND: FAMILY RELATIONSHIP JAC K ALLEN LYONS & FRANK ALLEN LYONS: FAMILY RELATIONSHIP JOHN OLIVER SMITH & RYAN OLIVER SMI TH: FAMILY RELATIONSHIP PATRICK DECLAN PENNINGTON & STEVEN HAROLD GORDON: FAMILY RELATIONSHIP JOSTIN CONSTONIA WHITE & WILLIAM ROBERT WHITE: FAMILY RELATIONSHIP WAYNE HOLLIS JR. & JOHN E. HOLLIS: FAMILY RELATIONSHIP CLAIR MAURICE BRANCH & JULIE JONES SHANNON: FAMILY RELATIONSHIP CLAIR MAURICE BRAN CH & CLAIR BARCLAY BRANCH: FAMILY RELATIONSHIP CLAIR BARCLAY BRANCH: FAMILY RELATIONSHIP CLAIR BARCLAY BRANCH & JULIE JONES SHANNON: FAMILY RELATIONSHIP JAMES CHARLES VANHOOZER, JR. & LISA CHRISTINE NGUYEN: FAMILY RELATION SHIP GEORGE ALFRED BUSCHARDT & GEORGE A. BUSCHARDT JR.: FAMILY RELATIONSHIP DONLEY DUARD J ORDAN & CHRISTOPHER W. CUNNINGHAM: FAMILY RELATIONSHIP CHARLES RAYMOND ROBINSON & CHARLES ANDREW ROBINSON: FAMILY RELATIONSHIP NOEL ROBERT SMITH & LAWRENCE JOSEPH BIEDIGER: FAMILY RELATIONSHIP COURTNEY CELLUM ADAME & LARRY LEE CARROLL: FAMILY RELATIONSHIP JAMES ALLEN KE NT & VANESSA KENT STOBERG: FAMILY RELATIONSHIP JAMES DARYL VERBOIS III & MICHELLE VERBOIS WASAFF: FAMILY RELATIONSHIP

Return

Reference	Explanation
FORM 990,	EXECUTIVE COMMITTEE AN EXECUTIVE COMMITTEE IS ELECTED BY THE HLSR BOARD OF DIRECTORS. THE
PART VI,	PURPOSE OF THE EXECUTIVE COMMITTEE IS TO GIVE IMMEDIATE AID, COUNSEL AND AUTHORITY TO THE OFFICERS
SECTION B,	AND MANAGERS OF HLSR AND TO CARRY OUT THE RULES, REGULATIONS, PURPOSES AND POLICIES OF THE BOARD
LINES 1, 6,	OF DIRECTORS. THE EXECUTIVE COMMITTEE REPORTS TO AND IS RESPONSIBLE DIRECTLY TO THE BOARD OF
7A & 7B	DIRECTORS. DURING THE INTERVAL BETWEEN MEETINGS OF THE BOARD OF DIRECTORS, THE EXECUTIVE
	COMMITTEE POSSESSES AND MAY EXERCISE THE POWERS OF THE BOARD OF DIRECTORS NECESSARY OR
	CONVENIENT FOR THE MANAGEMENT. CONTROL AND DIRECTION OF THE BUSINESS AND AFFAIRS OF HLSR.

Explanation

990 Schedule O, Supplemental Information

Return

Reference	
FORM 990,	FORM 990 REVIEW PROCESS THE AUDIT COMMITTEE, A SUB-COMMITTEE OF THE EXECUTIVE COMMITTEE, ALONG
PART VI,	WITH OUTSIDE TAX SPECIALISTS, REVIEW THE RETURN WITH SENIOR MANAGEMENT. THE AUDIT COMMITTEE THEN
SECTION B,	RECOMMENDS APPROVAL OF THE TAX RETURNS INCORPORATING ANY CHANGES THEY SUGGEST TO THE
LINE 11B	EXECUTIVE COMMITTEE WHICH THEN GIVE FINAL APPROVAL.

Explanation

Return Explanation
Reference

LINE 12C

FORM 990, CONFLICT OF INTEREST POLICY HLSR DISTRIBUTES A CONFLICT OF INTEREST/FORM 990 QUESTIONNAIRE
PART VI, ANNUALLY. THE COMPLETED QUESTIONNAIRES ARE REVIEWED BY HLSR'S GENERAL COUNSEL AND ARE PROVIDED SECTION B, TO ACCOUNTING FOR DISCLOSURE ON THE TAX RETURN WHERE APPROPRIATE.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINES 15A & 15B	COMPENSATION POLICY HOUSTON LIVESTOCK SHOW AND RODEO HAS A COMPENSATION COMMITTEE WHICH REVIEWS PERFORMANCE OF THE CEO ANNUALLY. THE COMPENSATION COMMITTEE RECOMMENDS OR REVIEWS AND APPROVES COMPENSATION FOR THE CEO AND ALL OF SENIOR MANAGEMENT. THE COMMITTEE USES COMPENSATION STUDIES DONE BY OUTSIDE CONSULTANTS IN THEIR DECISION MAKING PROCESS.

Return Explanation

FORM 990, PART VI, SECTION C, LINE 19

DOCUMENTS MADE AVAILABLE TO THE PUBLIC HLSR'S GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC BY REQUEST. IN ADDITION, SUMMARIZED FINANCIALS ARE AVAILABLE ON THE SHOW'S WEBSITE (WWW.HLSR.COM).

Return Reference	Explanation	
FORM 990, PART IV.	EXPLANATION OF COMBINED AUDIT REPORT THE HOUSTON LIVESTOCK SHOW & RODEO, INC., THE HOUSTON LIVESTOCK SHOW & RODEO EDUCATIONAL FUND (EIN: 76-0260204) AND CORRAL CLUB. INC. (EIN: 74-2079763) HAVE A	l
LINE 12 &	COMBINED AUDIT REPORT. HOUSTON LIVESTOCK SHOW & RODEÓ, INC. HAS AN AUDIT COMMITTEE CHARGED WITH	l
FORM 990, PART XII.	RESPONSIBILITY FOR THE OVERSIGHT OF THE COMBINED AUDITED FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT. STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT.	ı
LINE 2		ı

Return Explanation Reference

FORM 990. OTHER CHANGES IN NET ASSETS OR FUND BALANCES PENSION COSTS 872.889 ------ TOTAL 872.889 PART XI.

LINE 9

Return Explanation
Reference

LINE 11G

FORM 990 DESCRIPTION:MULTIMEDIA PRODUCTION TOTAL FEES:5032889
PART IX

Return Explanation
Reference

FORM 990 DESCRIPTION:SECURITY/CROWD CONTROL TOTAL FEES:1925764
PART IX
LINE 11G

Return Explanation
Reference

FORM 990 DESCRIPTION:CLEANING AND WASTE REMOVAL TOTAL FEES:1802962
PART IX
LINE 11G

Return Explanation
Reference

FORM 990 DESCRIPTION:MEAT PROGRAM TOTAL FEES:1455122
PART IX
LINE 11G

Return Explanation
Reference

LINE 11G

FORM 990 DESCRIPTION:CONSULTING TOTAL FEES:1244546
PART IX

990 Schedule O, Supplemental Information Return Explanation Reference

FORM 990 DESCRIPTION:OTHER TOTAL FEES:7854918
PART IX
LINE 11G

990 Schedule O, Supplemental Information

Return Explanation

Reference	
FORM 990	DESCRIPTION:AWARDS-EXHIBITORS/PARTICIPANTS TOTAL EXPENSES:3862565 PROGRAM SERVICES:3823098
PART IX	MANAGEMENT AND GENERAL:FUNDRAISING:39467
LINE 24 -	
OTHER	
EXPENSES	

990 Schedule O, Supplemental Information

Return

Reference	
FORM 990	DESCRIPTION:CREDIT CARD COMMISSIONS TOTAL EXPENSES:1988110 PROGRAM SERVICES:1330052 MANAGEMENT
PART IX	AND GENERAL:384005 FUNDRAISING:274053
LINE 24 -	ļ .
OTHER	ļ .
EXPENSES	

Explanation

Return Reference	Explanation
FORM 990 PART IX LINE 24 - OTHER EXPENSES	DESCRIPTION:STAR MERCHANDISE TOTAL EXPENSES:541693 PROGRAM SERVICES:541693 MANAGEMENT AND GENERAL:FUNDRAISING:

990 Schedule O, Supplemental Information

Return Explanation

Reference

	Ittererence	
	FORM 990	DESCRIPTION:CONSUMABLES TOTAL EXPENSES:521552 PROGRAM SERVICES:521552 MANAGEMENT AND
	PART IX	GENERAL:FUNDRAISING:
	LINE 24 -	
l	OTHER	
l	EXPENSES	

990 Schedule O, Supplemental Information

Return Explanation

Deference

Reference	
FORM 990	DESCRIPTION:OTHER EXPENSES TOTAL EXPENSES:2879010 PROGRAM SERVICES:1025141 MANAGEMENT AND
PART IX	GENERAL:812251 FUNDRAISING:1041618
LINE 24 -	
OTHER	
EXPENSES	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2019

DLN: 93493102014111

Open to Public Inspection

Name of the organization HOUSTON LIVESTOCK SHOW AND RODEO INC Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (a) (b) (c) (d) (e) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets D												
Part I Identification of Disregarded Entities. Complete	if the organ	ization answei	red "Yes	s" on Form !	990, Part	IV, line 3		.142831				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity		rity	(c) Legal domicile (state or foreign country)		(d) Total income		me End-of-year as		(f Direct co ent	(f) t controlling entity	
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	ons. Comple	te if the orgar	nization	answered "	'Yes" on F	orm 990,	Part I	V, line 34 be	ecause i	t had one or	· more	
(a) Name, address, and EIN of related organization	Prima	(b) ry activity		(c) omicile (state ign country)	(d Exempt Co) de section		(e) charity status tion 501(c)(3))	Dire	(f) ect controlling entity	Section (13) co	
(1)HLSR EDUCATIONAL FUND 3 NRG PARK	SCHOLARSHI	PS		TX	501(c)(3)		12, I		HLSR		Yes Yes	No
HOUSTON, TX 77054 76-0260204											<u> </u>	
For Paperwork Reduction Act Notice, see the Instructions for Form	990.		Ca	t. No. 50135	<u> </u> Y				Sched	lule R (Form	990) 20	119

(a) Name, address, and E related organizatio	EIN of on	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominani income(related, excluded fror tax under sections 512)	d, total incom			tions?	(i) Code V-UE amount in h 20 of Schedule K (Form 106	t in box managin of partner ale K-1 1065)		(k) Percenta owners
								Yes	No		Ye	s No	
												+	
Identification of Related Orgobecause it had one or more related Name, address, and EIN of related organization	ganizations Taxable as a Cated organizations treated as	a corporation	or Trus on or tru (c) Legal omicile e or foreign	st during th	(d) ct controlling T	(e) ype of entity corp, S corp, or trust)	swered "Yes	Share	(g) e of end- year assets	-of- Pei	(h) centage	e 9	 13) cont
because it had one or more relations (a) Name, address, and EIN of	ated organizations treated as	do (state	on or tru (c) Legal omicile	st during th	(d) ct controlling T entity	(e) ype of entity corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Pei	(h) centage	e 9	13) conti entity
because it had one or more rela (a) Name, address, and EIN of related organization	ated organizations treated as (b) Primary activity	do (state	on or tru (c) Legal omicile or foreign ountry)	st during th	(d) ct controlling T entity	(e) ype of entity corp, S corp, or trust)	(f) Share of total	Share	(g) e of end- year	-of- Pei	(h) centage	e 9	13) conti entity
because it had one or more related (a) Name, address, and EIN of related organization L CLUB INC KK TX 77054	ated organizations treated as (b) Primary activity	do (state	on or tru (c) Legal omicile or foreign ountry)	st during th	(d) ct controlling T entity	(e) ype of entity corp, S corp, or trust)	(f) Share of total	Share	(g) e of end- year	-of- Pei	(h) centage	e 9	13) conti entity
because it had one or more related (a) Name, address, and EIN of related organization L CLUB INC KK TX 77054	ated organizations treated as (b) Primary activity	do (state	on or tru (c) Legal omicile or foreign ountry)	st during th	(d) ct controlling T entity	(e) ype of entity corp, S corp, or trust)	(f) Share of total	Share	(g) e of end- year	-of- Pei	(h) centage	e 9	13) conti entity
because it had one or more related (a) Name, address, and EIN of related organization L CLUB INC KK TX 77054	ated organizations treated as (b) Primary activity	do (state	on or tru (c) Legal omicile or foreign ountry)	st during th	(d) ct controlling T entity	(e) ype of entity corp, S corp, or trust)	(f) Share of total	Share	(g) e of end- year	-of- Pei	(h) centage	e 9	13) conti entity
because it had one or more related (a) Name, address, and EIN of related organization L CLUB INC KK TX 77054	ated organizations treated as (b) Primary activity	do (state	on or tru (c) Legal omicile or foreign ountry)	st during th	(d) ct controlling T entity	(e) ype of entity corp, S corp, or trust)	(f) Share of total	Share	(g) e of end- year	-of- Pei	(h) centage	e 9	13) conti entity
because it had one or more related (a) Name, address, and EIN of related organization L CLUB INC KK TX 77054	ated organizations treated as (b) Primary activity	do (state	on or tru (c) Legal omicile or foreign ountry)	st during th	(d) ct controlling T entity	(e) ype of entity corp, S corp, or trust)	(f) Share of total	Share	(g) e of end- year	-of- Pei	(h) centage	e 9	(i) Section 5: 13) contribution entity Yes

Schedule R (Form 990) 2019		Par	ge 3
Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1 d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	10	Yes	
p Reimbursement paid to related organization(s) for expenses	1 p		No
q Reimbursement paid by related organization(s) for expenses	1q	Yes	
r Other transfer of cash or property to related organization(s)	1r	\dashv	No

			l	1
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
0	Sharing of paid employees with related organization(s)	10	Yes	
р	Reimbursement paid to related organization(s) for expenses	1 p		No
q	Reimbursement paid by related organization(s) for expenses	1 q	Yes	
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			
	(a) Name of related organization (b) Transaction type (a-s) (c) Method of determining a	mount i	involve	d
(1) H	LSR Educational Fund B, N, 895,000 ACTUAL			
(2) Co	orral Club Inc N, O, 1,030,070 ACTUAL			

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

Provide the following information for each entity taxed as a partner was not a related organization. See instructions regarding exclusion	ship through w n for certain inv	hich the or estment p	rganization co artnerships.	nduc	ted more than	five perce	ent of its acti	vities (measur	red t	oy total assets	or gross i	rever	nue) that				
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Ar	(e) The all partners section 501(c)(3) Toganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?			(j) General or managing partner?		managing		box managing		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No					
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Schedule R (Form 990) 2019				
Part VII	Supplemental Info	ormation		
	Provide additional infor	mation for responses to questions on Schedule R. (see instructions).		
Return Reference		Explanation		