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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

2009

Open to Public
Inspection

► The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2009 calendar year, or tax year beginning JUL 1, 2009 and ending JUN 30, 2010

<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NEVADA DEVELOPMENT AUTHORITY, INC. ATT: CAROL COOPER		D Employer identification number 88-0070996		
	Doing Business As				
	Number and street (or P O box if mail is not delivered to street address) 6700 VIA AUSTI PARKWAY		Room/suite B	E Telephone number (702) 791-0000	
	City or town, state or country, and ZIP + 4 LAS VEGAS, NV 89119				
	F Name and address of principal officer GLEN C. CHRISTENSON 6700 VIA AUSTI PARKWAY SUITE B, LAS VEGAS, NV		G Gross receipts \$ 2,413,002.		
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (6) (Insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	J Website: ► HTTP://WWW.NEVADADEVELOPMENT.ORG		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)		
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		H(c) Group exemption number ►			
L Year of formation 1956		M State of legal domicile NV			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE PROMOTION & ADVANCEMENT OF CIVIC, COMMERCIAL, INDUSTRIAL & AGRICULTURAL ACTIVITIES IN THE STATE			
	2 Check this box ► <input type="checkbox"/> If the organization discontinued its operations or disposed of more than 25% of its net assets			
	3 Number of voting members of the governing body (Part VI, line 1a)	3	124	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	0	
	5 Total number of employees (Part V, line 2a)	5	8	
	6 Total number of volunteers (estimate if necessary)	6	64	
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34	7a	0.	
	7b	0.		
Revenue	8 Contributions and grants (Part VIII, line 1h)	RECEIVED 2009 11/10/2010 IRS-OSC		
	9 Program service revenue (Part VIII, line 2g)	OGDEN, UT		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	Prior Year 1,579,428. Current Year 2,246,750.		
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	20,162. 6,781.		
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	308,063. 159,471.		
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,907,653. 2,413,002.		
	14 Benefits paid to or for members (Part IX, column (A), line 4)			
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	885,605. 831,629.		
	16a Professional fundraising fees (Part IX, column (A), line 11e)			
	b Total fundraising expenses (Part IX, column (D), line 25) ►			
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,397,376. 1,597,970.		
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,282,981. 2,429,599.		
19 Revenue less expenses Subtract line 18 from line 12	-375,328. -16,597.			
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 1,270,440. End of Year 1,290,548.		
	21 Total liabilities (Part X, line 26)	61,726. 98,381.		
	22 Net assets or fund balances Subtract line 21 from line 20	1,208,714. 1,192,167.		

Part II Signature Block

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

Signature of officer

11/3/10

SOMER HOLLINGSWORTH, PRESIDENT & CEO

Type or print name and title

Preparer's Use Only	Preparer's signature ► 	Date 10/1/10	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 RSM MCGLADREY, INC. 300 SOUTH 4TH STREET, SUITE 600 LAS VEGAS, NV 89101	EIN ►		
		Phone no ► 702 759 4000		

May the IRS discuss this return with the preparer shown above? (see instructions)

 Yes No

Part III Statement of Program Service Accomplishments1 Briefly describe the organization's missionFOSTER AND PROMOTE ECONOMIC DIVERSIFICATION2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses \$) including grants of \$) (Revenue \$)
CLIENT SERVICES – PROMOTION AND ADVANCEMENT OF INDUSTRIAL AND COMMERCIAL ACTIVITIES INVOLVING TARGETED BUSINESSES.

4b (Code) (Expenses \$) including grants of \$) (Revenue \$)
MARKETING AND RESEARCH – PROMOTION AND ADVANCEMENT OF INDUSTRIAL AND COMMERCIAL ACTIVITIES FOR GENERAL DISTRIBUTION.

4c (Code:) (Expenses \$) including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$) including grants of \$) (Revenue \$)

4e Total program service expenses ► \$

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors?

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*

4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*

5 **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*

6 Did the organization maintain any donor advised funds or any similar funds or accounts where 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*

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*

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*

9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*

10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*

11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*
- 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*
- 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*
- 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*
- Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*
- 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? *If "Yes," complete Schedule D, Part X*

12 Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*

12A Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional*

13 Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*

14a Did the organization maintain an office, employees, or agents outside of the United States?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Part II*

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Part III*

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*

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*

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*

20 Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*

	Yes	No
1		X
2	X	
3		X
4		
5		X
6		X
7		X
8		X
9		X
10		X
11	X	
12	X	
12A	X	
13	X	
14a	X	
14b	X	
15	X	
16	X	
17	X	
18	X	
19	X	
20	X	

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Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25	24a	X
24b		24b	
24c		24c	
24d		24d	
25a	Section 501(c)(3) and 501(c)(4) 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	
25b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
28a	a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X
28b	b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
28c	c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "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	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization 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 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns. Enter -0- if not applicable	1a 0	
1b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	
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 8	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)</i>	2b X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," 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 X	
4b	If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	4b 	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a X	
5b	If any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b X	
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	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?	6a X	
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b X	
7	Organizations that may receive deductible contributions under section 170(c).	7 	
7a	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 	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b 	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c 	
7d	If "Yes," indicate the number of Forms 8282 filed during the year	7d 	
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 	
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 	
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g 	
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h 	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8 	
9	Sponsoring organizations maintaining donor advised funds.	9 	
9a	Did the organization make any taxable distributions under section 4966?	9a 	
9b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b 	
10	Section 501(c)(7) organizations. Enter	10 	
10a	Initiation fees and capital contributions included on Part VIII, line 12 .	10a 	
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b 	
11	Section 501(c)(12) organizations. Enter	11 	
11a	Gross income from members or shareholders	11a 	
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b 	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a 	
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b 	

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

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body
 1b Enter the number of voting members that 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?

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?

4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a material diversion of the organization's assets?

6 Does the organization have members or stockholders?

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?
 b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following
 a The governing body?
 b Each committee with authority to act on behalf of the governing body?

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

	Yes	No
1a	124	
1b	0	
2		X
3	X	
4	X	
5	X	
6	X	
7a		X
7b	X	
8a	X	
8b	X	
9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Does the organization have local chapters, branches, or affiliates?
 b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?

11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?

11A Describe in Schedule O the process, if any, used by the organization to review this Form 990

12a Does the organization have a written conflict of interest policy? If "No," go to line 13
 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
 c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done

13 Does the organization have a written whistleblower policy?

14 Does the organization have a written document retention and destruction policy?

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?
 a The organization's CEO, Executive Director, or top management official
 b Other officers or key employees of the organization
 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?
 b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

	Yes	No
10a		X
10b		
11		X
12a	X	
12b	X	
12c	X	
13		X
14		X
15a	X	
15b	X	
16a		X
16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply
 Own website Another's website Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► **KAFOURY ARMSTRONG - 702-384-7717**
8329 W. SUNSET RD, STE 210, LAS VEGAS, NV 89113

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

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. Use Schedule J-2 if additional space is needed.

- 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

Enter **.0.** in columns (D), (E), and (F) if no compensation was paid
to all of the employees. **Amount** **Comments**

- List all of the organization's **current** key employees. 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.

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

Check this box if the organization did not compensate any current officer, director, or trustee

(A) **1** (B) **2** (C) **3** (D) **4** (E) **5**

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

1b Total

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►

1

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization **NONE**

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Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e 1,119,750.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1,127,000.			
	g Noncash contributions included in lines 1a-1f \$	187,600.			
	h Total. Add lines 1a-1f	► 2,246,750.			
Program Service Revenue	2 a	Business Code			
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f	►			
3	Investment income (including dividends, interest, and other similar amounts)	►	6,781.		6,781.
4	Income from investment of tax-exempt bond proceeds	►			
5	Royalties	►			
6 a	Gross Rents	(i) Real	(ii) Personal		
b	Less rental expenses				
c	Rental income or (loss)				
d	Net rental income or (loss)	►			
7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
b	Less. cost or other basis and sales expenses				
c	Gain or (loss)				
d	Net gain or (loss)	►			
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a			
b	Less direct expenses	b			
c	Net income or (loss) from fundraising events	►			
9 a	Gross income from gaming activities See Part IV, line 19	a			
b	Less. direct expenses	b			
c	Net income or (loss) from gaming activities	►			
10 a	Gross sales of inventory, less returns and allowances	a			
b	Less cost of goods sold	b			
c	Net income or (loss) from sales of inventory	►			
11 a	Miscellaneous Revenue	Business Code			
b	BREAKFAST REIMBURSEMENT	900099	159,471.	159,471.	
c					
d	All other revenue				
e	Total. Add lines 11a-11d	► 159,471.			
12	Total revenue See instructions	► 2,413,002.	159,471.	0.	6,781.

NEVADA DEVELOPMENT AUTHORITY, INC.

Form 990 (2009)

ATT: CAROL COOPER

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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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	613,297.			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	48,295.			
9 Other employee benefits	126,530.			
10 Payroll taxes	43,507.			
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	27,520.			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	125,876.			
14 Information technology				
15 Royalties				
16 Occupancy	127,927.			
17 Travel	2,310.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	101,134.			
20 Interest	1,862.			
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	9,272.			
23 Insurance				
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a ADVERTISING	977,070.			
b COMBINED LEGAL & PROFES	108,710.			
c HOST EXPENSE	57,029.			
d SALES PROMOTIONS	23,992.			
e SUBSCRIPTIONS	2,089.			
f All other expenses	33,179.			
25 Total functional expenses Add lines 1 through 24f	2,429,599.			
26 Joint costs. Check here ► <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

NEVADA DEVELOPMENT AUTHORITY, INC.

Form 990 (2009)

ATT: CAROL COOPER

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Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	200.	1	200.
	2 Savings and temporary cash investments	1,202,747.	2	1,128,058.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	45,000.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	43,138.	9	19,313.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	241,862.		
	b Less: accumulated depreciation	10b 143,885.	24,355.	10c 97,977.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	1,270,440.	16	1,290,548.
Liabilities	17 Accounts payable and accrued expenses	49,487.	17	33,560.
	18 Grants payable		18	
	19 Deferred revenue	1,000.	19	55,687.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities Complete Part X of Schedule D	11,239.	25	9,134.
	26 Total liabilities. Add lines 17 through 25	61,726.	26	98,381.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,207,714.	27	1,140,667.
	28 Temporarily restricted net assets	1,000.	28	51,500.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	1,208,714.	33	1,192,167.
	34 Total liabilities and net assets/fund balances	1,270,440.	34	1,290,548.

Form 990 (2009)

NEVADA DEVELOPMENT AUTHORITY, INC.

Form 990 (2009)

ATT: CAROL COOPER

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Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?
 b Were the organization's financial statements audited by an independent accountant?
 c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
 d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
 b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization **NEVADA DEVELOPMENT AUTHORITY, INC.**
ATT: CAROL COOPER

Employer identification number
88-0070996

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
2a	
2b	
2c	
2d	

a Total number of conservation easements
b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included in (a)
d Number of conservation easements included in (c) acquired after 8/17/06

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____
b Assets included in Form 990, Part X ► \$ _____

NEVADA DEVELOPMENT AUTHORITY, INC.

Schedule D (Form 990) 2009

ATT: CAROL COOPER

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Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items
(check all that apply)

a <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other _____
c <input type="checkbox"/> Preservation for future generations	

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

 Yes No**Part IV Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to 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 other intermediary for contributions or other assets not included on Form 990, Part X?

 Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

 Yes No

b If "Yes," explain the arrangement in Part XIV

	Amount
1c	
1d	
1e	
1f	

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

1a Beginning of year balance
b Contributions
c Net investment earnings, gains, and losses
d Grants or scholarships
e Other expenditures for facilities and programs
f Administrative expenses
g End of year balance

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
b					
c					
d					
e					
f					
g					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► _____ %
b Permanent endowment ► _____ %
c Term endowment ► _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by

(i) unrelated organizations
(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

	Yes	No
3a(i)		
3a(ii)		
3b		

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		241,862.	143,885.	97,977.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				► 97,977.

Schedule D (Form 990) 2009

NEVADA DEVELOPMENT AUTHORITY, INC.
ATT: CAROL COOPER

Schedule D (Form 990) 2009

ATT: CAROL COOPER

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Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other _____		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ►		

Part VIII Investments - Program Related. See Form 990, Part X, line 13

Part IX Other Assets. See Form 990, Part X, line 15

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)

Part X **Other Liabilities.** See Form 990, Part X, line 25.

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

9,134.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

NEVADA DEVELOPMENT AUTHORITY, INC.

Schedule D (Form 990) 2009

ATT: CAROL COOPER

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Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,413,002.
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	2,429,599.
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	-16,597.
4 Net unrealized gains (losses) on investments	4	
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7 Prior period adjustments	7	
8 Other (Describe in Part XIV.)	8	50.
9 Total adjustments (net) Add lines 4 through 8	9	50.
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-16,547.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1 Total revenue, gains, and other support per audited financial statements	1	2,362,502.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments	2a	
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV.)	2d	1,000.
e Add lines 2a through 2d	2e	1,000.
3 Subtract line 2e from line 1	3	2,361,502.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV.)	4b	51,500.
c Add lines 4a and 4b	4c	51,500.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,413,002.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1 Total expenses and losses per audited financial statements	1	2,429,549.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIV.)	2d	-50.
e Add lines 2a through 2d	2e	-50.
3 Subtract line 2e from line 1	3	2,429,599.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV.)	4b	
c Add lines 4a and 4b	4c	0.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	2,429,599.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

PART XI, LINE 8 - OTHER ADJUSTMENTS:UNREALIZED GAIN: 50.PART XII, LINE 2D - OTHER ADJUSTMENTS:ASSETS RELEASED FROM RESTRICTION: 1000.PART XII, LINE 4B - OTHER ADJUSTMENTS:

Schedule D (Form 990) 2009

Part XIV Supplemental Information (continued)

TEMPORARY RESTRICTED REVENUE: 51500.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

UNREALIZED GAIN: -50.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

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Inspection

Name of the organization	NEVADA DEVELOPMENT AUTHORITY, INC. ATT: CAROL COOPER	Employer identification number 88-0070996
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Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,

Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's

CEO/Executive Director Check all that apply

<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes

No

1b

2

4a X

4b X

4c X

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2009

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2009

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Department of the Treasury
Internal Revenue Service

► Complete if the organizations answered "Yes" on Form

990, Part IV, lines 29 or 30.

► Attach to Form 990.

Name of the organization **NEVADA DEVELOPMENT AUTHORITY, INC.**
ATT: CAROL COOPER

Employer identification number
88-0070996

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation 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 ► (<u>RADIO SPOTS</u>)	X	4	37,500.	FMV
26 Other ► (<u>LEGAL SERVICE</u>)	X	1	25,000.	FMV
27 Other ► (<u>LOBBYING</u>)	X	1	25,000.	FMV
28 Other ► (<u>TRUSTEE LUNCH</u>)	X	1	10,000.	FMV

29 Number of Forms 8283 received by the organization during the tax year for contributions

for which the organization completed Form 8283, Part IV, Donee Acknowledgment

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

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

Schedule M (Form 990) 2009

NEVADA DEVELOPMENT AUTHORITY, INC.

Schedule M (Form 990) 2009 ATT: CAROL COOPER

88-0070996

Page 2

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33.
Also complete this part for any additional informationPART I, OTHER TYPES OF PROPERTY:TEMPS FOR ANNUAL LUNCH AND MAILINGS

(A) CHECK IF APPLICABLE =

(B) NUMBER OF CONTRIBUTORS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 10000.

(D) METHOD OF DETERMINING REVENUE: FMV

PERSONNEL COUNSELLING

(A) CHECK IF APPLICABLE =

(B) NUMBER OF CONTRIBUTORS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 10000.

(D) METHOD OF DETERMINING REVENUE: FMV

ADVERTISING SERVICES

(A) CHECK IF APPLICABLE =

(B) NUMBER OF CONTRIBUTORS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 10000.

(D) METHOD OF DETERMINING REVENUE: FMV

MEMBERSHIP FEES

(A) CHECK IF APPLICABLE =

(B) NUMBER OF CONTRIBUTORS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 10000.

(D) METHOD OF DETERMINING REVENUE: FMV

NETWORKING MIXER

(A) CHECK IF APPLICABLE =

(B) NUMBER OF CONTRIBUTORS = 1

NEVADA DEVELOPMENT AUTHORITY, INC.

Schedule M (Form 990) 2009 ATT: CAROL COOPER

88-0070996

Page 2

Part II**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33
Also complete this part for any additional information.(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 10000.(D) METHOD OF DETERMINING REVENUE: FMVT-1 LINE(A) CHECK IF APPLICABLE = X(B) NUMBER OF CONTRIBUTORS = 1(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 7000.(D) METHOD OF DETERMINING REVENUE: FMVBOOTH SET UP FOR LOCAL TRADE SHOWS(A) CHECK IF APPLICABLE = X(B) NUMBER OF CONTRIBUTORS = 1(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 5000.(D) METHOD OF DETERMINING REVENUE: FMVPROMOTIONAL BAGS FOR ANNUAL LUNCH(A) CHECK IF APPLICABLE = X(B) NUMBER OF CONTRIBUTORS = 1(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 5000.(D) METHOD OF DETERMINING REVENUE: FMVAUDIT DISCOUNT(A) CHECK IF APPLICABLE = X(B) NUMBER OF CONTRIBUTORS = 1(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 5000.(D) METHOD OF DETERMINING REVENUE: FMV

SCHEDULE O

(Form 990)

Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
► Attach to Form 990.

OMB No 1545-0047

2009
Open to Public
Inspection

Name of the organization

NEVADA DEVELOPMENT AUTHORITY, INC.
ATT: CAROL COOPEREmployer identification number
88-0070996FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:OF NEVADA AND PARTICULARLY IN CLARK COUNTY. TO FOSTER AND PROMOTE
ECONOMIC DIVERSIFICATION.FORM 990, PART VI, SECTION A, LINE 7B: ALL CHANGES TO BYLAWS AND POSITIONS
ARE REVIEWED BY OUR EXECUTIVE COMMITTEE AND VOTED ON WHEN CHANGES ARE MADE
AT TRUSTEE MEETINGS, WHICH ARE CONDUCTED EVERY OTHER MONTH AND OUR
BREAKFAST MEETINGS.FORM 990, PART VI, SECTION B, LINE 11: THE PRESIDENT AND CEO REVIEWS THE
990 BEFORE IT IS FILED.FORM 990, PART VI, SECTION B, LINE 12C: COMPLIANCE IS MONITORED ON AN ON
GOING BASIS.FORM 990, PART VI, SECTION B, LINE 15: THERE IS A COMPENSATION LIAISON
THAT REVIEWS OUR GOALS AND ACHIEVEMENTS.FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS ARE AVAILABLE UPON
REQUEST.THE EXECUTIVE COMMITTEE SERVES AS THE AUDIT COMMITTEE AND OVERSEE'S THE
FINANCIAL AUDIT.

2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
26	TV/DVD/VCR	080305SL	5.00	16	858.				858.	673.		172.
27	GALLERY	080305SL	7.00	16	495.				495.	278.		71.
28	OFC FURNITURE	080505SL	7.00	16	6,000.				6,000.	3,357.		857.
29	SOFA - BLK LEATHER	080905SL	7.00	16	1,215.				1,215.	681.		174.
30	TV CABLES	081305SL	5.00	16	2,108.				2,108.	1,652.		422.
31	FURNITURE	081505SL	7.00	16	11,350.				11,350.	6,349.		1,621.
32	32" TELEVISION	081805SL	5.00	16	505.				505.	387.		101.
33	CABINENTS	082005SL	7.00	16	5,645.				5,645.	3,090.		806.
34	TV/DVD/VCR	080305SL	5.00	16	772.				772.	604.		154.
35	DELL IIS WIN 20	042409SL	5.00	16	3,257.				3,257.	109.		651.
36	PROJECTOR	060209SL	5.00	16	862.				862.	14.		172.
37	TOSHIBA COPIER	070108SL	5.00	16	12,999.				12,999.	2,600.		2,600.
38	CONVENTION CENTER	062810SL	7.00	16	29,964.				29,964.	50,944.		0.
39	BOOTH											
CONVENTION CENTER												
MEDIA EQUIP												
40	DELL STUDIO LAPTOP	052710SL	5.00	16	1,042.				1,042.	944.		17.
41	DELL STUDIO LAPTOP	052710SL	5.00	16	944.				944.			16.
1	TELEPHONE	051599SL	7.00	16	16,884.				16,884.			0.
* 990 PAGE 10 TOTAL						145,844.			0.	145,844.	36,678.	0.
* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction												

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Of Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
3PRINTER	101588SL	5.00	16	795.					795.	795.		0.
5CONFERENCE TABLE	012796SL	7.00	16	14,980.					14,980.	14,980.	0.	0.
6COMPUTER/TELE	021596SL	7.00	16	2,755.					2,755.	2,755.	0.	0.
8FILING CABINET	022996SL	7.00	16	1,334.					1,334.	1,334.	0.	0.
13LASER PRINTER	073198SL	5.00	16	1,306.					1,306.	1,306.	0.	0.
15FURNITURE	033199SL	7.00	16	53,434.					53,434.	53,434.	0.	0.
16MACHABEE	043099SL	7.00	16	2,130.					2,130.	2,130.	0.	0.
18MACHABEE	073100SL	7.00	16	2,530.					2,530.	2,530.	0.	0.
20TOSHIBA DIGITAL	073101SL	5.00	16	2,680.					2,680.	2,680.	0.	0.
22SOUNDSTATION	053003SL	5.00	16	1,475.					1,475.	1,475.	0.	0.
23SERVER	070203SL	5.00	16	536.					536.	536.	0.	0.
24COMPUTERS, 10	070203SL	5.00	16	10,264.					10,264.	10,264.	0.	0.
25SOFTWARE	070203SL	3.00	16	1,801.					1,801.	1,801.	0.	0.
* 990 PAGE 10 TOTAL				96,020.				0.	96,020.	96,020.	0.	0.
- * GRAND TOTAL 990 PAGE 10 DEPR				241,864.				0.	241,864.	132,698.	0.	7,834.

Form 4562

Department of the Treasury
Internal Revenue Service (99)Depreciation and Amortization
(Including Information on Listed Property)

990

OMB No 1545-0172

2009

Attachment
Sequence No 67

► See separate instructions ► Attach to your tax return.

Name(s) shown on return

NEVADA DEVELOPMENT AUTHORITY, INC.
ATT: CAROL COOPER

Business or activity to which this form relates

FORM 990 PAGE 10

Identifying number

88-0070996

Part I Election To Expense Certain Property Under Section 179 Note If you have any listed property, complete Part V before you complete Part I

1 Maximum amount See the instructions for a higher limit for certain businesses	1	250,000.	
2 Total cost of section 179 property placed in service (see instructions)	2		
3 Threshold cost of section 179 property before reduction in limitation	3	800,000.	
4 Reduction in limitation. Subtract line 3 from line 2 If zero or less, enter -0-	4		
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5		
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property Enter the amount from line 29	7		
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8		
9 Tentative deduction Enter the smaller of line 5 or line 8	9		
10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10		
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5	11		
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12		
13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12	► 13		

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	7,834.

Part III MACRS Depreciation (Do not include listed property) (See instructions)

Section A		17
17 MACRS deductions for assets placed in service in tax years beginning before 2009		17

18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ►

Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property	/		27 5 yrs	MM	S/L	
	/		27 5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life					S/L
b 12-year			12 yrs.		S/L
c 40-year	/		40 yrs	MM	S/L

Part IV Summary (See instructions)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr	22	7,834.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

NEVADA DEVELOPMENT AUTHORITY, INC.

Form 4562 (2009)

ATT: CAROL COOPER

88-0070996 Page 2

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	----------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25

		%						
		%						
		%						

26 Property used more than 50% in a qualified business use

		%				S/L -		
		%				S/L -		
		%				S/L -		

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	Yes	No										
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

Part VI	Amortization					
	(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year

42 Amortization of costs that begins during your 2009 tax year

43 Amortization of costs that began before your 2009 tax year 43

44 Total. Add amounts in column (f) See the instructions for where to report 44

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8170 W Sahara Ave . Ste 207
Las Vegas NV 89117
702-893-2323 Fax

Steve Straub

Performance Consulting Group, LLC
621 Southwest 24th Ave
Norman OK 73069
702-592-0068 Fax

Annie M Sutorius

Annie the Maid
P O Box 50618
Henderson NV 89066
702-739-8888 Fax 702-451-3915

Joe Taylor

Southern Nevada L E C E T
2345 Red Rock St . Ste 200
Las Vegas NV 89146
702-876-0636 Fax 702-876-6998

Renaldo Tiberti

J A Tiberti Construction Co , Inc
1806 Industrial Rd
Las Vegas NV 89102
702-248-4000 Fax 702-382-5361

Adam Titus

President & CEO
Industrial Properties Development, Inc
P O Box 751149
Las Vegas NV 89136
702-643-4940 Fax 702-643-5103

Par Tolles

President
DP Partners
5500 Equity Ave
Reno NV 89502
775-858-8080 Fax

John Trimmer

CallTower Inc
2270 Corporate Cir #110
Henderson NV 89074
415-869-8904 Fax 415-869-9104

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Greater Las Vegas Assoc of REALTORS
1750 E Sahara Ave
Las Vegas NV 89104
702-784-5000 Fax 702-732-1805

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City of Boulder City
P O Box 61350
Boulder City NV 89006
702-293-9208 Fax 702-293-9245

G C "Scott Wallace

CEO & Chairman Board of Directors
G C Wallace, Inc
1555 S Rainbow Blvd
Las Vegas NV 89146
702-804-2000 Fax 702-804-2293

Kitty Webster

TELUS Enterprise Solutions Corp
2251 S Decatur Blvd
Las Vegas NV 89102
702-238-7902 Fax 702-738-7902

Kris Wells

AT&T Nevada
645 E Plumb Ln
Reno NV 89502
775-333-3000 Fax 775-333-2364

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President
Desert Research Institute
755 E Flamingo Rd
Las Vegas NV 89119
702-862-5406 Fax 702-862-5496

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William Wells
Managing Partner
McGladrey & Pullen, LLP
300 S Fourth St Ste 600
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702-759-4000 Fax 702-759-4063

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400 S Fourth St. 3rd Fl
Las Vegas NV 89101
702-791-0308 Fax 702-791-1912

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7475 W Sahara Ave Ste 100
Las Vegas NV 89117
702-362-8700 Fax 702-873-8700

Terrence Wright (Sustaining Life Mem
NTC Global Holdings
2500 N Buffalo Dr Ste 150
Las Vegas NV 89128
702-251-5256 Fax 702-253-1682

Michael W Yackira
President & CEO
NV Energy
P O Box 98910
Las Vegas NV 89151
702-402-5601 Fax 702-402-5004

Sylvia Young
President
Sunrise Hospital and Medical Center and
3186 S Maryland Pkwy
Las Vegas NV 89109
702-731-8012 Fax 702-731-8330

Stephen M Younger
President
National Security Technologies, LLC
P O Box 98521 NSF001
Las Vegas NV 89193-85
702-295-0660 Fax 702-295-2452

Executive Committee

Nevada Development Authority Executive Committee

			Member			Legislative Committee Co-Chairman		
Michael J.	Bonner		Susan	Brager		Joseph W	Brown	
Shareholder						President		
Greenberg Traurig, LLP			Clark County Commissioner			Jones Vargas		
3773 Howard Hughes Pkwy , Ste. 400 N			500 Grand Central Pkwy			3773 Howard Hughes Pkwy , 3rd Fl South		
Las Vegas	NV	89169	Las Vegas	NV	89155	Las Vegas	NV	89169
702-792-3773	Fax	702-792-9002	702-455-5563	Fax	702-383-6041	702-862-3300	Fax	702-734-2722
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Member			Secretary/Treasurer			Member		
Joseph	Carleone		Glenn C	Christensen		Donna	Fairchild	
President & Chief Executive Officer			Managing Director					
American Pacific Corporation			Velstand Investments, LLC			City of Mesquite		
3883 Howard Hughes Pkwy , Ste 700			1450 W Horizon Ridge Pkwy , B304 #675			10 E Mesquite Blvd		
Las Vegas	NV	89169	Henderson	NV	89012	Mesquite	NV	89027
702-699-4166	Fax	702-794-0714	702-897-1165	Fax	702-897-5064	702-373-2040	Fax	702-346-4469
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Member			Member			Member		
Steve	Garofalo		Donald J	Giancursio		Oscar B	Goodman	
Executive Vice President			UnitedHealthcare			Mayor		
Citibank, North America Consumer Bank			P O Box 15645			City of Las Vegas		
8725 W Sahara Ave			Las Vegas	NV	89114	400 E Stewart Ave , 10th Fl		
Las Vegas	NV	89117	702-838-2098	Fax	702-240-4824	Las Vegas	NV	89101
702-797-4875	Fax	702-797-4455				702-229-6241	Fax	702-385-7960
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Member			Member			Member		
Robbie	Graham		Andy	Hafen		Jay	Kormayer	
President			Mayor			Executive Vice President		
NTC Global Holdings			City of Henderson			Wells Fargo Bank, N A		
2500 N Buffalo Dr , Ste 150			240 Water St.			3800 Howard Hughes Pkwy , Ste 400		
Las Vegas	NV	89128	Henderson	NV	89015	Las Vegas	NV	89169
702-251-5276	Fax	702-253-1682	702-267-2085	Fax	702-267-2081	702-791-6311	Fax	702-791-6236
<hr/>			<hr/>			<hr/>		

Nevada Development Authority Executive Committee

Member	Legislative Committee Co-Chairman			Member
Kenneth G Ladd	Robert Lewis			Kristin McMillan
Western Region President	President			Vice President & General Manager
U S Bank	Lewis Operating Corp			CenturyLink
2300 W Sahara Ave , Ste 600	P O Box 19297			6700 Via Austin Pkwy
Las Vegas NV 89102	Las Vegas NV 89132			Las Vegas NV 89119
702-251-1634 Fax 702-251-1636	702-891-5260 Fax 702-891-5286			702-244-7300 Fax 702-244-7775
Member	Member			Member
Monte L Miller	Kevin T Orrock			Rick Osborne
Chief Executive Officer	Top Division Executive			Nye County
KeyState Corporate Management	The Howard Hughes Corporation			2100 E Walt Williams Dr
P O Box 50102	10000 W Charleston Blvd , Ste 200			
Henderson NV 89016	Las Vegas NV 89135			Pahrump NV 89048
702-598-3738 Fax 702-598-3651	702-791-4000 Fax 702-791-4486			775-751-7075 Fax 775-751-7093
Member	Mayor Pro Tempore			Member
Greg Pauk	William Robinson			Russell Rowe
President	Mayor Pro Tempore			The Capitol Company
New-Com, Inc & Subsidiaries	City of North Las Vegas			10100 W Charleston Blvd , Ste 200
412 E Gowan Rd	2200 Civic Center Dr			
North Las Vegas NV 89032	North Las Vegas NV 89030			Las Vegas NV 89135
702-642-3331 Fax 702-642-9936	702-633-1336 Fax 702-633-1339			702-884-5014 Fax 702-796-7181
Member	Member			Member
Neal Smatresk	George W Smith			Ray Specht
President	President			President & CEO
University of Nevada, Las Vegas	Bank of America - Nevada			Toyota Financial Savings Bank
4505 S Maryland Pkwy , Box 451001	300 S Fourth St , 2nd Fl			2485 Village View Dr
Las Vegas NV 89154	Las Vegas NV 89101			Henderson NV 89074
702-895-3201 Fax 702-895-1088	702-654-8460 Fax 702-824-9092			702-477-2105 Fax 702-477-2101
Member	Member			Member
Cam Walker	Michael W Yackira			Stephen M Younger
City of Boulder City	President & CEO			President
P O Box 61350	NV Energy			National Security Technologies, LLC
Boulder City NV 89006	P O Box 98910			P O Box 98521, NSF001
702-293-9208 Fax 702-293-9245	Las Vegas NV 89151			Las Vegas NV 89193-85
	702-402-5601 Fax 702-402-5004			702-295-0660 Fax 702-295-2452

Recognition and Retention Committee

Denise Alderette

Nevada State Bank
P O. Box 990

Las Vegas NV 89125
702-855-4503 Fax

Theresa Blazic

Brand It Design Studio
1028 Puerta Del Sol Dr

Las Vegas NV 89138
702-804-0037 Fax

James E Cocese

Westar Fire Protection, Inc.
5520 Stephanie St

Las Vegas NV 89122
702-736-6199 Fax 702-736-6520

Eric Gilbert

Wells Fargo Bank
530 Las Vegas Blvd . South Ste 210
Las Vegas NV 89101
702-275-4578 Fax

Brandon Manning

Bank of the West
9021 W Sahara Ave
Las Vegas NV 89117
702-304-1529 Fax 702-304-0917

Jonathan K. Nelson

U.S. Bank
2300 W Sahara Ave . Ste 600
Las Vegas NV 89102
702-251-1723 Fax

Rod Santacruz

Orgill/Singer & Associates, Inc
8360 W. Sahara Ave . Ste 110
Las Vegas NV 89117
702-796-9100 Fax

Committee Chair

Eamon Springall

Orgill/Singer & Associates, Inc
8360 W. Sahara Ave . Ste 110
Las Vegas NV 89117
702-796-9100 Fax

Chris Zunis

Nevada Development Authority
6700 Via Austin Pkwy , Ste. B
Las Vegas NV 89119
Fax

Government Liaison Committee

This committee was formed to coordinate the activities of all-local agencies, entities or corporations involved in economic development in Southern Nevada. It was also a means to provide participation on the NDA Executive Committee by the elected officials of the local political entities.

Nevada Development Authority Government Liaison Committee

Scott Adams	Romeo Betea	Earl Burns
City of Las Vegas 400 E Stewart Ave , 10th Fl	City of Las Vegas 400 E Stewart Ave , 10th Fl	Chairman of Economic Development Committee Boulder City 1598 Bermuda Dunes Dr
Las Vegas NV 89101	Las Vegas NV 89101	Boulder City NV 89005
702-229-6551 Fax 702-385-3128	702-229-6551 Fax 702-385-3128	702-294-2947 Fax
James Campos	Lesia Coder	Bob Cooper
College of Southern Nevada 6375 W Charleston Blvd., W32E	Assistant Director Comprehensive Planning Clark County Comprehensive Planning 500 S Grand Central Pkwy ,Ste 3012	Economic Development Director City of Henderson 240 Water St
Las Vegas NV 89146	Las Vegas NV 89155-17	Henderson NV 89015
702-651-4032 Fax	702-455-4722 Fax 702-385-8940	702-267-1654 Fax 702-267-1651
Terry Culp	Frank Fiori	Tina Gingras
Nevada Industry Excellence 4505 Maryland Pkwy., Box 451076	City of North Las Vegas 2200 Civic Center Dr	Department of Air Quality Management 500 S Grand Central Pkwy , 1st Fl
Las Vegas NV 89154	North Las Vegas NV 89030	Las Vegas NV 89155
702-895-2615 Fax 702-895-3000	702-633-1518 Fax 702-649-6091	702-455-1669 Fax 702-383-9994
Government Liaison Committee Chair Sommer Hollingsworth President & CEO	John Holman	Brenda Hughes
Nevada Development Authority 6700 Via Austin Pkwy , Ste B	Southwest Gas Corporation P.O. Box 98510	City of Las Vegas 400 E Stewart Ave.
Las Vegas NV 89119	Las Vegas NV 89193	Las Vegas NV 89101
702-791-0000 Fax 702-796-6483	702-365-2191 Fax 702-740-9209	702-229-2564 Fax 702-385-3128

Jeff Leake Economic Development Officer City of Henderson 240 Water St Henderson NV 89015 702-267-1655 Fax 702-267-1651	Joe Lombardo Director - Super Computing Center University of Nevada, Las Vegas 4505 S Maryland Pkwy Box 454028 Las Vegas NV 89154-40 702-895-4676 Fax 702-895-4156	Arnold Lopez NV Energy P O Box 98910 Las Vegas NV 89151 702-402-5707 Fax 702-402-5452
Doa J Meade Las Vegas Valley Water District 1001 S Valley View Blvd Las Vegas NV 89153 702-258-3178 Fax 702-258-3811	Teri Sheridan City of North Las Vegas 2225 Civic Center Dr , Ste 220 North Las Vegas NV 89030 702-633-1135 Fax	Michael Walsh Nevada Development Authority 6700 Via Austi Pkwy , Ste B Las Vegas NV 89119 702-791-0000 Fax
Frank Woodbeck The Commission on Economic Development 555 E Washington Ave Las Vegas NV 89101 702-486-0500 Fax 702-486-2701	Chris Zunis Nevada Development Authority 6700 Via Austi Pkwy , Ste B Las Vegas NV 89119 Fax	

Technology Committee

Identify and catalog technologies that are currently being developed in Southern Nevada, develop a marketing strategy that will enhance the ability of the NDA to promote technology and technological development as a key asset in improving the business base and the quality of life here

Committee Chair

Jeff Ames	John Fountain Jr	Joe Lombardo
Switch Communications Group P O Box 400850 Las Vegas NV 89140 702-444-4102 Fax 702-596-3886 Email jeff@nevadanap.com	Cox Communications 1700 Vegas Dr Las Vegas NV 89106 702-545-1770 Fax 702-210-5945 Email john.fountain@cox.com	Director - Super Computing Center University of Nevada, Las Vegas 4505 S Maryland Pkwy Box 454028 Las Vegas NV 89154-40 702-895-4676 Fax 702-895-4156 Email Lombardo@nscee.edu
Jason Mendenhall	Kris Ongbongan	Michael Walsh
Sparkplug Communications 7351 W Charleston Blvd # 130 Las Vegas NV 89117 702-878-8373 Fax 702-234-4605 Email	Zappos Com, Inc 2280 Corporate Circle, Ste 100 Henderson NV 89074 702-943-7878 Fax Email kris@zappos.com	Nevada Development Authority 6700 Via Austin Pkwy , Ste B Las Vegas NV 89119 702-791-0000 Fax Email mwalsh@nevadadevelopment.org

Legislative Committee

Review Nevada laws and tax issues to recommend pro-business initiatives to Executive Committee

Nevada Development Authority Legislative Committee

Member	Legislative Committee Co-Chairman	Legislative Committee Co-Chairman
Joseph Carleone American Pacific Corporation 3883 Howard Hughes Pkwy , Ste 700	Joseph W Brown Jones Vargas 3773 Howard Hughes Pkwy , 3rd Fl South	Robert Lewis Lewis Operating Corp P O Box 19297
Las Vegas NV 89169 702-699-4166 Fax 702-794-0714	Las Vegas NV 89169 702-862-3300 Fax 702-734-2722	Las Vegas NV 89132 702-891-5260 Fax 702-891-5286
Member	Member	Secretary/Treasurer
Kevin T Orrock The Howard Hughes Corporation 10000 W Charleston Blvd , Ste 200	Ray Specht Toyota Financial Savings Bank 2485 Village View Dr	Glenn C Christensen Velstand Investments, LLC 1450 W Horizon Ridge Pkwy , B304 #675
Las Vegas NV 89135 702-791-4000 Fax 702-791-4486	Henderson NV 89074 702-477-2105 Fax 702-477-2101	Henderson NV 89012 702-897-1165 Fax 702-897-5064

Application for Extension of Time To File an
Exempt Organization Return

► File a separate application for each return

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ▶

- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only



All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization NEVADA DEVELOPMENT AUTHORITY, INC. ATT: CAROL COOPER	Employer identification number 88-0070996
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions 6700 VIA AUSTI PARKWAY, NO. B	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions LAS VEGAS, NV 89119	

Check type of return to be filed (file a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

KAFOURY ARMSTRONG

- The books are in the care of ► 8329 W. SUNSET RD, STE 210 - LAS VEGAS, NV 89113

Telephone No ► 702-384-7717 FAX No ► 

- If the organization does not have an office or place of business in the United States, check this box

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2011, to file the exempt organization return for the organization named above. The extension is for the organization's return for.

► calendar year or

► tax year beginning JUL 1, 2009, and ending JUN 30, 2010.

2 If this tax year is for less than 12 months, check reason. Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$
		N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)