Form **990**

(Rev. January 2020)

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047 **2019**

Open to Public Inspection

<u>A</u>	For	the	2019 calendar y	ear, or tax year beginr	ning	08-01	, 2019, a	and endin	g	07	-31 , 20 20	
В	Chec	ck if ap	pplicable:	C Name of organizationRe	no Rodeo Foundation					D Emplo	yer identification number	
X	Addr	ess ch	nange	Doing business as							88-0230538	
	Nam	e char	nge	Number and street (or P.0	D. box if mail is not delivered to street address	s)		Room/suite	e	E Teleph	one number	
П	Initial	l returi	n	500 Damonte Ran	nch Parkway			وا	80		(775) 322-9875	
П			n/terminated		vince, country, and ZIP or foreign postal code					G Gross	<u> </u>	
П		nded r		Reno, NV 89521	,,,,					\$	834,484	
Ħ			pending	· · · · · · · · · · · · · · · · · · ·	ncipal officer: Clara Andriola				H(a) Is this a gr			
ш	Дри	ication		Same as C above	·				H(b) Are all su			
_	Toy	ovomn	ot status: X 501) 4 (insert no.) 4947(a)(1) or	527					t. (see instructions)	
<u>'</u>						527						
<u>J</u>		site:		enorodeofoundat		1			H(c) Group			
	art l		ganization: X Corp	poration Trust Ass	ociation Other	L Ye	ear of formati	ion: 1986	o M S	tate of lega	al domicile: NV	
Г	11 (1			u								
			•	•	on or most significant activities:	_					riches the lives	
e	of Northern Nevada families by aiding children with extraordinary needs, supporting community projects, and providing scholarships. Also, the Foundation serves to foster an appreciate for the sport and history of rodeo. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a)											
an												
ern				_								
Š					discontinued its operations or disp					1 _ 1		
<u>«</u>			-	-	· , , ,			••••		3	14_	
es				_	s of the governing body (Part VI, lin					4	14_	
Ξ					calendar year 2019 (Part V, line 2a					5	2	
Ç				volunteers (estimate if n						6	107	
•					Part VIII, column (C), line 12	• • • •				7a	0	
		b	Net unrelated bu	isiness taxable income t	from Form 990-T, line 39			<u> </u>		7b	0	
						Prior Year		Current Year				
				d grants (Part VIII, line					689	,123	742,231	
ΞŒ		9	Program service	revenue (Part VIII, line	2g)			•			0	
Revenue	1	10	Investment incon	me (Part VIII, column (A), lines 3, 4, and 7d)			-	54	,733	82,238	
æ	1	11	Other revenue (F	Part VIII, column (A), lin	es 5, 6d, 8c, 9c, 10c, and 11e)			-		(927)	1,032	
	_ 1	12	Total revenue - a	add lines 8 through 11 (r	must equal Part VIII, column (A), lin	e 12)			742	,929	825,501	
	1	13	Grants and simila	ar amounts paid (Part I)	X, column (A), lines 1-3)				291	,773	260,170	
	1	14	Benefits paid to d	or for members (Part IX	, column (A), line 4)			-			0	
	1	15	Salaries, other co	ompensation, employee	e benefits (Part IX, column (A), lines	s 5-10)			99	,006	129,041	
Expenses	1				olumn (A), line 11e)					,	0	
en				expenses (Part IX, colu		2						
X	.		_	(Part IX, column (A), lin					452	,865	328,336	
	1				equal Part IX, column (A), line 25)					,644	717,547	
	1			penses. Subtract line 1						,715)	107,954	
	-			\	7			Begins	ning of Curre		End of Year	
sts c	au 2	20	Total assets (Par	t X. line 16)					2,208		2,268,748	
Asse	Ba		Total liabilities (P						· · · · · · · · · · · · · · · · · · ·	,198	14,472	
Net Assets or	ء ا 2 ا		`	nd balances. Subtract li	ne 21 from line 20				2,140		2,254,276	
	art l		Signature							,		
					n, including accompanying schedules and sta	atements, and	to the best	of my knowle	dge and belief	f, it is		
true	e, corr	rect, ar	nd complete. Declarat	tion of preparer (other than office	cer) is based on all information of which prepare	arer has any l	knowledge.					
			Clara A	Andriola								
Sig	gn		Signature of c							Dat	e	
He	re		Clara A	Andriola, Execut	tive Director							
				name and title	tive bilector							
			Print/Type preparer		Preparer's signature	Da	ate		Check	□ if	PTIN	
Pa	id		** * *				5-10-20	121		_	xxxxxxxx	
		rer	Firm's name		Connie Christiansen	μe	,- <u>10-20</u>		self-emp m's EIN	юyeu	ΛΛΛΛΛΛΛ	
	•	nly	Tillio lidilio	COMMITTE C	hristiansen CPA							
-55	. J	· · · · y	riiiis address					Ph	one no.	775 4	112_4004	
Mar	/ the	IP¢	discuss this rotur	Reno NV							113-4084 X Yes No	
ivia	, uie	II (3	u130435 11115 1814	iii wiiii iile preparei SNC	ייייי מאטאב: (פבב ווופנו עכנוטוופ)							

4d	4d Other program services (Describe on Schedule O.)										
	(Expenses \$ including grants of	\$) (Revenue \$)							

628,846

Total program service expenses

Reno Rodeo Foundation
Checklist of Required Schedules Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A · · · · · · · · · · · · · · · · · ·	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	۰		
	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	8		X
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	-		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
_	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
40	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ь	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	1-75		
. •	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			_
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		х
20 a		20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	

9) Reno Rodeo Foundation
Checklist of Required Schedules (continued) Part IV

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			l
	organization's current and former officers, directors, trustees, key employees, and highest compensated			ĺ
	employees? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			l
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			ĺ
	through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		<u> </u>
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		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			l
	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		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			l
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			l
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			l
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			l
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	0.7		
20	persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part	27		X
28	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? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If</i>			
	"Yes," complete Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M · · · · · · · · · · · · · · · · · ·	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			l
	complete Schedule N, Part II · · · · · · · · · · · · · · · · · ·	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			l
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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	256		
36		35b		
30	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		v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		X
01	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	х	l
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		1

19) Reno Rodeo Foundation
Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
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 2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? • • • • • • • • • • • • • • • • • • •	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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?	6a		х
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282? · · · · · · · · · · · · · · · · · · ·	7с		х
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		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			

Part VI

Reno Rodeo Foundation 88-0230538
Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	Check if Schedule O contains a response or note to any line in this Part VI			. X
000	tion A. Governing Body and Management	1	V	N-
10	Enter the number of voting members of the governing body at the end of the tax year		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct	_		
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
6	Did the organization have members or stockholders?	6		х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? • • • Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12b	Х	
С	describe in Schedule O how this was done	12c	v	
13	Did the organization have a written whistleblower policy?	13	Х	х
14	Did the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by		^	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
b	Other officers or key employees of the organization	15b		х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
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 Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	☐ Mother's website ☐ Wighter ☐ Wighter ☐ Mother (explain on Schedule O)			
19	Describe on 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			

Clara Andriola (775)322-9875, 500 Damonte Ranch Parkway, Reno, NV 89521

Form	990	(201	191

88-0230538

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Check this box if heither the organization nor any relati	eu organizalio	JII COII	ipen	sale	u an	ly Curre	ill C	bilicer, director, or t	usiee.	
				(C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average	٠,				nan one s both an		Reportable	Reportable	Estimated amount
	hours					/trustee)		compensation	compensation	of other
	per week			_				from the organization	from related organizations	compensation from the
	(list any hours for	or c	Inst	Officer	Key	Hig	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	vidu	itutio	Cer	key employee	hest	mer			related organizations
	organizations	al tro	onal t		ploye	com				
	below	Individual trustee or director	Institutional trustee		ф	pens				
	dotted line)		ě			Highest compensated employee				
(1) Jeff_Turnipseed	2.00									
President		X		Х				0	0	0
(2) Scott Peterson	2.00	l								
Vice-President		Х		Х				0	0	0
(3) Debra Herman	2.00									
Secretary		Х		Х				0	0	0
(4) Linda Bissett	1.00									
Trustee		Х						0	0	0
(5) Sharon Smith	2.00									
Treasurer	1 00	Х		Х				0	0	0
(6) John Breternitz	1.00	l						•		
Trustee (7) Watting Growth	1 00	Х						0	0	0
(7) Katie Coombs	1.00	٠,,						•		
Trustee (9) Company Property	1 00	Х						0	0	0
(8) Craig Downie	1.00							•		
Ex-Officio Member	1 00	Х						0	0	0
(9) Dr. Larry Frugoli, DMD	1.00	٠,,						0	0	0
Trustee (10) Took Troops	1 00	Х						U	0	<u> </u>
(10)Josh_Iveson Trustee	1.00	х						0	o	0
(11)Michael Lee	1.00							•	•	
Trustee		х						0	0	0
(12)Honorable Ron Parraguirre	1.00							•		
Trustee	=	х						0	0	0
(13)Laura Rader	1.00									
Trustee	=	х						0	0	0
(14)Honorable Jack Schroeder	1.00									
Trustee		х						0	0	0
	•	•							•	F

Fait	Section A. Officers, Directors, Trustees	, key Empic	yees,	and	Hig	nes	t Com	pen	sated Employees	(continuea)				
					((C)								
	(A)	(B)	l ,.			sition			(D)	(E)			(F)	
	Name and title	Average	,				han one s both a		Reportable	Reportable		Estim	ated am	ount
		hours					r/trustee		compensation	compensation			of other	
		per week							from the	from related			npensati	on
		(list any	오 =	<u>_</u>	Q	Ž	역 표	Ę	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	,		om the	and
		hours for	divid	stitu	Office	Key employee	nplo	Former	(** 2, 1000 111100)	(11 2/1000 111100	′	-	l organiz	
		related organizations	ctor	tions	٦	mg/c	st co	"						
		below	Individual trustee or director	nstitutional trustee		yee	mp							
		dotted line)	e	stee			Highest compensated employee							
							ted							
(4.5)-				\vdash							_			
	ad_Sidener	1.00												
Trust			Х	\vdash	_				0		0			0
	ke_Torvinen	1.00												
Ex-Of	ficio Member		Х						0		0			0
(17)C1	ara Andriola	40.00												
Execu	tive Director				х				92,908		0		10,4	145
<u>(18)</u> _														
(19)														
(20)														
<u> </u>														
(21)														
<u>'</u> '														
(22)														
(22)														
(00)					-						_			
<u>(23)</u>			7				ľ							
					$\overline{}$									
<u>(24)</u>														
<u>(25)</u>														
1b	Subtotal							. •						
С	Total from continuation sheets to Part VII, Sect	ion A .												
d	Total (add lines 1b and 1c)								92,908		0		10,4	 145
2	Total number of individuals (including but not limite							mor						
	reportable compensation from the organization			,										0
													Yes	No
3	Did the organization list any former officer, directo	r tructoo ko	v amnl	0.000	or	hiah	neet co	mne	neated				100	
3	employee on line 1a? If "Yes," complete Schedule			-		_						3		.,
											• •	3		Х
4	For any individual listed on line 1a, is the sum of re													
	organization and related organizations greater than													
	individual · · · · · · · · · · · · · · · · · · ·											4		X
5	Did any person listed on line 1a receive or accrue	•		-			-		ation or individual					
	for services rendered to the organization? If "Yes,"	complete Sc	hedule	e J fo	r su	ıch p	person				• •	5		Х
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensa	ated independ	dent co	ontra	ctors	s tha	at rece	ived	more than \$100,00	00 of				
	compensation from the organization. Report comp	ensation for t	the cal	enda	ır ye	ar e	nding	with	or within the organi	zation's tax yea	ar.			
	(A)								(B)			(C)		
	Name and business addres	s							Description of service	es	C	Compens	ation	
									·					
-														
	Total number of independent contractors /including	hut not limit	od to t	hooo	licta	od c	hove)	L Who						
4	Total number of independent contractors (including received more than \$100,000 of compensation from				note.	ou a	nove)	VVIIO						

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) (B) (C) Total revenue Revenue excluded Related or exempt Unrelated function revenue business revenue from tax under sections 512-514 Federated campaigns 1a b 1b Contributions, Gifts, Grants and Other Similar Amounts c 1c 14,000 Related organizations 1d Government grants (contributions) . . 1e 69,482 All other contributions, gifts, grants, and similar amounts not included above 1f 658,749 Noncash contributions included in 1g 126,211 h Total. Add lines 1a-1f 742,231 **Business Code** 2a Program Service Revenue f All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 82,238 82,238 Income from investment of tax-exempt bond proceeds 5 Royalties (ii) Personal (i) Real 6a Gross rents 6a **b** Less: rental expenses • • c Rental income or (loss) 6с **d** Net rental income or (loss) (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory **b** Less: cost or other basis 7a Other Revenue and sales expenses . . c Gain or (loss) 7c d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 10,015 **W**7... **b** Less: direct expenses 8b 8,983 c Net income or (loss) from fundraising events 1,032 1,032 9a Gross income from gaming activities, See Part IV, line 19 9a **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a 10b **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellanous Revenue 11a e Total. Add lines 11a-11d

83,270

0

0

825,501

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to a	any line in this Part IX			
Do n	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D) Fundraising
8b, 9	9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	144,170	144,170		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	116,000	116,000		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	116,314	88,881	16,827	10,606
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,855	1,521	149	185
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	10,872	8,915	870	1,087
11	Fees for services (nonemployees):				
а	Management				
b	Legal	1,656		1,656	
С	Accounting	11,000		11,000	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees	10,733		10,733	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	10,804	4,660	6,144	
12	Advertising and promotion	30,966	26,850		4,116
13	Office expenses	12,412		12,412	
14	Information technology				
15	Royalties				
16	Occupancy	18,692	17,056	727	909
17	Travel	4,068	1,335	2,733	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest · · · · · · · · · · · · · · · · · · ·				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,070		2,070	
23	Insurance	5,091	4,240	851	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Distributed donated items	125,936	125,936		
b	Denim Drive and Teddy Bears	63,182	63,182		
С	Reading Room expenses	13,246	13,246		
d	Program printing & flyers	10,525	10,525		
е	All other expenses	7,955	2,329		5,626
25	Total functional expenses. Add lines 1 through 24e	717,547	628,846	66,172	22,529
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				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2019) 88-0230538 Reno Rodeo Foundation Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 Cash - non-interest-bearing 127,889 184,885 2 2 562,270 493,842 3 Pledges and grants receivable, net 11,148 3 4 Accounts receivable. net 4 5 Loans and other receivables from 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 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 Assets 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 1,710 210 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 24,520 b Less: accumulated depreciation 10b 17,578 2,912 10c 6,942

	16	Total assets. Add lines 1 through 15 (must equal line 33)	2,208,726	16	2,268,748
	17	Accounts payable and accrued expenses	53,111	17	14,47
	18	Grants payable	15,087	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			

1,502,797

11

12 13

14

15

22

23

32

33

2,254,276

2,268,748

2,140,528

2,208,726

1,582,869

11

12

13

14 15

23

-iabilities

Net Assets or Fund Balances

32

33

Investments - publicly traded securities

Investments - other securities. See Part IV, line 11

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

controlled entity or family member of any of these persons

and complete lines 27, 28, 32, and 33.

Total liabilities and net assets/fund balances

Secured mortgages and notes payable to unrelated third parties

trustee, key employee, creator or founder, substantial contributor, or 35%

	Organizations that follow FASB ASC 958, check here			
26	Total liabilities. Add lines 17 through 25	68,198	26	14,472
	of Schedule D		25	
	parties, and other liabilities not included on lines 17-24). Complete Part X			
25	Other liabilities (including federal income tax, payables to related third			
24	Unsecured notes and loans payable to unrelated third parties		24	

27	Net assets without donor restrictions	1,852,279	27	1,918,410
28	Net assets with donor restrictions	288,249	28	335,866
	Organizations that do not follow FASB ASC 958, check here			
	and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds		31	

Form **990** (2019) EEA

Form	1990 (2019) Reno Rodeo Foundation	88-023053	8	Pa	age 1 2
	rt XI Reconciliation of Net Assets	70 02000	<u> </u>		<u> </u>
	Check if Schedule O contains a response or note to any line in this Part XI				. 🔲
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		825,	501
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		717,	547
3	Revenue less expenses. Subtract line 2 from line 1	. 3		107,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4	2,	140,	528
5	Net unrealized gains (losses) on investments	. 5		5,	794
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	. 10	2,	254,	276
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. x
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	<u> </u>			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the guidit review or compilation of its financial statements and selection of an independent accountant?		20	v	

EEA Form **990** (2019)

3a

If the organization changed either its oversight process or selection process during the tax year, explain on

Single Audit Act and OMB Circular A-133?

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

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 on Schedule O and describe any steps taken to undergo such audits

Schedule O.

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

2019 Open to Public

OMB No. 1545-0047

Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

88-0230538 Reno Rodeo Foundation Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes 12 of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (iv) Is the organization (v) Amount of monetary (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Section A. Public Support

990 or 990-EZ) 2019 Reno Rodeo Foundation 88-0230538
Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Ca	lendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,063,280	1,023,048	755,326	689,123	742,231	4,273,008
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	1,063,280	1,023,048	755,326	689,123	742,231	4,273,008
5	The portion of total contributions by						_
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						1,109,144
6	Public support. Subtract line 5 from line 4						3,163,864
Se	ction B. Total Support					•	
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	1,063,280	1,023,048	755,326	689,123	742,231	4,273,008
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from			/			
	similar sources	18,024	13,114	36,163	39,999	82,238	189,538
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						_
	loss from the sale of capital assets						
	(Explain in Part VI.)	64,111					64,111
11	Total support. Add lines 7 through 10						4,526,657
	Gross receipts from related activities, etc. (se				l.	12	
13	First five years. If the Form 990 is for the or	•			•	` , ,	,
	organization, check this box and stop here						▶ 🗌
	ction C. Computation of Public Suppo						
	Public support percentage for 2019 (line 6, c		•			14	69.89 %
	Public support percentage from 2018 Sched					15	76.83 %
16a	a 33 1/3% support test - 2019. If the organiza						_
	box and stop here . The organization qualified						
ı	o 33 1/3% support test - 2018. If the organiza						
	this box and stop here . The organization qua	-		-			_
17a	a 10%-facts-and-circumstances test - 2019.	-					
	10% or more, and if the organization meets t				•		
	Part VI how the organization meets the "facts			-	-		ted
	organization						▶ ∐
ı	0 10%-facts-and-circumstances test - 2018.						ne
	15 is 10% or more, and if the organization m					•	
	Explain in Part VI how the organization meet				•	•	cly
	supported organization						▶ ∐
18	Private foundation. If the organization did n						_
	instructions						▶ ∐

88-0230538

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

	tion A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
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						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 •						
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						
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						_
	line 6.)						
	ction B. Total Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources • •						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether						
12	or not the business is regularly carried on Other income. Do not include gain or						
14	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the org	L ganization's fir	st second thire	Ld fourth or fift	l h tax vear as a	section 501(c)	(3)
	organization, check this box and stop here	-			-		· ·
Sec	ction C. Computation of Public Support						<u>U</u>
	Public support percentage for 2019 (line 8, c			column (f)) .		15	%
	Public support percentage from 2018 Sched	, ,	-			16	%
	ction D. Computation of Investment In						•
	Investment income percentage for 2019 (line			ne 13, column	(f))	17	%
	Investment income percentage from 2018 Sc				. , ,	18	%
	33 1/3% support tests - 2019. If the organize					than 33 1/3%, a	and line
	17 is not more than 33 1/3%, check this box						
b	33 1/3% support tests - 2018. If the organize	-	-	•			
	line 18 is not more than 33 1/3%, check this	box and stop l	nere. The orga	nization qualifi	es as a publicly	supported org	anization 🕨 🗌
20	Private foundation. If the organization did n	ot check a box	on line 14, 19	a, or 19b, chec	k this box and	see instructions	s 🕨 🗌

88-0230538

Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3a		
	Ja		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b 5c		
	30		
	e		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	10b		
A (Fo	rm 990 (or 990-E	Z) 2019

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.

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.

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

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Pa	rt v Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anız	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru			
	instructions. All other Type III non-functionally integrated supporting organizat	ions	s must complete Sections	A through E.
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
СО	llection of gross income or for management, conservation, or			
ma	aintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
ins	structions for short tax year or assets held for part of year):			
а	0 /	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	actors (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,			
se	e instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6_	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8_	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C - Distributable Amount			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			
en	nergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally in	tegr	ated Type III supporting o	organization (see
	instructions)			

Par	t V Type III Non-Functionally Integrated 509(a)(3)) Supporting Organiz	zations (continued)	
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exem			
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	s of supported organizati	ons	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	organization is respons	ive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
<u>10</u>	Line 8 amount divided by line 9 amount			
S	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			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Carryover from 2014 not applied (see instructions)			
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			
С	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. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			

e Excess from 2019

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

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

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Attach to Form 990 or Form 990-EZ.

Complete if the organization is described below. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. **Open to Public**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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 organization **Employer identification number** 88-0230538 Reno Rodeo Foundation Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 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 Volunteer hours for political campaign activities (see instructions) Part I-B 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 2 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? No 3 No If "Yes." describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 3 Did the filing organization file Form 1120-POL for this year? 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. (b) Address (a) Name (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds If none enter -0promptly and directly delivered to a separate political organization. If none, enter -0-. (1) (2) (3) (4) (5)

Sche	dule C (Form 990 or 990-EZ) 2019 Reno Rodeo Foundation	88-02305	38 Page 2
Pa	complete if the organization is exempt under section 501(c)(3) and filed section 501(h)).	Form 5768 (elect	tion under
A	Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group men address, EIN, expenses, and share of excess lobbying expenditures).	mber's name,	
<u>B</u>	Check ► ☐ if the filing organization checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" means amounts paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)		
b	Total lobbying expenditures to influence a legislative body (direct lobbying)		
С	Total lobbying expenditures (add lines 1a and 1b)		
d	Other exempt purpose expenditures	717,547	
е	Total exempt purpose expenditures (add lines 1c and 1d)	717,547	
f	Lobbying nontaxable amount. Enter the amount from the following table in both		

•	Lobbying nontaxable amount. Enter the amount nom	the following table in both		
_	columns.		132,632	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% of line 1f)		33,158	
h	Subtract line 1g from line 1a. If zero or less, enter -0-			
i	Subtract line 1f from line 1c. If zero or less, enter -0-			

4-Year Averaging Period Under section 501(h)

..... Yes

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

reporting section 4911 tax for this year?

	Lobbying Expenditures During 4-Year Averaging Period										
	Calendar year (or fiscal year beginning in)	(;	a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total				
2a	Lobbying nontaxable amount		129,544	181,584	122,460	132,632	566,220				
b	Lobbying ceiling amount (150% of line 2a, column (e))						849,330				
С	Total lobbying expenditures										
d	Grassroots nontaxable amount		32,386	45,396	30,615	33,158	141,555				
е	Grassroots ceiling amount (150% of line 2d, column (e))			<u></u>			212,333				
f	Grassroots lobbying expenditures										

EEA Schedule C (Form 990 or 990-EZ) 2019

	lule C (Form 990 or 990-EZ) 2019 Reno Rodeo Foundation	88-	0230	38	Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fi (election under section 501(h)).	led F	orm 5	5768	
For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(;	a)	(b)	
	cription of the lobbying activity.	Yes	No	Amoun	ıt
1	During the year, did the filing organization attempt to influence foreign, national, state or local				
	legislation, including any attempt to influence public opinion on a legislative matter or				
	referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did 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		_		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			4.	
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), (or sec	tion	
	501(c)(6).			1	1
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3 D a	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	· · ·		ion	
га	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Ol				R ie
	answered "Yes."	· (D)	aiti		, 13
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	•	•		
_	political expenses for which the section 527(f) tax was paid).				
2	Current year		2a		
h	Carryover from last year		2b		
c	Total · · · · · · · · · · · · · · · · · · ·		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
•	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying				
	and political expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
	rt IV Supplemental Information		•		
Prov	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line e instructions); and Part II-B, line 1. Also, complete this part for any additional information.	es 1 an	d		

EEA Schedule C (Form 990 or 990-EZ) 2019

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization

OMB No. 1545-0047

2019

Open to Public Inspection

Name	of the organization		Employer identification number
Ren	o Rodeo Foundation		88-0230538
Pa	rt I Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or Accou	unts.
	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)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wri	ting that the assets held in donor advised	
	funds are the organization's property, subject to the organization		· · · · · · · · · · · · · · · · · · ·
6	Did the organization inform all grantees, donors, and donor adv	•	
	only for charitable purposes and not for the benefit of the donor		
	conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·
Pa			
	Complete if the organization answered "Yes" or	Form 990. Part IV. line 7.	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or educ	· · · · · · · · · · · · · · · · · · ·	f a historically important land area
	Protection of natural habitat		f a certified historic structure
	Preservation of open space	Treservation of	a defined filsterie structure
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of a con-	nservation
_	easement on the last day of the tax year.	conservation contribution in the form of a con	
•	•		Held at the End of the Tax Year 2a
a			
b	ŷ ,		
C	Number of conservation easements on a certified historic struct	m (»)	· · 2c
d	Number of conservation easements included in (c) acquired aft	er 7/25/06, and not on a	
•			
3	Number of conservation easements modified, transferred, release	ised, extinguished, or terminated by the organ	nization during the
	tax year		
4	Number of states where property subject to conservation easer		
5	Does the organization have a written policy regarding the period		П., П.,
	violations, and enforcement of the conservation easements it he		
6	Staff and volunteer hours devoted to monitoring, inspecting, ha	ndling of violations, and enforcing conservation	on easements during the year
_		and the state of t	and the state of t
7	Amount of expenses incurred in monitoring, inspecting, handlin	g of violations, and enforcing conservation ea	asements during the year
_	\$		(5)(1)
8	Does each conservation easement reported on line 2(d) above		
_			- -
9	In Part XIII, describe how the organization reports conservation	·	
	balance sheet, and include, if applicable, the text of the footnote	e to the organization's financial statements th	at describes the
Do	organization's accounting for conservation easements. rt III Organizations Maintaining Collections	of Art Historical Transuras or C	Other Cimiler Accets
Pa			Other Similar Assets.
_	Complete if the organization answered "Yes" o		
1a	If the organization elected, as permitted under FASB ASC 958,	•	
	of art, historical treasures, or other similar assets held for public		ance of public
	service, provide, in Part XIII the text of the footnote to its financi		
b	If the organization elected, as permitted under FASB ASC 958,	•	
	art, historical treasures, or other similar assets held for public e	xhibition, education, or research in furtherand	ce of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X · · · · · · · · ·		
2	If the organization received or held works of art, historical treas	ures, or other similar assets for financial gain	, provide the
	following amounts required to be reported under FASB ASC 95	•	
а	Revenue included on Form 990, Part VIII, line 1 · · · · ·		▶ \$
h	Assets included in Form 990 Part X		▶ \$

	ıle D (Form 990) 2019 Reno Rodeo Founda					88-023			ge 2	
Pai	t III Organizations Maintaining C	ollections of	Art, Historical 1	Treasures,	or Oth	ner Similar A	ssets (c	ontinu	ed)	
3	Using the organization's acquisition, accession, a	and other records,	check any of the follo	wing that mak	e signific	cant use of its				
	collection items (check all that apply):									
а	Public exhibition d Loan or exchange programs									
b	☐ Scholarly research e ☐ Other									
С										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part									
	XIII.									
5	During the year, did the organization solicit or rec	eive donations of a	art, historical treasure	es. or other sim	nilar					
	assets to be sold to raise funds rather than to be		•	•				s 🗆	No	
Pai	Part IV Escrow and Custodial Arrangements.									
	Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form									
	990, Part X, line 21.		,	,	,					
1a	Is the organization an agent, trustee, custodian or	r other intermediar	v for contributions or	other assets r	not					
							□ Ye	s 🗆	No	
b	If "Yes," explain the arrangement in Part XIII and							• 🗆		
	in res, explain the arrangement in rate xin and	complete the follow	wing table.			Δη	nount			
•	Beginning balance				1c		lount			
q	Boginning Balanco				1d					
d	radiabile dailing are year				1e	 				
e	Dietibatione daming the your				1f					
f					' —				No.	
2a	Did the organization include an amount on Form				•		. ∐ Ye	一三	No	
Pa	If "Yes," explain the arrangement in Part XIII. Che t V Endowment Funds.	eck nere it the expir	anation has been pro	ovided on Part	XIII •			• 🗆		
Га	Complete if the organization ans	ewered "Vee"	on Form 000 Pa	art IV line 1	0					
	Complete if the organization and						1			
		(a) Current year	(b) Prior year	(c) Two years		(d) Three years back		r years ba		
1a	Beginning of year balance	1,617,782	1,301,666	1,271,	794	1,202,399	1,	175,6	95	
b	Contributions		250,000							
С	Net investment earnings, gains, and									
	losses	87,755	80,368	84,	314	117,685	i	34,1	.89	
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs		1,954	40,	000	40,000)			
f	Administrative expenses	10,733	12,298	14,	442	8,290)	7,4	85	
g	End of year balance	1,694,804	1,617,782	1,301,	666	1,271,794	1,	202,3	99	
2	Provide the estimated percentage of the current y	year end balance (l	line 1g, column (a)) h	neld as:						
а	Board designated or quasi-endowment	100.00 %								
b	Permanent endowment •%									
С	Term endowment • %									
	The percentages on lines 2a, 2b, and 2c should e	equal 100%.								
3a	Are there endowment funds not in the possession	of the organizatio	n that are held and a	dministered fo	r the					
	organization by:							Yes	No	
	(i) Unrelated organizations						- 3a(i)		х	
	(ii) Related organizations						- 3a(ii)		х	
b	If "Yes" on line 3a(ii), are the related organizations	s listed as required	d on Schedule R? .				- 3b			
4	Describe in Part XIII the intended uses of the orga	anization's endowr	ment funds.							
Pai	t VI Land, Buildings, and Equipme	ent.								
	Complete if the organization and	swered "Yes" o	on Form 990, Pa	art IV, line 1	1a. Se	e Form 990, F	Part X, li	ne 10.		
	Description of property	(a) Cost or other	er basis (b) Cost o	or other basis	(c) A	Accumulated	(d) Boo	ok value		
		(investme	1 ' '	other)		preciation	. ,			
1a	Land									
b	Buildings									
c	Leasehold improvements									
d	Equipment			24,520		17,578		6,9	42	
e	Other			,		1,3,0		5,5		
Fadal	Add the add the second of the	1 Farma 000 Flant V	(D) (in a 40)							

Schedule D (Form			88-0230538	Page 3
Part VII	Investments - Other Securities.		441 O E 000 D 41	\ !! 40
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11b. See Form 990, Part	X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year mar	
(1) Financial	derivatives			
(2) Closely-he	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12.) Investments - Program Related. Complete if the organization answered "Yes"		e 11c. See Form 990, Part 2	X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valu Cost or end-of-year mar	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)	▶		
Part IX	Other Assets.	Las Estate COO Bart IV lines	44.1.0	V Po - 45
	Complete if the organization answered "Yes" (a) Description	on Form 990, Part IV, line		X, IINE 15. Book value
(1)	(a) Description		(0)) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.		-	
	Complete if the organization answered "Yes" line 25.	on Form 990, Part IV, line	e 11e or 11f. See Form 990	, Part X,
1.	(a) Description of liability	(b) Book value		
	ncome taxes	(b) Book value		
(2)	Hoone taxes			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

	ule D (Form 990) 2019 Reno Rodeo Foundation	88-0230538	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue	oer Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	829,545
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	1	
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)	3	
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	14,777
3	Subtract line 2e from line 1	3	814,768
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 10,73:	3	
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	10,733
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	825,501
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expense	es per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	715,797
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)	3	
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	8,983
3	Subtract line 2e from line 1	3	706,814
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 10,733	3_	
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	10,733
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	717,547
-	rt XIII Supplemental Information.		
	de 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; Pa	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
01.	Other revenues not included on Form 990 (Part XI, line 2d)		
Dir	ect fundraising expenses netted		
	· ·		

EEA Schedule D (Form 990) 2019

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization						Employer ide	ntification number
Reno Rodeo Foundation						88-023	
Part I Fundraising Activities	. Complete if the	ne organiz	ation ansv	vered "Yes" on	Form 99	0, Part IV,	line 17.
Form 990-EZ filers are not	required to com	plete this p	oart.				
1 Indicate whether the organization rais	ed funds through a	ny of the follo	owing activitie	es. Check all that ap	ply.		
a Mail solicitations	3	_	-	non-government gr			
b Internet and email solicitations				government grants			
=		=					
c Phone solicitations		g ∐ [§]	Special fundra	aising events			
d In-person solicitations							
2a Did the organization have a written or	oral agreement wit	th any individ	lual (including	g officers, directors,	trustees,	_	
or key employees listed in Form 990,	Part VII) or entity in	connection	with profession	onal fundraising ser	vices?	∐ Ye	es 🗌 No
b If "Yes," list the 10 highest paid individ	luals or entities (fur	ndraisers) pu	rsuant to agre	eements under which	ch the fundr	aiser is to be	
compensated at least \$5,000 by the o	rganization.						
		(iii) Did fund	draiger have		(v) Amo	ount paid to	(vi) Amount noid to
(i) Name and address of individual	(ii) Activity		draiser have r control of	(iv) Gross receipts		tained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)	(II) / touvity		utions?	from activity		ser listed in	organization
					C	ol. (i)	
_		Yes	No				
1							
2							
					/		
3							
4							
•) ·			
5				/			
5							
6							
	,						
7			1				
8							
9							
10							
10							
			<u></u>				
3 List all states in which the organization	is registered or lice	ensed to solid	cit contributio	ns or has been notit	fied it is exe	mpt from	
registration or licensing.							

88-0230538

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more

Part II

		gross receipts greater than		4.) 5	() Other manual transfer	
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Paint/Poker		None	(add col. (a) through col. (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	24,015			24,015
ď	2	Less: Contributions	24,000			24,000
	3	Gross income (line 1 minus line 2)	15			15
	4	Cash prizes	1,750			1,750
	5	Noncash prizes				
sesu	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	7,233			7,233
Direc	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines	4 through 0 in column (d)			0 003
	11	Net income summary. Subtract line	• , ,			8,983
Pa	rt II					(8,968)
. •		\$15,000 on Form 990-EZ,	_	Too on Formood, Furt	v, iiilo 10, oi ropoitou ii	noro trari
		\$10,000 0111 01111 000 LZ,	iiiio ou.	(b) Pull tabs/instant		(d) Total gaming (add
Jue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue	4	Cross rovenus				
	1	Gross revenue				
es	2	Cash prizes				
bens		53.5.1. p.1.255				
ect Exp	3	Noncash prizes				
Direct Expenses	3					
Direct Exp		Noncash prizes	T Was 90	No.	No.	
Direct Ex	4	Noncash prizes	Yes%	☐ Yes% No	☐ Yes % ☐ No	
Direct Ex	4 5	Noncash prizes	No No			
Direct Ex	4 5 6	Noncash prizes	No 2 through 5 in column (d)	No No		
Direct Ex	4 5 6 7	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines	No 2 through 5 in column (d)	No No		
6 Direct Exp	4 5 6 7 8	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines	No 2 through 5 in column (d) act line 7 from line 1, column	nn (d)		
<u> </u>	4 5 6 7 8 En	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines Net gaming income summary. Subtr	No 2 through 5 in column (d) act line 7 from line 1, colum on conducts gaming activit	No		· · · · · · · · Yes · · · No
	4 5 6 7 8 En	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines Net gaming income summary. Subtrater the state(s) in which the organization	No 2 through 5 in column (d) act line 7 from line 1, colum on conducts gaming activit	No	No	· · · · · · · Yes
9 a	4 5 6 7 8 En	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines Net gaming income summary. Subtrater the state(s) in which the organization the organization licensed to conduct general states.	No 2 through 5 in column (d) act line 7 from line 1, colum on conducts gaming activit	No	No	· · · · · · · · Yes
9 a b	4 5 6 7 8 En Is:	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines Net gaming income summary. Subtrate the state(s) in which the organization the organization licensed to conduct go 'No," explain:	No 2 through 5 in column (d) act line 7 from line 1, colum on conducts gaming activit aming activities in each of	No No nn (d)	No No	· · · · · · · Yes
9 a b	4 5 6 7 8 En Is:	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines Net gaming income summary. Subtrater the state(s) in which the organization the organization licensed to conduct generated the explain:	No 2 through 5 in column (d) act line 7 from line 1, colum on conducts gaming activit aming activities in each of	No No nn (d)	No No	

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.

2019 Open to Public Inspection

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Reno Rodeo Foundation						88-0230538	
Part I General Information on (Grants and Assis	stance					
1 Does the organization maintain records to	substantiate the amou	ınt of the grants or assista	nce, the grantees' elig	jibility for the grants or a	assistance, and		
the selection criteria used to award the gra	ants or assistance?						· X Yes No
Describe in Part IV the organization's proc							
Part II Grants and Other Assistand						Yes" on Form 990	,
Part IV, line 21, for any recipi	ent that received mo	ore than \$5,000. Part l	I can be duplicated	if additional space i	s needed.		-
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Renown Health Foundation							Reno Rodeo
245 E Liberty St Suite 400							Wish - assist
Reno, NV 89501	94-2972845	501 (c) (3)	7,000				ill children
(2)Saint Mary's Medical Founda 235 West Sixth St							Reno Rodeo Wish - assist
Reno, NV 89503	30-0961045	501(c)(3)	12,000				ill children
(3) Carson Tahoe Health Foundat							Reno Rodeo
1600 Medical Pkwy							Wish - assist
Carson City, NV 89703	88-0502320	501(c)(3)	11,000				ill children
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations I	•					· · · · · · · · · · · · · · · · · · ·	

Schedule I (Form 990) (2019) Reno Rodeo Foundation	on				88-0230538	Page 2
Part III Grants and Other Assistance to Do Part III can be duplicated if additional			organization answ	vered "Yes" on Form 990), Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
Scholarships for Nevada students						
1 attending colleges or universities	22	116,000				
2						
3						
4						
5						
6						
7						
Part IV Supplemental Information. Provide	the information re	equired in Part I, line	e 2; Part III, columi	n (b); and any other add	itional information.	
01. Monitoring procedures (Par	rt I, line	2)				
The Board approves educational and commu	unity program s	support each year	r by evaluating	requests for funds.	There is a	
scholarship committee that reviews all s	scholarship app	olications and ra	ates them accord	ding to the establis	hed guidelines taking	
into consideration full-time enrollment	in an accredit	ced college or u	niversity, finar	ncial need, scholast	ic prficiency,	
leadership, service, and specialized tax	lent. The Reno	Rodeo Wish Award	ds are nominated	d by local hospitals	and approved by a	
separate committee. The committees' sele	ections are pre	esented to the Bo	pard for final a	approval. The schola	rship funds are	
provided directly to the colleges or uni	iversities.					

SCHEDULE M (Form 990)

Noncash Contributions

Employer identification number

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

► 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 instructions and the latest information.

Inspection

Reno Rodeo Foundation 88-0230538 Types of Property Part I (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g 1 2 Art - Historical treasures 3 Art - Fractional interests Books and publications 4 5 Clothing and household goods Х 126,211 Thrift store value 6 Cars and other vehicles 7 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous Qualified conservation 13 contribution - Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Commercial 17 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 ► (26 Other ► (27 Other ► (28 Other ► (Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 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 purposes for the entire holding period? х If "Yes," describe the arrangement in Part II. b Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? Х If "Yes," describe in Part II. b If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Reno Rodeo Foundation

Internal Revenue Service
Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

88-0230538

01. Member election for additional members (Part VI, line 7a) A Board position is reserved for the President (or designated representative) of the Reno Rodeo Association. 02. Committee meeting documentation (Part VI, line 8b) The Foundation does not have any committees with the authority to act on behalf of the governing body. 03. Form 990 governing body review (Part VI, line 11) The form 990 is provided to management and the Board for review and approval each year 04. Conflict of interest policy compliance (Part VI, line 12c) Board members are required to disclose any potential conflicts of interest and abstain from voting on any motions that may involve 05. CEO, executive director, top management comp (Part VI, line 15a) The Finance Committee discusses and approves the Executive Director's salary based on previous salaries, current industry standards, and their business experience. The decision

06. Governing documents, etc, available to public (Part VI, line 19)

The Foundation's annual report and Form 990 are available on its website. The audited financial statements and governing documents are available upon request.

07. Audited by an independent accountant (Part XII, line 2b)

The Board is responsible for the selection of the auditors each year and for reviewing and

is approved and documented in a letter by the President