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Form 990



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 black lung benefit trust or private foundation)

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010

B Check if applicable

☒ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

NEVADA DONOR NETWORK INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

2061 E SAHARA AVENUE

Room/suite

City or town, state or country, and ZIP + 4

LAS VEGAS, NV 891043829

F Name and address of principal officer

KEN RICHARDSON

2061 E SAHARA AVENUE

LAS VEGAS, NV 89104

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) ( ) ☐ (insert no ) ☐ 4947(a)(1) or ☐ 527

J Website:

WWW.NVDONOR.ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

1986

M State of legal domicile

NV

Part I	Summary																								
Activities & Governance	<div><div>1</div><div>Briefly describe the organization's mission or most significant activities</div><div>NEVADA DONOR NETWORK (THE "NETWORK") IS A FEDERALLY DESIGNATED NOT-FOR-PROFIT ORGAN, TISSUE, AND EYE PROCUREMENT ORGANIZATION THE NETWORK IS RESPONSIBLE FOR THE COORDINATION, RECOVERY, AND DISTRIBUTION OF DONATED HUMAN ORGANS AND TISSUES INTENDED FOR TRANSPLANTATION, MEDICAL EDUCATION AND RESEARCH THE NETWORK PROVIDES SERVICES TO HOSPITALS AND HEALTHCARE FACILITIES THROUGHOUT SOUTHERN NEVADA AND PARTICIPATES IN THE NATIONAL ORGAN AND TISSUE SHARING SYSTEM</div></div>																								
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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.

Sign Here

\*\*\*\*\*

Signature of officer

2011-05-13

Date

KEN RICHARDSON EXECUTIVE DIRECTOR

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

DIANNA RUSSO

Preparer's signature

DIANNA RUSSO

Date

2011-06-07

Check if self-employed

☐

PTIN

Firm's name

HOULDSWORTH RUSSO & COMPANY PC

Firm's EIN

Firm's address

8675 S EASTERN AVE STE A

LAS VEGAS, NV 891232839

Phone no

(702) 269-9992

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2010)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐ Yes ☒ No

1

Briefly describe the organization’s mission

NEVADA DONOR NETWORK (THE "NETWORK") IS A FEDERALLY DESIGNATED NOT-FOR-PROFIT ORGAN, TISSUE, AND EYE PROCUREMENT ORGANIZATION THE NETWORK IS RESPONSIBLE FOR THE COORDINATION, RECOVERY, AND DISTRIBUTION OF DONATED HUMAN ORGANS AND TISSUES INTENDED FOR TRANSPLANTATION, MEDICAL EDUCATION AND RESEARCH THE NETWORK PROVIDES SERVICES TO HOSPITALS AND HEALTHCARE FACILITIES THROUGHOUT SOUTHERN NEVADA AND PARTICIPATES IN THE NATIONAL ORGAN AND TISSUE SHARING SYSTEM

2

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 \$ 2,413,987 including grants of \$ ) (Revenue \$ 2,013,024 )

TISSUE AND EYE RECOVERY INCLUDES BONES, TENDONS, SKIN, HEART VALVES, VEINS AND CORNEAS TISSUES ARE RECOVERED BY THE NETWORK STAFF AND SENT TO VARIOUS ORGANIZATIONS FOR FURTHER PROCESSING AND SUBSEQUENT DISTRIBUTION THE NETWORK ALSO OPERATES A FULL SERVICE EYE BANK THAT PROVIDES OCULAR TISSUE FOR TRANSPLANTATION OCULAR TISSUE IS UTILIZED LOCALLY AND SHARED WITH OTHER EYE BANKS THROUGHOUT THE UNITED STATES AND OTHER COUNTRIES THROUGH THE INTERNATIONAL CORNEA PROJECT

4b

(Code ) (Expenses \$ 3,594,174 including grants of \$ ) (Revenue \$ 6,084,076 )

ORGAN RECOVERY FOCUSES ON LIFE-SAVING SOLID ORGANS SUCH AS THE HEART, LIVER, LUNGS, INTESTINES, PANCREAS AND KIDNEYS ORGAN RECOVERY SUPPORTS THE SOLID ORGAN TRANSPLANT PROGRAMS AT UNIVERSITY MEDICAL CENTER

4c

(Code ) (Expenses \$ 1,176,350 including grants of \$ ) (Revenue \$ 951,085 )

THE HLA LABORATORY PERFORMS TISSUE TYPING ON POTENTIAL ORGAN RECIPIENTS AND LIVING RELATED MATCHES IS PERFORMED IN THE LABORATORY

4d

Other program services (Describe in Schedule O ) See also Additional Data for Description















(Expenses \$ 1,027,254 including grants of \$ ) (Revenue \$ 28,602 )

4e

Total program service expenses \$ 8,211,765

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2	No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3	No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	4	No
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? <i>If "Yes," complete Schedule C, Part III.</i>	5	No
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? <i>If "Yes," complete Schedule D, Part I.</i> 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> 	8	No
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? <i>If "Yes," complete Schedule D, Part IV.</i> 	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> 	10	No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	11a	Yes
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? <i>If "Yes," complete Schedule D, Part VII.</i> 	11b	No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> 	11c	No
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? <i>If "Yes," complete Schedule D, Part IX.</i> 	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	11e	No
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)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	12a	Yes
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> 	12b	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b	No
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 U S? <i>If "Yes," complete Schedule F, Parts II and IV.</i>	15	No
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 U S? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions).</i>	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions).	20b	

Part IV

Checklist of Required Schedules (continued)

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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? . . . . .	35		No
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

☐

			Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	73		
		1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	64		
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).					
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		No
b 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			No
	b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c 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?			6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7 Organizations that may receive deductible contributions under section 170(c).					
a 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		No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d If "Yes," indicate the number of Forms 8282 filed during the year.			7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
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 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.					
a Did the organization make any taxable distributions under section 4966?			9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10 Section 501(c)(7) organizations. Enter					
a Initiation fees and capital contributions included on Part VIII, line 12.			10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.			10b		
11 Section 501(c)(12) organizations. Enter					
a Gross income from members or shareholders.			11a		
b 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		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.			13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.			13b		
c Enter the amount of reserves on hand.			13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.			14b		

Part VI

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

Section A. Governing Body and Management			Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year . . . . .	<b>1a</b> 28		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent . . . . .	<b>1b</b> 24		
<b>2</b>	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? . . . . .	<b>2</b>		No
<b>3</b>	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? . . . . .	<b>3</b>		No
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	<b>4</b>		No
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	<b>5</b>		No
<b>6</b>	Does the organization have members or stockholders? . . . . .	<b>6</b>		No
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	<b>7a</b>		No
<b>b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	<b>7b</b>		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following . . . . .			
<b>a</b>	The governing body? . . . . .	<b>8a</b>	Yes	
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>	Yes	
<b>9</b>	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 . . . . .	<b>9</b>		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			Yes	No
<b>10a</b>	Does the organization have local chapters, branches, or affiliates? . . . . .	<b>10a</b>		No
<b>b</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? . . . . .	<b>10b</b>		
<b>11a</b>	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<b>11a</b>	Yes	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . .			
<b>12a</b>	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> . . . . .	<b>12a</b>	Yes	
<b>b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>	Yes	
<b>c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	<b>12c</b>	Yes	
<b>13</b>	Does the organization have a written whistleblower policy? . . . . .	<b>13</b>	Yes	
<b>14</b>	Does the organization have a written document retention and destruction policy? . . . . .	<b>14</b>	Yes	
<b>15</b>	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? . . . . .			
<b>a</b>	The organization's CEO, Executive Director, or top management official . . . . .	<b>15a</b>	Yes	
<b>b</b>	Other officers or key employees of the organization . . . . .	<b>15b</b>	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) . . . . .			
<b>16a</b>	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>16a</b>		No
<b>b</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? . . . . .	<b>16b</b>		

Section C. Disclosure	
<b>17</b>	List the States with which a copy of this Form 990 is required to be filed <b>►</b> _____
<b>18</b>	Section 6104 requires an organization to make its Form 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. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
<b>19</b>	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. See Additional Data Table.
<b>20</b>	State the name, physical address, and telephone number of the person who possesses the books and records of the organization <b>►</b> JUDY RIGHTER 2061 E SAHARA AVE LAS VEGAS, NV 89104 (702) 796-9600

Part VII

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

Check if Schedule O contains a response to any question 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, and **current** key employees 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

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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN DANILOVS PHD ADVISOR	5 00	X						97,807	0	0
(2) GUANG TSAI MD MEMBER	5 00	X						57,200	0	0
(3) RAJY ROUWEYHA MD MEMBER	5 00	X						18,000	0	0
(4) JOAQUIM TAVARES MD ADV CHAIR	1 00	X						12,000	0	0
(5) JASON H NIELSON MD ADVISOR	1 00	X						12,000	0	0
(6) FINA WARDLE RN MEMBER	1 00	X						0	0	0
(7) WILLIAM GAZZA ADVISOR	1 00	X						0	0	0
(8) VICKY VANMEETREN CEO IMMED PAST	1 00	X						0	0	0
(9) ELLIE POWELL MA RN CCR MEMBER	1 00	X						0	0	0
(10) ROY COSTON ADVISOR	1 00	X						0	0	0
(11) TOM STARK ESQ MEMBER	1 00	X						0	0	0
(12) TIM BROWDER MD ADVISOR	1 00	X						0	0	0
(13) JAY COATES DO ADVISOR	1 00	X						0	0	0
(14) GARY DAVIS ADVISOR	1 00	X						0	0	0
(15) JUDGE ALLEN EARL ADVISOR	1 00	X						0	0	0
(16) MICHAEL METZLER MD ADVISOR	1 00	X						0	0	0



Part VII

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(17) P MICHAEL MURPHY ADVISOR	1 00	X						0	0	0
(18) JERRY PROSE ADVISOR	1 00	X						0	0	0
(19) SCOTT SELCO MD PHD ADVISOR	1 00	X						0	0	0
(20) MICHAEL SEIFF MD ADVISOR	1 00	X						0	0	0
(21) TANA WISNIEWSKI RN ADVISOR	1 00	X						0	0	0
(22) WILLIAM R KEARNEY MA EMTP MEMBER	1 00	X						0	0	0
(23) TERRY CARE ESQ MEMBER	1 00	X						0	0	0
(24) VIPUL SHAH MD MEMBER	1 00	X						0	0	0
(25) GARY DAVIS MEMBER	1 00	X						0	0	0
(26) BRIAN BRANNMAN COO ADVISOR	1 00	X						0	0	0
(27) JASON SCHWARTZ MD ADVISOR	1 00	X						0	0	0
(28) JOHN SORENSON MD ADVISOR	1 00	X						0	0	0
(29) KEN E RICHARDSON EXEC DIR	45 00			X				182,801	0	37,522
(30) CLAUDIA SWIFT RN TREASURER	1 00			X				0	0	0
(31) KIM FARKAS PRESIDENT	1 00			X				0	0	0
(32) KATHY CRABTREE RN SECRETARY	1 00			X				0	0	0
(33) CASSANDRA COTTON PRES ELECT	1 00			X				0	0	0
(34) EDWIN SERNA DIR ORG REC	45 00					X		154,641	0	21,270
(35) GERALD BRYAN DIR EYE SVCS	55 00					X		135,351	0	15,960
(36) CONNIE LIVELY DIR HLA	40 00					X		131,768	0	19,530
(37) DEBRA CURTIS DIR TIS/EYE	40 00					X		129,066	0	10,924
(38) THEOPHILUS MCCREARY TISSUE PROC	40 00					X		114,641	0	13,407
1b Sub-Total . . . . .										
c Total from continuation sheets to Part VII, Section A . . . . .										
d Total (add lines 1b and 1c) . . . . .								1,045,275		118,613

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization7

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		No
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? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .		No

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

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	1a	Federated campaigns . . .	1a		8,534						
	b	Membership dues . . . . .	1b								
	c	Fundraising events . . . . .	1c								
	d	Related organizations . . . . .	1d								
	e	Government grants (contributions)	1e								
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	8,534							
	g	Noncash contributions included in lines 1a-1f \$									
	h	Total. Add lines 1a-1f . . . . .									
	Program Service Revenue	2a							Business Code	9,076,787	9,076,787
		RECOVERY FEES		621500							
b		MEDICARE REIMBURSEMENTS		621500	863,451	863,451					
c											
d											
e											
f		All other program service revenue									
g		Total. Add lines 2a-2f . . . . .			9,940,238						
Other Revenue		3	Investment income (including dividends, interest and other similar amounts) . . . . .			1,135			1,135		
	4	Income from investment of tax-exempt bond proceeds . . .									
	5	Royalties . . . . .									
	6a	Gross Rents		(i) Real	(ii) Personal						
		b	Less rental expenses								
			Rental income or (loss)								
			d Net rental income or (loss) . . . . .								
	7a	Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other						
		b	Less cost or other basis and sales expenses								
			Gain or (loss)								
			d Net gain or (loss) . . . . .								
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .									
		b	Less direct expenses . . . . .								
			c Net income or (loss) from fundraising events . . .								
	9a	Gross income from gaming activities See Part IV, line 19 . . .									
		b	Less direct expenses . . . . .								
			c Net income or (loss) from gaming activities . . .								
	10a	Gross sales of inventory, less returns and allowances . . . . .									
		b	Less cost of goods sold . . . . .								
			c Net income or (loss) from sales of inventory . . .								
Miscellaneous Revenue				Business Code							
11a											
	b										
	e Total. Add lines 11a-11d . . . . .										
12 Total revenue. See Instructions . . . . .					9,949,907	9,940,238		1,135			

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 . . . . .	464,512	197,007	267,505	
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	2,932,601	2,653,653	278,948	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	104,936	70,544	34,392	
9	Other employee benefits . . . . .	353,324	291,885	61,439	
10	Payroll taxes . . . . .	235,054	197,244	37,810	
a	Fees for services (non-employees)				
	Management . . . . .				
b	Legal . . . . .				
c	Accounting . . . . .	23,105		23,105	
d	Lobbying . . . . .				
e	Professional fundraising services See Part IV, line 17 . . . . .				
f	Investment management fees . . . . .				
g	Other . . . . .	394,048	369,072	24,976	
12	Advertising and promotion . . . . .				
13	Office expenses . . . . .	246,175	204,651	41,524	
14	Information technology . . . . .				
15	Royalties . . . . .				
16	Occupancy . . . . .	357,552	186,175	171,377	
17	Travel . . . . .	54,622	50,754	3,868	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19	Conferences, conventions, and meetings . . . . .				
20	Interest . . . . .	93,010	84,564	8,446	
21	Payments to affiliates . . . . .				
22	Depreciation, depletion, and amortization . . . . .	150,659	54,736	95,923	
23	Insurance . . . . .	179,722	110,830	68,892	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O )				
a	RECOVERY COSTS	1,755,574	1,755,574		
b	LABORATORY	631,530	631,530		
c	MEDICAL SUPPLIES	401,139	401,139		
d	IMPORT COSTS	250,516	250,516		
e	PRESERVATION	213,469	213,469		
f	All other expenses	610,483	488,422	122,061	
25	Total functional expenses. Add lines 1 through 24f	9,452,031	8,211,765	1,240,266	0
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			204,963	1	195,579
	2	Savings and temporary cash investments . . . . .			1,779,352	2	1,905,625
	3	Pledges and grants receivable, net . . . . .				3	
	4	Accounts receivable, net . . . . .			2,067,131	4	2,417,233
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .			2,230	5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Schedule L . . . . .				6	
	7	Notes and loans receivable, net . . . . .				7	
	8	Inventories for sale or use . . . . .				8	
	9	Prepaid expenses and deferred charges . . . . .			47,366	9	40,032
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	3,698,609			
	b	Less: accumulated depreciation . . . . .	10b	577,616	2,770,415	10c	3,120,993
	11	Investments—publicly traded securities . . . . .				11	100
	12	Investments—other securities. See Part IV, line 11 . . . . .				12	
	13	Investments—program-related. See Part IV, line 11 . . . . .				13	
	14	Intangible assets . . . . .			16,444	14	9,190
	15	Other assets. See Part IV, line 11 . . . . .			3,342	15	4,085
16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			6,891,243	16	7,692,837	
Liabilities	17	Accounts payable and accrued expenses . . . . .			540,026	17	907,571
	18	Grants payable . . . . .				18	
	19	Deferred revenue . . . . .				19	
	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 . . . . .			1,358,265	23	1,294,438
	24	Unsecured notes and loans payable to unrelated third parties . . . . .				24	
	25	Other liabilities. Complete Part X of Schedule D . . . . .				25	
	26	Total liabilities. Add lines 17 through 25 . . . . .			1,898,291	26	2,202,009
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 . . . . .			4,992,952	27	5,488,828
	28	Temporarily restricted net assets . . . . .				28	2,000
	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 . . . . .			4,992,952	33	5,490,828
34	Total liabilities and net assets/fund balances . . . . .			6,891,243	34	7,692,837	

**Part XI**    **Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI . . . . . ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	<b>1</b>	9,949,907
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25) . . . . .	<b>2</b>	9,452,031
<b>3</b>	Revenue less expenses Subtract line 2 from line 1 . . . . .	<b>3</b>	497,876
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	<b>4</b>	4,992,952
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>5</b>	
<b>6</b>	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) . . . . .	<b>6</b>	5,490,828

**Part XII**    **Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant? . . . . .	Yes	
<b>c</b>	If "Yes," to 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 . . . . .	Yes	
<b>d</b>	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
<b>3a</b>	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? . . . . .		No
<b>b</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 . . . . .		

SCHEDULE A  
(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization  
NEVADA DONOR NETWORK INC

Employer identification number  
88-0253675

Part I

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 11, 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 )

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

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 )

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

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 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 )

10

☐

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 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 that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?  
(ii) a family member of a person described in (i) above?  
(iii) a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
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						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions )					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶		

Part IIIPart III

Support Schedule for Organizations Described in Section 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	34,233	25,569	10,649	26,086	8,534	105,071
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	6,747,404	8,425,121	10,062,631	8,547,156	10,044,416	43,826,728
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	6,781,637	8,450,690	10,073,280	8,573,242	10,052,950	43,931,799
7a 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						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						43,931,799

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	6,781,637	8,450,690	10,073,280	8,573,242	10,052,950	43,931,799
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	36,754	70,249	46,612	5,934	1,135	160,684
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	36,754	70,249	46,612	5,934	1,135	160,684
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				1,248		1,248
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12)	6,818,391	8,520,939	10,119,892	8,580,424	10,054,085	44,093,731
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	99.630 %
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	99.470 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	0 %
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶		



Part IV

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

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

2010

Open to Public  
Inspection

Name of the organization  
NEVADA DONOR NETWORK INC

Employer identification number  
88-0253675

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? <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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 <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div>	

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 importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

	Held at the End of the Year
2a	Total number of conservation easements
2b	Total acreage restricted by conservation easements
2c	Number of conservation easements on a certified historic structure included in (a)
2d	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 taxable 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 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

b

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

► \$ \_\_\_\_\_

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2010

Part III

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

3

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

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

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 the 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

	Amount
1c	
1d	
1e	
1f	

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

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance . . . . .				
b	Contributions . . . . .				
c	Investment earnings or losses . . . . .				
d	Grants or scholarships . . . . .				
e	Other expenditures for facilities and programs . . . . .				
f	Administrative expenses . . . . .				
g	End of year balance . . . . .				

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?

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

4

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

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 . . . . .		248,069		248,069
b Buildings . . . . .		2,242,550	273,798	1,968,752
c Leasehold improvements . . . . .		609,440	60,441	548,999
d Equipment . . . . .		583,322	228,149	355,173
e Other . . . . .		15,228	15,228	
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				3,120,993



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

<b>1</b>	Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	9,949,907
<b>2</b>	Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	9,452,031
<b>3</b>	Excess or (deficit) for the year Subtract line 2 from line 1	<b>3</b>	497,876
<b>4</b>	Net unrealized gains (losses) on investments	<b>4</b>	
<b>5</b>	Donated services and use of facilities	<b>5</b>	
<b>6</b>	Investment expenses	<b>6</b>	
<b>7</b>	Prior period adjustments	<b>7</b>	
<b>8</b>	Other (Describe in Part XIV)	<b>8</b>	
<b>9</b>	Total adjustments (net) Add lines 4 - 8	<b>9</b>	
<b>10</b>	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	<b>10</b>	497,876

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	9,949,907
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains on investments . . . . .	<b>2a</b>	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	9,949,907
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total Revenue Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	9,949,907

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	9,452,031
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	9,452,031
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	9,452,031

**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, 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.

Identifier	Return Reference	Explanation
------------	------------------	-------------

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization  
NEVADA DONOR NETWORK INC

Employer identification number  
88-0253675

Part I

Questions Regarding Compensation

	Yes	No
<div>1a</div> <div>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.</div> <div><div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div>		
<div>1b</div> <div>If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain.</div>		
<div>2</div> <div>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?</div>		
<div>3</div> <div>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.</div> <div><div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div><div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div>		
<div>4</div> <div>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:</div>		
<div>a</div> <div>Receive a severance payment or change-of-control payment from the organization or a related organization?</div>		No
<div>b</div> <div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div>		No
<div>c</div> <div>Participate in, or receive payment from, an equity-based compensation arrangement?</div> <div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</div>		No
<div></div> <div>Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.</div>		
<div>5</div> <div>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:</div>		
<div>a</div> <div>The organization?</div>		No
<div>b</div> <div>Any related organization?</div> <div>If "Yes," to line 5a or 5b, describe in Part III.</div>		No
<div>6</div> <div>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:</div>		
<div>a</div> <div>The organization?</div>		No
<div>b</div> <div>Any related organization?</div> <div>If "Yes," to line 6a or 6b, describe in Part III.</div>		No
<div>7</div> <div>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.</div>		No
<div>8</div> <div>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.</div>		No
<div>9</div> <div>If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</div>		

**Part II** **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KEN E RICHARDSON	(i) (ii)	182,801			22,000	15,522	220,323	169,811
(2) EDWIN SERNA	(i) (ii)	154,341	300		5,943	15,327	175,911	145,262
(3) GERALD BRYAN	(i) (ii)	135,051	300			15,960	151,311	125,759
(4) CONNIE LIVELY	(i) (ii)	131,768			13,575	5,955	151,298	137,086
( 5 )								
( 6 )								
( 7 )								
( 8 )								
( 9 )								
( 10 )								
( 11 )								
( 12 )								
( 13 )								
( 14 )								
( 15 )								
( 16 )								

**Part III**   **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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Schedule L  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Transactions with Interested Persons  
▶ Complete if the organization answered  
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V lines 38a or 40b.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047  
**2010**  
Open to Public Inspection

Name of the organization  
NEVADA DONOR NETWORK INC

Employer identification number  
88-0253675

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)	JOHN DANILOVS PH D	BOARD MEMBER	Yes	
(2)	RAJY ROUWEYHA MD	BOARD MEMBER	Yes	
(3)	GUANG TSAI	BOARD MEMBER	Yes	
(4)	JOAQUIM TAVARES MD	BOARD MEMBER	Yes	

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total . . . . . ▶ \$										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV

Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public  
Inspection

Name of the organization NEVADA DONOR NETWORK INC	Employer identification number 88-0253675
------------------------------------------------------	----------------------------------------------

Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	NEVADA DONOR NETWORK (THE "NETWORK") IS A FEDERALLY DESIGNATED NOT-FOR-PROFIT ORGAN, TISSUE, AND EYE PROCUREMENT ORGANIZATION THE NETWORK IS RESPONSIBLE FOR THE COORDINATION, RECOVERY, AND DISTRIBUTION OF DONATED HUMAN ORGANS AND TISSUES INTENDED FOR TRANSPLANTATION, MEDICAL EDUCATION AND RESEARCH THE NETWORK PROVIDES SERVICES TO HOSPITALS AND HEALTHCARE FACILITIES THROUGHOUT SOUTHERN NEVADA AND PARTICIPATES IN THE NATIONAL ORGAN AND TISSUE SHARING SYSTEM

**BYLAWS OF THE  
NEVADA DONOR NETWORK, INC.**

Revised August, 2005

Revised March, 2010

**ARTICLE I -NAME**

The name of the corporation is the Nevada Donor Network, Inc (hereinafter referred to as "the NDN") a non-profit corporation established under the laws of the State of Nevada

**ARTICLE II - LOCATION**

The principal place of business shall be in Clark County, Nevada, 2085 East Sahara Avenue, Las Vegas, Nevada 89104 The Board of Trustees is hereby granted full power and authority to change said principal office from one location to another in the State of Nevada

**ARTICLE III - PURPOSE**

- Section 1      The purposes of the NDN are set forth in its Articles of Incorporation
- Section 2      Such purposes are exclusively charitable, the NDN shall not be conducted for profit or gain, and no part of its net earnings shall inure to the benefit of any individual, firm or corporation
- Section 3      1 To establish, organize, develop, coordinate, manage and otherwise supervise and direct the referral, evaluation, retrieval, procurement, processing, preservation, packaging, storage, allocation, distribution and delivery of human organs, tissues and other essential components thereof from throughout the State of Nevada and elsewhere for transplantation, implantation and medical education and/or research
- 2 To establish, promote and support a system of efficient and effective transplant-related agencies and the development of relationships with other non-related entities to promote donor organ and tissue referral, procurement, public and professional education, research and other activities that focus on facilitating a greater awareness by the general public and health care professionals as to the tremendous need for organ/tissue donation in Nevada and throughout the United States and the remarkable successes and advances achieved in modern transplant medicine
- 3 To support all its programs and other transplant-related agencies in conducting charitable activities to raise funds to achieve the above and below-stated portions of the overall purpose of the corporation
- 4 To in general, establish, promote, encourage, support, sponsor, finance and/or expand organizations, programs and individuals actively involved in providing

medical, charitable, scientific, literary, and educational services, including but not limited to, assisting the promotion and sponsorship of activities related to transplantation and/or the arts and medical technology of transplantation

5 To exercise all rights and powers conferred by the laws of the State of Nevada Upon non-profit corporations (NRS Chapter 82, as amended), including without limiting the generality of the foregoing, to acquire by bequest, devise, gift, purchase, lease or otherwise any property of any sort or nature without limitation as to its amount or value, and to hold, invest, reinvest, manage, use, apply, employ, sell, expend, disburse, lease, mortgage, convey, option, donate or otherwise dispose of such property and the income, principal and proceeds of such property, for any of the purposes set forth herein

6 To do such other things as are incidental to the purposes of the corporation or necessary or desirable in order to accomplish them and as permitted by law

7 By assisting in other ways that may be approved by the Board of Trustees

8 Notwithstanding any other provisions of these Articles, the corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from Federal Income Tax under Section 501(c)(3) of the Internal Revenue Code of 1986 or as amended

9 Where applicable, the corporation shall comply with the Code of Federal Regulations, including CFR 485 304, as amended

#### **ARTICLE IV - ADVISORY BOARD**

Section 1 **ADVISORY BOARD** The Advisory Board shall consist of a minimum of nine (9) but no more than twenty-five (25 ) voting members The Advisory Board shall be Composed as follows

- 1 One or more hospital administrators
- 2 One or more representatives of tissue banking
- 3 One or more representatives of voluntary health associations in the NDN service area
- 4 One or more representatives of either intensive care or emergency room personnel
- 5 A physician with knowledge, experience, or skill in the field of human histocompatibility, or an individual with a doctorate degree in biological science and with knowledge, experience, or skill in the field of human histocompatibility
- 6 One or more neurosurgeons or other physicians with knowledge or skill in the field of neurology
- 7 A practicing transplant surgeon from each transplant center in NDN's service area
- 8 One or more representatives of eye banking

9 Members from the general public which may include but are not limited to, transplant recipients, donor families, individuals from the fields of law, theology, hospital administration, ethics, health care financing, computer sciences, economics, sociology and behavioral sciences, among others

The Chair of the Advisory Board or the President of the Governing Board may appoint additional, nonvoting members as needed or desirable from time to time to carry out the functions of the Advisory Board. Appointed members do not count in the establishment of a quorum.

**Section 2**      **TERM OF OFFICE** The term of office will be staggered in two year increments with one-half of the trustees' terms expiring in the first year and the second half in two years. Every year thereafter, one-half of the Advisory Board will be elected. Advisory Board members may be elected/appointed to successive terms.

Except as provided in the Articles of Incorporation or these Bylaws, the term of a Member filling any vacancy expires at the end of the unexpired term that such Member is filling.

**Section 3**      **ELECTION/APPOINTMENT** The initial Advisory Board shall be appointed by the President of the Nevada Donor Network Governing Board. The President shall also appoint the Chair of the Advisory Board. Thereafter, potential members may be nominated by existing members, members of the health care community and/or the community at large, members of the Governing Board and any other source(s) deemed appropriated.

Nominations shall be reviewed and compiled by the President of the Governing Board and the Chair of the Advisory Board. They shall prepare a final ballot for distribution to the full Advisory Board and Governing Board. The ballot may be distributed in person, by U.S. mail, or by facsimile or electronic mail at least thirty (30) days prior to the annual meeting. The President and Chair or their designee shall tabulate the returned ballots and report the results of the election at the annual meeting.

Election to the Advisory Board shall be by written ballot. The person with the largest number of votes shall be elected. Cumulative voting is not permitted. The Advisory Board shall be elected by a majority vote of the members and ratified by the Governing Board.

The Chair of the Advisory Board shall, after initial appointment by the President of the Governing Board, be elected by a majority vote of the Advisory Board with ratification by the Governing Board. The Chair shall serve a one-year term but may be elected to successive terms. The Chair of the Advisory Board shall serve as the liaison (non-voting) to the NDN Governing Board. He/she may attend Governing Board meetings and report on the Advisory Board's activities and its

progress in improving organ/tissue donation

Section 4     **VACANCIES** Vacancies on the Advisory Board will be filled by the President of the Governing Board in consultation with the Chair of the Advisory Board. The appointee shall hold office until his/her successor is elected. A vacancy or vacancies in the Advisory Board shall be deemed to exist in case of the death, resignation, or removal of any member.

Section 5     **REMOVAL/RESIGNATION** Any member who has three (3) consecutive, unexcused absences from a regularly scheduled meeting shall be deemed to have resigned from the Advisory Board.

Any Advisory Board member may resign at any time by submitting written notice to the Chair.

Any Advisory Board member may be removed with or without cause by the Chair of the Advisory Board with consent of the President of the Governing Board.

Section 6     **CONFLICT OF INTEREST** All Members of the Advisory Board must disclose any potential or actual conflict of interest and abstain from voting on matters relating thereto.

No member of the Advisory Board shall receive compensation solely for his/her service as a member of the Advisory Board. However, members of the Advisory Board may be paid for clinical services rendered to the organization. Compensation for such services shall be set by the Governing Board.

Members of the Advisory Board may not hold voting membership on the Governing Board or any standing committee of the Network. However, Advisory Board members may attend in a non-voting, advisory capacity.

All members of the Advisory Board must attend an orientation program that includes information on Corporate Compliance and Conflict of Interest.

## **ARTICLE V -ADVISORY BOARD AUTHORITY**

Section 1     **AUTHORITY AND PURPOSE** The primary purpose of the Advisory Board is to maximize organ and tissue donation in the Nevada Donor Network's (NDN) Donation Service Area (DSA) as defined by the Centers for Medicare/Medicaid Services (CMS). Specifically, the Advisory Board is to identify and remove barriers to organ and tissue donation in keeping with best practices in the field. Further, the Advisory Board has authority to recommend policies for the following:

- (A) The procurement of organs and tissues
- (B) Effective agreements to identify potential organ donors with the

majority of hospitals in the NDN DSA that have facilities for organ/tissue donation

(C) Systematic efforts, including professional education, to acquire all usable organs from potential donors

(D) Arrangements for the acquisition and preservation of donated organs and provision of quality standards for the acquisition of organs that are consistent with the standards adopted by the Organ Procurement and Transplant Network (OPTN, the government contractor), including arranging for testing with respect to preventing the acquisition of organs that are infected with the etiologic agent for acquired immune deficiency syndrome

(E) Appropriate tissue typing of organs

(F) A system for the allocation of organs among transplant patients that is consistent with the rules and requirements of the OPTN

(G) Transportation of organs to transplant hospitals

(H) Coordination of activities with transplant hospitals in the NDN DSA

(I) Participation in the OPTN

(J) Arrangements to cooperate with tissue banks for the retrieval, processing, preservation, storage, and distribution of tissues as may be appropriate to assure that all usable tissues are obtained from potential donors

(K) Annual evaluation of the effectiveness of the OPO in acquiring organs

(L) Assistance to hospitals in establishing and implementing protocols that maximize donation

The Advisory Board has no authority over any other activity of the NDN and Advisory Board members may not serve as voting members of the Governing Board or any other NDN Board or Committee

Section 2      **MEETINGS** The Advisory Board shall meet not less than two times each year. The Chair may call additional meetings as needed to meet the needs of the organization. Such meetings require at least ten (10) days notice to the membership. The date, time and location of the meeting will be determined by the Chair.

Section 3      **QUORUM** A quorum shall consist of not less than five (5) voting members of the Advisory Board.

Section 4      **COMMITTEES** The Advisory Board may create temporary committees as needed to further the purpose of the Advisory Board. Permanent committees may be created upon approval by the full Advisory Board and with the advice and consent of the Governing Board.

Section 5      **RULES** The Advisory Board and all committees (if any) related thereto shall follow Roberts Rules of Order.



- Section 6      **AGENDA** The meeting agenda will be prepared and distributed at least seven (7) days prior to a regularly scheduled meeting

## **ARTICLE VI -THE GOVERNING BOARD**

- Section 1      The initial Board of Trustees shall be appointed by the original Board/Founding Members and, if available, the Ad Hoc Committee

- Section 2      Following the first year the Governing Board will be elected in the following manner

Prior to the annual meeting, the President, or his/her designee shall solicit nominations from existing Board members, community leaders, hospital administrators, and any other source(s) deemed appropriate. Nominations shall be reviewed and compiled by the President or his/her designee. The ballot may be distributed in person, by US mail, or by facsimile at least thirty (30) days prior to the annual meeting. The President shall tabulate the returned ballots and report the results of the election at the annual meeting.

- Section 3      Election to the Governing Board shall be by written ballot. The persons with the largest number of votes shall be elected. Cumulative voting is not permitted. Election shall be by a majority vote of the Board.

- Section 4      **VACANCIES** Vacancies may be filled by the Board at any meeting of the Board, and each member so elected shall hold office until the his/her successor is elected at the annual meeting. A vacancy or vacancies in the Board shall be deemed to exist in case of the death, resignation, or removal of any member.

- Section 5      Any member who has three (3) unexcused absences from a regularly scheduled meeting shall be deemed to have resigned as of the day following the last regularly scheduled meeting of the Board.

- Section 6      **COMPOSITION** The composition of the Governing Board shall follow guidelines promulgated by appropriate regulatory authority or, if unspecified, the Board shall be composed of not less than seven (7) or more than fifteen (15) voting members.

Unless otherwise specified by regulation, members of the Governing Board shall be drawn from the community and should include experts in the fields of health care, business administration, accounting, banking and finance, public relations and marketing, human relations, labor relations, and the legal community, among others. It should include individuals who are committed to improving organ and tissue donation and transplantation in the community served by NDN.

## **ARTICLE VI - POWERS OF THE GOVERNING BOARD**

- Section 1      **POWERS** All corporate power shall be exercised by or under the authority of, and the business affairs of the corporation shall be controlled by the Governing Board, **NRS** Chapter 82 et seq , **CFR** 485 304, and any other applicable federal and state regulations or laws Without prejudice to such general powers, but subject to the same limitation, it is hereby expressly declared that the Board shall Have the following powers, to wit
- (A) To make recommendations and/or implement policies relating to the donation procurement and distribution of organs and tissues, including oversight and responsibility for the **NDN's** Quality Assessment Process Improvement (QAPI) program
  - (B) To select and remove all officers, agents of the corporation, prescribe such powers and duties for them as may be consistent with law , with the Articles of Incorporation or the Bylaws, fix their compensation and require from them security for faithful service
  - (C) To conduct, manage and control the affairs and business of the corporation and to make such rules and regulations therefore not inconsistent with law , with the Articles of Incorporation or the Bylaws, as they deem best
  - (D) To borrow money and incur indebtedness for purposes of the corporation, and to cause to be executed and delivered therefore, in the corporate name, promissory notes, bonds, debentures, deeds of trust, mortgages, pledges, hypothecation or other evidences of debt and securities therefore

## **ARTICLE VII - RESIGNATION**

- Section 1      A member of the Governing Board may resign at any time by delivering written notice to the president or secretary
- Section 2      A resignation is effective when the notice is effective unless the notice specifies a later effective date If a resignation is made effective at a later date, the Board may fill the pending vacancy before the effective date if the Board provides that the successor does not take office until the effective date

## **ARTICLE VIII - REMOVAL OF MEMBERS**

- Section 1      Removal of members of the Governing Board shall be pursuant to these Bylaws, the laws of this state, and any applicable federal law or regulation
- Section 2      A member may be removed with or without cause at any regular or special meeting of the Board by majority vote of those present at the meeting

## **ARTICLE IX - MEETINGS**

Section 1     **REGULAR MEETINGS** A regular annual meeting of the Governing Board shall be held without other notice than this bylaw. The Governing Board will meet August 22, 1995 for an organization meeting. The annual meeting will be a combined meeting of the Governing and Advisory Boards. It shall be held in November of each year and include an orientation program for Board members that includes Corporate Compliance, and Conflict of Interest issues. The Governing Board may provide by resolution the time and place within the State of Nevada for the holding of additional regular meetings of the Board without other notice than such resolution.

The Governing Board shall meet not less than six (6) times per year.

Section 2     **SPECIAL MEETINGS** Special meetings of the Governing Board may be called by or at the request of any five (5) members. The person or persons authorized to call special meetings of the Board may fix any place within the State of Nevada as the place for holding any special meeting of the Board called by them.

Section 3     **NOTICE** Notice of any special meeting of the Board shall be given at least fifteen (15) days previously thereto by written notice delivered personally or sent by mail or facsimile to each member at his/her address or facsimile number as shown by the records of the corporation. If mailed, such notice shall be deemed to be delivered when deposited in the United States mail in a sealed envelope so addressed, with postage thereon prepaid. If notice is given by facsimile, such notice shall be deemed to be delivered when a confirmation sheet from the facsimile device is received that states the transmittal was complete.

The attendance of a member at any meeting shall constitute a waiver of notice of such meeting, except where a member attends a meeting for the express purpose of objecting to the transaction of any business because the meeting is not lawfully called or convened. Neither the business to be transacted at, nor the purpose of any regular or special meeting of the Board need be specified in the notice or waiver of notice of such meeting, unless specifically required by law of these Bylaws.

Section 4     **AGENDA** A published Agenda will be provided to the Board at least ten (10) days prior to the next scheduled regular meeting. Board members may contact the Executive Director to add additional items up to fifteen (15) days prior to the next scheduled meeting. A final Agenda must be published to the Board within ten (10) days of the next regularly scheduled meeting.

Section 5     **INFORMAL ACTION BY TRUSTEES** The individual members of the Board shall have no power to act as such. Except as in this section provided, the Board shall act and shall have the capacity to act, only as a Board. Nevertheless, any action taken pursuant to a prior authorization or confirmed and approved by

subsequent ratification, in writing, whether of record in the corporate record book or otherwise, signed by all of the members, shall have and shall be deemed to have, the same force and effect as if such action had been taken in, or pursuant to a resolution adopted in a regularly called or constituted meeting of the Board

Section 6      **QUORUM** Any five (5) members of the Governing Board shall constitute a quorum Except as provided by law or in these Bylaws, any business may be transacted at any regular or special meeting of the Board at which a quorum is present The act of a majority of those members present shall constitute the act of the Board

Section 7      **ORDER OF BUSINESS** The Order of Business at regular and special meetings of the Board shall be determined by the President *or* his/her designee and published in accordance with Section 4 above Meetings shall generally include a review of the minutes from previous meetings, routine activity and financial reports, a QAPI report, committee reports, a report on unfinished business, and new business to be considered by the Board

Section 8      **CONFLICTS OF INTEREST** Board members shall receive training in Corporate Compliance and the avoidance of potential or actual conflicts of interest Members shall disclose any potential conflicts of interest and abstain from voting on matters related thereto

#### **ARTICLE X - COMMITTEES**

Section 1      The Governing Board may establish from time to time temporary committees and sub committees it deems necessary to carry out the purposes of the organization

Section 2      Committees appointed by the Board may exercise only the authority granted to them by the Board and shall not have or exercise any authority prohibited by law or these bylaws

Section 3      **CHAIRPERSON** The chairperson of each committee shall be appointed by the Board The Board shall set the number of members of each committee

Section 4      **VACANCIES** Vacancies in the membership of any committee may be filled by appointments made in the same manner as provided in the case of the original appointments

Section 5      **RULES** Each Committee shall follow Robert's Rules of Order

#### **ARTICLE XI - OFFICERS AND DUTIES**

Section 1      The officers of the Corporation shall be as provided in NRS 82 211 or as amended and provided in these Bylaws

- Section 2      **OFFICERS** The officers of the Nevada Donor Network shall be President, President-Elect, Past President, Secretary, Treasurer and the Executive Director
- Section 3      **TERM** The term of the officers shall be for one year Officers may be elected to successive terms
- Section 4      **DUTIES AND POWERS** The officers shall perform the duties and exercise the powers prescribed by the Articles of Incorporation, these Bylaws, the parliamentary authority adopted herein and those assigned by the Board or which normally pertain to the office These duties and powers shall include but not be limited to the following
- A The President shall
    - 1 Preside at all meetings of the Board
    - 2 Make a full report of the year's work at the annual meeting of the Board
    - 3 Advise committee chairpersons regarding selection of members
    - 4 Execute all legal papers, documents, or instruments authorized by the Board with the Executive Director
    - 5 Act as an ex-officio member of all committees
  - B The President-Elect shall
    - 1 Assume such duties as may be designated by the President or the Board
    - 2 Assume the duties of the President and perform any and all duties of the President in his/her absence or disability
  - C The Past President shall
    - 1 Assist and advise the Board
    - 2 Provide advice and assistance to the Board on long-range planning
  - D The Secretary shall
    - 1 Cause to be kept a record of the minutes of all regular, special, and Committee meetings and attest to the same with the Secretary's signature
    - 2 Receive the reports and actions taken and recommendations made by the standing committees at each regular meeting of the Board
    - 3 See to the giving and serving of all notices of the Board and shall have such other powers and perform such other responsibilities as the Board may from time to time determine
  - E The Treasurer shall
    - 1 Collect, receive, deposit and invest funds of the corporation as directed by the Board
    - 2 Render periodic financial statements to the Board and other reports and accounts of the NDN's financial condition as may be from time to time requested by the Board
    - 3 Perform other such duties and be given other powers as the Board may from time to time determine

F The Executive Director shall

1 Perform the duties described in Article XII, Section 6

## **ARTICLE XII - OPERATIONS**

Section 1      **OPERATIONS** The ongoing operations and functions of the NDN shall be performed in compliance with these Bylaws and the policies set by the Board and any applicable local, state, or federal laws, including but not limited to Section 485 304 of the Code of Federal Regulations as amended

Section 2      **CONTRACTS** The Board may authorize any officer or officers, agent or agents of the corporation, in addition to the officers so authorized by these Bylaws, to enter into any contract or execute and deliver any instrument in the name of and on behalf of the corporation, and such authority may be general or confined to specific instances

Section 3      **CHECKS, DRAFTS, ETC** All checks, drafts or orders for the payment of money, notes or other evidences of indebtedness issued in the name of the corporation shall be signed by such officer, such as the Executive Director, or officers, agent or agents of the corporation and in such manner as shall from time to time be determined by resolution of the Board of Trustees All checks, drafts or other instruments above \$1,000 00 shall contain two (2) signatures

Section 4      **DEPOSITS** All funds of the corporation shall be deposited from time to time to the credit of the corporation in such banks, trust companies, or other depositories as the Board may select

Section 5      **GIFTS** The Board may accept on behalf of the corporation any contribution, gift, bequest or devise for the general purposes or for any special purpose of the corporation

Section 6      **THE EXECUTIVE DIRECTOR** The Executive Director shall be selected by the Governing Board and employed by the corporation The Executive Director will be evaluated annually by the Board with established criteria set by the Board The compensation and benefits of the Executive Director shall be approved by the Board The Executive Director shall be the Chief Administrative Officer of the corporation, a nonvoting officer, and shall serve as an ex-officio member of the Board and all committees

It shall be the duty of the Executive Director to conduct the official correspondence, preserve all books, documents and communication, keep books of the accounts and maintain an accurate record of the proceedings of the corporation, the Board, and all committees

The Executive Director shall have general supervision over all employees which includes hiring, disciplinary action and termination of employee, shall evaluate

them at least annually and fix compensation of employees with the advice and consent of the Governing Board

The Executive Director shall perform such duties as may be incidental to the office subject to the direction of the Board, and shall

- 1 Prepare and have available for each Board member an agenda for each meeting prepared in concert with the President
- 2 Check the roll of members present at all meetings
- 3 Notify the presiding officer when a quorum is present
- 4 Have available for the Board, at the regular meeting, a monthly statement of receipts and expenditures, monies on hand, and a condition of the accounts
- 5 Prepare the annual report of the NDN as directed by the Board, including the work of the Board and its various committees, report of the Treasurer's office (general financial condition of the NDN, showing amounts expended from Budget Accounts)
- 6 Submit data and statistics which might be of interest, or requested by the Governing Board

#### **ARTICLE XIII - PERSONAL LIABILITY AND INDEMNITY OF BOARD MEMBERS, OFFICERS AND AGENTS**

The personal liability of the Board Members, Officers, and/or agents of the Corporation and/or the Corporation's ability to indemnify such individuals, shall be governed by NRS Chapter 82, et Seq, the laws of the State of Nevada and federal regulations where applicable

The Board shall hold the prior Board of Trustees of the Nevada Donor Network harmless for any claims, demands, or causes of action which may have accrued during the period of their acting as the Board of Trustees of the Nevada Donor Network and as a result of their actions as the Board of Trustees which complied with applicable state and federal laws or regulations

#### **ARTICLE XIV - PARLIAMENTARY AUTHORITY**

Robert's Rules of Order (latest revision) shall govern the meetings of the Board and the Committees of the NDN in all cases to which they are applicable and in which they are not inconsistent with these Bylaws

#### **ARTICLE XV - AMENDMENTS**

The Bylaws may be altered, amended or repealed by the vote or written assent by two-thirds of the Governing Board, provided that notice of the proposed alterations, amendment or repeal has been served personally or by mail on all members entitled to vote not less than fifteen (15) days prior to such action

Voted and approved as amended this 3<sup>rd</sup> day of November, 2005

Voted and approved as amended, March 11, 2010

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President

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President-elect

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Secretary

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Treasurer



Additional Data

Software ID:

Software Version:

EIN: 88-0253675

Name: NEVADA DONOR NETWORK INC

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN DANILOVS PHD ADVISOR	5 00	X						97,807	0	0
GUANG TSAI MD MEMBER	5 00	X						57,200	0	0
RAJY ROUWEYHA MD MEMBER	5 00	X						18,000	0	0
JOAQUIM TAVARES MD ADV CHAIR	1 00	X						12,000	0	0
JASON H NIELSON MD ADVISOR	1 00	X						12,000	0	0
FINA WARDLE RN MEMBER	1 00	X						0	0	0
WILLIAM GAZZA ADVISOR	1 00	X						0	0	0
VICKY VANMEETREN CEO IMMED PAST	1 00	X						0	0	0
ELLIE POWELL MA RN CCR MEMBER	1 00	X						0	0	0
ROY COSTON ADVISOR	1 00	X						0	0	0
TOM STARK ESQ MEMBER	1 00	X						0	0	0
TIM BROWDER MD ADVISOR	1 00	X						0	0	0
JAY COATES DO ADVISOR	1 00	X						0	0	0
GARY DAVIS ADVISOR	1 00	X						0	0	0
JUDGE ALLEN EARL ADVISOR	1 00	X						0	0	0
MICHAEL METZLER MD ADVISOR	1 00	X						0	0	0
P MICHAEL MURPHY ADVISOR	1 00	X						0	0	0
JERRY PROSE ADVISOR	1 00	X						0	0	0
SCOTT SELCO MD PHD ADVISOR	1 00	X						0	0	0
MICHAEL SEIFF MD ADVISOR	1 00	X						0	0	0
TANA WISNIEWSKI RN ADVISOR	1 00	X						0	0	0
WILLIAM R KEARNEY MA EMTP MEMBER	1 00	X						0	0	0
TERRY CARE ESQ MEMBER	1 00	X						0	0	0
VIPUL SHAH MD MEMBER	1 00	X						0	0	0
GARY DAVIS MEMBER	1 00	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BRIAN BRANNMAN COO ADVISOR	1 00	X						0	0	0
JASON SCHWARTZ MD ADVISOR	1 00	X						0	0	0
JOHN SORENSON MD ADVISOR	1 00	X						0	0	0
KEN E RICHARDSON EXEC DIR	45 00			X				182,801	0	37,522
CLAUDIA SWIFT RN TREASURER	1 00			X				0	0	0
KIM FARKAS PRESIDENT	1 00			X				0	0	0
KATHY CRABTREE RN SECRETARY	1 00			X				0	0	0
CASSANDRA COTTON PRES ELECT	1 00			X				0	0	0
EDWIN SERNA DIR ORG REC	45 00					X		154,641	0	21,270
GERALD BRYAN DIR EYE SVCS	55 00					X		135,351	0	15,960
CONNIE LIVELY DIR HLA	40 00					X		131,768	0	19,530
DEBRA CURTIS DIR TIS/EYE	40 00					X		129,066	0	10,924
THEOPHILUS MCCREARY TISSUE PROC	40 00					X		114,641	0	13,407

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code	) (Expenses \$	1,027,254	including grants of \$ (Revenue \$ 28,602 )
DONOR NETWORK EDUCATION PROVIDES AWARENESS AND INFORMATION TO THE MEDICAL COMMUNITY AND GENERAL PUBLIC THROUGH PROFESSIONAL EDUCATION SEMINARS, HOSPITAL INSERVICES, CEU PROGRAMS, PUBLIC EDUCATION, HEALTH FAIRS, BEREAVEMENT PROGRAMS, AND SCHOOL PRESENTATIONS			

Identifier	Return Reference	Explanation
ALL OTHER ACHIEVEMENTS DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4D	DONOR NETWORK EDUCATION PROVIDES AWARENESS AND INFORMATION TO THE MEDICAL COMMUNITY AND GENERAL PUBLIC THROUGH PROFESSIONAL EDUCATION SEMINARS, HOSPITAL INSERVICES, CEU PROGRAMS, PUBLIC EDUCATION, HEALTH FAIRS, BEREAVEMENT PROGRAMS, AND SCHOOL PRESENTATIONS

Identifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	THE FORM 990 IS SENT VIA EMAIL AND REGULAR MAIL TO ALL BOARD MEMBERS PRIOR TO FILING

Identifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	THE ORGANIZATION HAS A POLICY ON CORPORATE COMPLIANCE THAT ALL EMPLOYEES, MEMBERS OF THE GOVERNING AND ADVISORY BOARDS AND MEMBERS OF THEIR IMMEDIATE HOUSEHOLD MUST DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST AND ABSTAIN FROM ANY ACTION OR VOTE INVOLVING THE DISCLOSED POTENTIAL OR ACTUAL CONFLICT TRAINING IS DONE ON AN ANNUAL BASIS FOR BOTH EMPLOYEES AND BOARD MEMBERS AND ALL SIGN-OFF THAT THEY UNDERSTAND AND WILL ADHERE TO POLICY

Identifier	Return Reference	Explanation
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	ALL WAGES AND BENEFITS ARE REVIEWED AND APPROVED BY THE BOARD OF TRUSTEES

Identifier	Return Reference	Explanation
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	ALL WAGES AND BENEFITS ARE REVIEWED AND APPROVED BY THE BOARD OF TRUSTEES



Identifier	Return Reference	Explanation
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

Form

4562

Depreciation and Amortization  
(Including Information on Listed Property)

OMB No 1545-0172

2010

Attachment  
Sequence No 67

Department of the Treasury  
Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

Name(s) shown on return NEVADA DONOR NETWORK INC	Business or activity to which this form relates INDIRECT DEPRECIATION	Identifying number 88-0253675
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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	500,000
2	Total cost of section 179 property placed in service (see instructions) . . . . .	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	3	2,000,000
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 2009 Form 4562 . . . . .	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) . . . . .	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 2011 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 ) (See instructions )

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election . . . . .	15	
16	Other depreciation (including ACRS) . . . . .	16	150,404

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2010 . . . . .	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 2010 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 2010 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 instructions . . . . .	22	150,404
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	

Part V

Listed Property (Include automobiles, certain other vehicles, 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? <input type="checkbox"/> Yes <input type="checkbox"/> No						24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> 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
25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less 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 ( <b>do not</b> include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
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?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
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 (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	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? (See instructions )		
<b>Note:</b> 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) A mortization period or percentage	(f) A mortization for this year
42 A mortization of costs that begins during your 2010 tax year (see instructions)					
43 A mortization of costs that began before your 2010 tax year				43	255
44 <b>Total.</b> Add amounts in column (f) See the instructions for where to report				44	255