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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2010

Open to Public Inspection

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

A For the 2010 calendar year, or tax year beginning **JUL 1, 2010** and ending **JUN 30, 2011**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NEVADA COMMUNITY FOUNDATION, INC. Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1635 VILLAGE CENTER CIRCLE 160 City or town, state or country, and ZIP + 4 LAS VEGAS, NV 89134 F Name and address of principal officer GIAN BROSCO 1635 VILLAGE CENTER CIRCLE #160, LAS VEGAS,	D Employer identification number 88-0241420 E Telephone number 702-892-2326 G Gross receipts \$ 18,607,550. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ►
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 J Website: ► WWW.NEVADACF.ORG K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ► L Year of formation: 1988 M State of legal domicile: NV		

Part I Summary				
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE MISSION OF THE NEVADA COMMUNITY FOUNDATION IS TO RECEIVE AND ACCEPT FUNDS TO BE			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3 Number of voting members of the governing body (Part VI, line 1a)	3	11	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11	
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	6	
	6 Total number of volunteers (estimate if necessary)	6	16	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.	
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	
	9 Program service revenue (Part VIII, line 2g)	2,116,079.	1,782,043.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	424.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-945,854.	1,724,956.	
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	22,557.	245,114.	
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,192,782.	3,752,537.	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	1,628,729.	1,253,870.	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	315,287.	385,368.	
	b Total fundraising expenses (Part IX, column (D), line 25) ► 217,399.	0.	0.	
Expenses	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	2,063,514.	450,994.	
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,007,530.	2,090,232.	
	19 Revenue less expenses. Subtract line 18 from line 12	-2,814,748.	1,662,305.	
	Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
		21 Total liabilities (Part X, line 26)	22,299,096.	26,497,779.
		22 Net assets or fund balances. Subtract line 21 from line 20	2,815,581.	3,714,471.
			19,483,515.	22,783,308.

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	Date	5-10-12	
	MAUREEN PECKMAN, CHAIRPERSON Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/> PTIN
	Firm's name	04/25/12		
	Firm's address	Firm's EIN		
300 SOUTH 4TH STREET, SUITE 600		Phone no. 702 759 4000		
LAS VEGAS, NV 89101				

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

SCANNED JUN 15 2012

90-16 12

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐**1** Briefly describe the organization's mission:

TO RECEIVE AND ACCEPT FUNDS TO BE ADMINISTERED AND DISBURSED THROUGH GRANTS EXCLUSIVELY FOR CHARITABLE PURPOSES PRIMARILY IN NEVADA OR FOR THE BENEFIT OF RESIDENTS OF NEVADA; TO MATCH DONORS' PHILANTHROPIC INTERESTS WITH THE MYRIAD NEEDS OF THE COMMUNITY.

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 \$ 1,577,262. including grants of \$ 1,177,225.) (Revenue \$ 424.)
 THE PRIMARY PROGRAM OF THE FOUNDATION CONSISTS OF ITS DIRECT FINANCIAL SUPPORT OF OTHER CHARITIES AND CHARITABLE CAUSES. OTHER SUBSTANTIAL ACTIVITIES CLASSIFIED AS PROGRAM EXPENDITURES INCLUDE CONVENING OF CHARITIES TO EXAMINE DIFFERENT COMMUNITY ISSUES, THE CREATION AND PUBLICATION OF EDUCATIONAL AND RESOURCE MATERIALS, TECHNICAL AND ORGANIZATIONAL CONSULTING ASSISTANCE TO CHARITIES, AND PUBLIC EDUCATION EFFORTS DESIGNED TO RAISE THE LEVEL OF CHARITABLE GIVING FOR THE BROAD BENEFIT OF ALL NONPROFITS IN NEVADA.

4b (Code:) (Expenses \$ 99,918. including grants of \$ 76,645.) (Revenue \$ 0.)
 PROVIDE COLLEGE SCHOLARSHIPS TO QUALIFYING STUDENTS.

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

4d Other program services. (Describe in Schedule O.)

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

4e Total program service expenses **1,677,180.**

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>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
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>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
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>		
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>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
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>		X
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>		X
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>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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>		X
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>	X	
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>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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>	X	
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>	X	
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>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
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>		X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	<input checked="" type="checkbox"/>	
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>		<input checked="" type="checkbox"/>
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	<input checked="" type="checkbox"/>	
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 through 24d and complete Schedule K. If "No," go to line 25</i>		<input checked="" type="checkbox"/>
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		<input checked="" type="checkbox"/>
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		<input checked="" type="checkbox"/>
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		<input checked="" type="checkbox"/>
28c 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>		<input checked="" type="checkbox"/>
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	<input checked="" type="checkbox"/>	
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>		<input checked="" type="checkbox"/>
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	<input checked="" type="checkbox"/>	
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	<input checked="" type="checkbox"/>	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	24		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	6		
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)		X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			
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)?			X
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?			X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
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?			X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
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?			X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			X
d If "Yes," indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
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?			X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?			X
b Did the organization make a distribution to a donor, donor advisor, or related person?			X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?			X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			

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

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

☒**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	11	
b Enter the number of voting members included in line 1a, above, who are independent	11	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
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?		
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		X
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization		X
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
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?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **NV**

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

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **NEVADA COMMUNITY FOUNDATION - 702-892-2326**
1635 VILLAGE CENTER CIRCLE #160, LAS VEGAS, NV 89134

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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. 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			
MAUREEN PECKMAN CHAIRPERSON	1.00	X						0.	0.	0.
MICHAEL THREET TREASURER	1.00	X						0.	0.	0.
CHRIS WILCOX SECRETARY	1.00	X						0.	0.	0.
FRANCISCO AGUILAR DIRECTOR	1.00	X						0.	0.	0.
LARRY CARTER DIRECTOR	1.00	X						0.	0.	0.
DARLENE ENSIGN DIRECTOR	1.00	X						0.	0.	0.
DARA GOLDSMITH DIRECTOR	1.00	X						0.	0.	0.
JESSICA KARTIZNEL DIRECTOR	1.00	X						0.	0.	0.
DUNCAN LEE DIRECTOR	1.00	X						0.	0.	0.
MICHAEL MORRISSEY DIRECTOR	1.00	X						0.	0.	0.
CHARLES SILVESTRI DIRECTOR	1.00	X						0.	0.	0.
GIAN BROSCO PRESIDENT	40.00			X				189,935.	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			
1b Sub-total								189,935.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								189,935.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **1**

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(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 0		

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,782,043.				
	g Noncash contributions included in lines 1a-1f \$		395,084.				
	h Total. Add lines 1a-1f			1,782,043.			
Program Service Revenue	Business Code						
	2 a						
	b						
	c						
	d						
	e						
	f All other program service revenue		900099	424.	424.		
	g Total. Add lines 2a-2f			424.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			450,725.	450,725.		
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross Rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)			1,274,231.	1,274,231.		
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a CHANGES IN VALUE OF SP		523000	315,939.	315,939.			
b ADMIN FEES INCOME		541900	56,824.	56,824.			
c MISCELLANEOUS INCOME		541900	3,280.	3,280.			
d All other revenue		900003	-130,929.	-130,929.			
e Total. Add lines 11a-11d			245,114.				
12 Total revenue. See instructions.			3,752,537.	1,970,494.	0.	0.	

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	1,253,870.	1,253,870.		
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	324,683.	101,104.	98,525.	125,054.
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				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	39,844.	12,407.	12,089.	15,348.
10 Payroll taxes	20,841.	6,490.	6,323.	8,028.
11 Fees for services (non-employees):				
a Management				
b Legal	1,255.		1,255.	
c Accounting	23,224.		23,224.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	133,924.	133,924.		
g Other	27,250.	13,916.	11,667.	1,667.
12 Advertising and promotion	13,625.			13,625.
13 Office expenses	107,941.	95,912.	3,934.	8,095.
14 Information technology	23,359.	7,307.	7,132.	8,920.
15 Royalties				
16 Occupancy	53,672.	19,159.	16,713.	17,800.
17 Travel	675.		675.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,459.	131.	131.	2,197.
20 Interest	167.		167.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	14,430.	5,151.	4,493.	4,786.
23 Insurance	9,226.	2,873.	2,799.	3,554.
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 COMMUNITY INVOLVEMENT	17,844.	17,844.		
b TELEPHONE	6,571.	2,346.	2,046.	2,179.
c EQUIPMENT RENTAL AND MA	5,291.	1,889.	1,647.	1,755.
d VEHICLE EXPENSE	4,548.	1,561.	828.	2,159.
e PRINTING	1,804.	442.	815.	547.
f All other expenses	3,729.	854.	1,190.	1,685.
25 Total functional expenses. Add lines 1 through 24f	2,090,232.	1,677,180.	195,653.	217,399.
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) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	20,539.	1	20,137.
	2 Savings and temporary cash investments	4,183,059.	2	3,022,610.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), 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)		6	
	7 Notes and loans receivable, net		7	1,098.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	5,892.	9	7,099.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	123,674.		
	10b Less: accumulated depreciation	103,333.		
		219,535.	10c	20,341.
	11 Investments - publicly traded securities	17,229,625.	11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	640,446.	15	23,426,494.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	22,299,096.	16	26,497,779.
Liabilities	17 Accounts payable and accrued expenses	66,193.	17	29,608.
	18 Grants payable		18	150,000.
	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		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	527.
	25 Other liabilities. Complete Part X of Schedule D	2,749,388.	25	3,534,336.
	26 Total liabilities. Add lines 17 through 25	2,815,581.	26	3,714,471.
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	8,832,177.	27	7,141,275.
	28 Temporarily restricted net assets	10,651,338.	28	15,642,033.
	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	19,483,515.	33	22,783,308.
	34 Total liabilities and net assets/fund balances	22,299,096.	34	26,497,779.

Form 990 (2010)

Part XI Reconciliation of Net Assets

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

☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,752,537.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,090,232.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,662,305.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19,483,515.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1,637,488.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	22,783,308.

Part XII Financial Statements and Reporting

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

☐

- 1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both.
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

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

Form 990 (2010)

Department of the Treasury
Internal Revenue Service

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 COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

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 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)	<input type="checkbox"/>	<input type="checkbox"/>
11g(ii)	<input type="checkbox"/>	<input type="checkbox"/>
11g(iii)	<input type="checkbox"/>	<input type="checkbox"/>

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

[illegible]

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

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.")	6775823.	6583645.	1420371.	2116079.	1782043.	18677961.
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	6775823.	6583645.	1420371.	2116079.	1782043.	18677961.
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						18677961.

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	6775823.	6583645.	1420371.	2116079.	1782043.	18677961.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	935,721.	895,251.	583,481.	421,742.	450,725.	3286920.
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)	51,058.	24,195.	36,810.	22,557.	245,114.	379,734.
11 Total support. Add lines 7 through 10						22344615.
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 section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	83.59	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	81.41	%
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 ► <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2009. If the organization did not check a 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 ► <input type="checkbox"/>			
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 ► <input type="checkbox"/>			
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 ► <input type="checkbox"/>			
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 ► <input type="checkbox"/>			

Schedule A (Form 990 or 990-EZ) 2010

Part 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.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
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.)						

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						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
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.)						
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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17		%
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 ► ☐

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

2010Open to Public
Inspection

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

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	70	86
2 Aggregate contributions to (during year)	639,627.	1,142,416.
3 Aggregate grants from (during year)	390,945.	862,925.
4 Aggregate value at end of year	2,178,042.	20,601,942.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☒ Yes ☐ No**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

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

- ☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space

- ☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

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

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(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 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

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

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

a ☐ Public exhibition

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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

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

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

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements. Complete if 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:

	Amount
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

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

☐ Yes

☐ No

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

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	0.				
b Contributions	253,565.				
c Net investment earnings, gains, and losses	5,028.				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	258,593.				

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

a Board designated or quasi-endowment ☐ _____ %

b Permanent endowment ☒ 100.00 %

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

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		108,674.	92,183.	16,491.
e Other		15,000.	11,150.	3,850.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				20,341.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		

Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶

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

(a) Description	(b) Book value
(1) INVESTMENTS - PUBLICLY TRADED SECURITIES OVER 5% OF TOTAL	
(2) ASSETS	22,421,932.
(3) OTHER RECEIVABLES	7,912.
(4) LIMITED PARTNERSHIP INTEREST	55,981.
(5) DEFERRED ASSETS CRT & CRAT	936,311.
(6) DEPOSITS	4,358.
(7)	
(8)	
(9)	
(10)	

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

23,426,494.

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

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) AGENCY OBLIGATIONS	3,484,113.
(3) CHARITABLE REMAINDER TRUST	13,456.
(4) OTHER PAYABLES	34,286.
(5) FDN ADMIN FEES PAYABLE	2,481.
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	

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

3,534,336.

FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,752,537.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,090,232.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	1,662,305.
4	Net unrealized gains (losses) on investments	4	1,632,891.
5	Donated services and use of facilities	5	5,947.
6	Investment expenses	6	
7	Prior period adjustments	7	3,598.
8	Other (Describe in Part XIV.)	8	-4,948.
9	Total adjustments (net). Add lines 4 through 8	9	1,637,488.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	3,299,793.

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

1	Total revenue, gains, and other support per audited financial statements	1	5,536,206.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	1,632,891.
b	Donated services and use of facilities	2b	5,947.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	153,675.
e	Add lines 2a through 2d	2e	1,792,513.
3	Subtract line 2e from line 1	3	3,743,693.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	8,844.
c	Add lines 4a and 4b	4c	8,844.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,752,537.

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

1	Total expenses and losses per audited financial statements	1	2,075,544.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	4,948.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	24,174.
e	Add lines 2a through 2d	2e	29,122.
3	Subtract line 2e from line 1	3	2,046,422.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	43,810.
c	Add lines 4a and 4b	4c	43,810.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,090,232.

Part XIV Supplemental Information

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

PART V, LINE 4: TO AID NEVADA ORGANIZATIONS ENGAGED IN THE ASSISTANCE

FOR ABUSED CHILDREN.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

IN-KIND DONATIONS

-4,948.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

NET UNREALIZED GAINS ON INVESTMENT INCLUDED IN SUPPORTING

Part XIV Supplemental Information (continued)

ORG'S BOOK 149,235.

INTEREST INCOME INCLUDED IN SUPPORTING ORGANIZATIONS' FORM

990 40.

CONTRIBUTIONS INCLUDED IN SUPPORTING ORGANIZATIONS' FORM

990 4,400.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 153,675.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

ADMIN FEES INCLUDED IN SUPPORTING ORGANIZATIONS' FORM 990 9,091.

LOSS FROM INVESTMENT IN PARTNERSHIP -247.

TOTAL TO SCHEDULE D, PART XII, LINE 4B 8,844.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

ACCOUNTING FEES INCLUDED IN SUPPORTING ORGANIZATIONS' FORM

990 510.

CONSULTING SERVICE FEES INCLUDED IN SUPPORTING

ORGANIZATIONS' FORM 990 20,290.

OTHER EXPENSES INCLUDED IN SUPPORTING ORGANIZATIONS' FORM

990 3,374.

TOTAL TO SCHEDULE D, PART XIII, LINE 2D 24,174.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

GRANTS NOT INCLUDED IN SUPPORTING ORGANIZATIONS' FORM 990 43,810.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS AND GIRLS CLUB OF LAS VEGAS 2850 SOUTH LINDELL ROAD, P.O. BOX 2 LAS VEGAS, NV 89126	88-0093150	501(C)(3)	13,352.	0.			CHARITABLE GRANT
CHARLES SILVESTRI JUNIOR HIGH SCHOOL - 1055 SILVERADO RANCH BOULEVARD - LAS VEGAS, NV 89183	88-6000030	501(C)(3)	23,758.	0.			CHARITABLE GRANT
CHOC FOUNDATION 455 S MAIN ST. ORANGE, CA 92868-3835	95-6097416	501(C)(3)	40,000.	0.			CHARITABLE GRANT
CITY OF LAS VEGAS 947 W LAKE MEAD BLVD LAS VEGAS, NV 89106	88-6000198	501(C)(3)	6,000.	0.			CHARITABLE GRANT
COUNCIL FOR A PARLIAMENT OF THE WORLD'S RELIGIONS - 70 EAST LAKE STREET, SUITE 205 - CHICAGO, IL 60601	36-3605228	501(C)(3)	5,000.	0.			CHARITABLE GRANT
DOWN SYNDROME ORGANIZATION OF SOUTHERN NEVADA - 5300 VEGAS DRIVE - LAS VEGAS, NV 89108-2347	94-3040560	501(C)(3)	15,500.	0.			CHARITABLE GRANT

2 Enter total number of section 501(c)(3) and government organizations

▶ **39.**

3 Enter total number of other organizations

▶ **0.**

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

Schedule I (Form 990) (2010)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FALLEN HEROES USA FOUNDATION 16155 SIERRA LAKES PKWY, STE 160 FONTANA, CA 92336	27-3776660	501(C)(3)	5,000.	0.			CHARITABLE GRANT
GEORGE WASHINGTON UNIVERSITY 2100 M STREET NW, STE 310 WASHINGTON, DC 20052	53-0196584	501(C)(3)	5,000.	0.			CHARITABLE GRANT
GREATER LAS VEGAS INNER-CITY GAMES 3720 HOWARD HUGHES PKWY STE 240 LAS VEGAS, NV 89169	88-0348811	501(C)(3)	127,512.	0.			CHARITABLE GRANT
HELP OF SOUTHERN NEVADA 1640 EAST FLAMINGO, SUITE 100 LAS VEGAS, NV 89119-5280	88-0108496	501(C)(3)	30,488.	0.			CHARITABLE GRANT
HENDERSON COMMUNITY FOUNDATION 2756 N. GREEN VALLEY PARKWAY, SUITE HENDERSON, NV 89014	45-0489163	501(C)(3)	6,129.	0.			CHARITABLE GRANT
HERITAGE DANCE FOUNDATION INC. 107 SOUTH CENTER STREET GOLDSBORO, NC 27534	58-2001459	501(C)(3)	7,500.	0.			CHARITABLE GRANT
HOMEAID SOUTHERN NEVADA 2970 W. SAHARA AVE. #102 LAS VEGAS, NV 89102	87-0726382	501(C)(3)	5,500.	0.			CHARITABLE GRANT
INTREPID FALLEN HEROES FUND WEST 46TH STREET & 12TH AVENUE NEW YORK, NY 10036	20-0366717	501(C)(3)	5,000.	0.			CHARITABLE GRANT
LAS VEGAS PERFORMING ARTS CENTER FOUNDATION - 241 W. CHARLESTON BLVD., SUITE 111 - LAS VEGAS, NV 89102	88-0361875	501(C)(3)	18,000.	0.			CHARITABLE GRANT

LHA

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEGAL AID CENTER OF SOUTHERN NEVADA - 800 SOUTH EIGHTH STREET - LAS VEGAS, NV 89101-7051	88-0072562	501(C)(3)	109,719.	0.			CHARITABLE GRANT
LIED DISCOVERY CHILDREN'S MUSEUM 833 LAS VEGAS BLVD. NORTH LAS VEGAS, NV 89101	94-2943891	501(C)(3)	30,000.	0.			CHARITABLE GRANT
NEVADA CANCER INSTITUTE ONE BREAKTHROUGH WAY LAS VEGAS, NV 89135	04-3632553	501(C)(3)	5,000.	0.			CHARITABLE GRANT
NEVADA P.E.P., INC. 2101 S JONES BLVD, #120 LAS VEGAS, NV 89146	88-0301113	501(C)(3)	15,000.	0.			CHARITABLE GRANT
NEVADA POPS 8550 W CHARLESTON BLVD, SUITE 102-1 LAS VEGAS, NV 89117	90-0347086	501(C)(3)	5,508.	0.			CHARITABLE GRANT
NEVADA PUBLIC EDUCATION FOUNDATION 9890 S. MARYLAND PARKWAY, SUITE 243 LAS VEGAS, NV 89183	94-3164867	501(C)(3)	105,000.	0.			CHARITABLE GRANT
PARALYZED VETERANS OF AMERICA 801 EIGHTEENTH STREET, NW WASHINGTON, DC 20006-3517	36-6156338	501(C)(3)	10,000.	0.			CHARITABLE GRANT
PUBLIC EDUCATION FOUNDATION 3360 WEST SAHARA AVENUE, SUITE 160 LAS VEGAS, NV 89102	88-0275767	501(C)(3)	165,358.	0.			CHARITABLE GRANT
SPECIAL OLYMPICS NEVADA 5670 WYNN ROAD, SUITE H LAS VEGAS, NV 89118	52-0889518	501(C)(3)	22,414.	0.			CHARITABLE GRANT

LHA

Schedule I (Form 990)

Part III Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPIRIT THERAPIES, INC. 9140 W. LA MADRE WAY LAS VEGAS, NV 89149	51-0436828	501(C)(3)	10,000.	0.			CHARITABLE GRANT
STEP BY STEP FOUNDATION 240 OLD FEDERAL HWY, STE 130 HALLANDALE, FL 33009	20-1711047	501(C)(3)	10,000.	0.			CHARITABLE GRANT
THE MEADOWS SCHOOL 8601 SCHOLAR LANE LAS VEGAS, NV 89128-7302	94-2795420	501(C)(3)	53,500.	0.			CHARITABLE GRANT
THE RAPE CRISIS CENTER 6375 W. CHARLESTON BOULEVARD, #W1B LAS VEGAS, NV 89146	88-0135811	501(C)(3)	123,992.	0.			CHARITABLE GRANT
UNITED WAY OF SOUTHERN NEVADA 1660 E FLAMINGO ROAD LAS VEGAS, NV 89119	88-0071328	501(C)(3)	22,626.	0.			CHARITABLE GRANT
UNIVERSITY OF NEVADA LAS VEGAS 4505 MARYLAND PKWY., P.O. BOX 45003 LAS VEGAS, NV 89154-0030	88-6000024	501(C)(3)	19,100.	0.			CHARITABLE GRANT
UNLV FOUNDATION 4505 MARYLAND PKWY., P.O. BOX 45100 LAS VEGAS, NV 89154-1006	94-2790134	501(C)(3)	13,609.	0.			CHARITABLE GRANT
URANTIA FOUNDATION 533 DIVERSEY PKWY. CHICAGO, IL 60614	36-2435086	501(C)(3)	25,000.	0.			CHARITABLE GRANT
USC ATHLETIC DEPARTMENT HER 203A MC0602 LOS ANGELES, CA 90089-0602	95-1642394	501(C)(3)	10,000.	0.			CHARITABLE GRANT

LHA

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VON TOBEL MIDDLE SCHOOL 2436 N. PECOS ROAD LAS VEGAS, NV 89115	88-6000030	501(C)(3)	5,000.	0.			CHARITABLE GRANT
WORLD FEDERATION OF BALLROOM DANCERS, INC. - 1077 PONCE DE LEON BLVD. - CORAL GABLES, FL 33134	59-2701031	501(C)(3)	10,000.	0.			CHARITABLE GRANT
WOUNDED WARRIOR PROJECT, INC. 7020 AC SKINNER PKWY, STE 100 JACKSONVILLE, FL 32256	20-2370934	501(C)(3)	10,000.	0.			CHARITABLE GRANT
ARIZONA STATE UNIVERSITY PO BOX 870412 TEMPE, AZ 85287	86-0196696	501(C)(3)	5,920.	0.			SCHOLARSHIPS
UNIVERSITY OF NEVADA LAS VEGAS 4505 MARYLAND PARKWAY, P.O. BOX 452 LAS VEGAS, NV 89154-2016	88-6000024	501(C)(3)	13,000.	0.			SCHOLARSHIPS
UNIVERSITY OF NEVADA RENO FOUNDATION - MAILSTOP 332 - RENO, NV 89557	94-2781749	501(C)(3)	21,567.	0.			SCHOLARSHIPS

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information

SCHEDULE I, PART I, LINE 2: FOR GRANTS OF \$10,000 OR MORE, NEVADA COMMUNITY
FOUNDATION GENERALLY DRAWS UP A GRANT AGREEMENT THAT REQUIRES THE CHARITY
TO REPORT ON HOW THE MONIES WERE SPENT AND THE IMPACT OF THE GRANT.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

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

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

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

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

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

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

a Receive a severance payment or change-of-control payment from the organization or a related organization?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

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

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

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

a The organization?

b Any related organization?

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

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

a The organization?

b Any related organization?

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

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

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

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

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2010

Part III 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 GIAN BROSCO	(i)	157,700.	10,000.	22,235.	0.	0.	189,935.	167,252.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
► **Attach to Form 990.**

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	4	395,074.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

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

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

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

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

b If "Yes," describe in Part II.

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

Yes No

30a		X
31		X
32a		X

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

Schedule M (Form 990) (2010)

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 990-EZ 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 COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ADMINISTERED AND DISBURSED THROUGH GRANTS EXCLUSIVELY FOR CHARITABLE
PURPOSES PRIMARILY IN NEVADA OR FOR THE BENEFIT OF RESIDENTS OF NEVADA;
TO MATCH DONORS' PHILANTHROPIC INTERESTS WITH THE MYRIAD NEEDS OF THE
COMMUNITY.

FORM 990, PART VI, SECTION A, LINE 4: THE COMMUNITY FOUNDATION'S BY-LAWS
WERE AMENDED 2/8/2011, COPY ATTACHED.

FORM 990, PART VI, SECTION B, LINE 11: ORGANIZATION'S PROCESS TO REVIEW
FORM 990 - FORM 990 IS LISTED AS A SEPARATE ITEM ON THE BOARD AGENDA. A
COPY OF FORM 990 IS GIVEN EITHER IN PAPER FORM OR ELECTRONICALLY BEFORE THE
BOARD MEETING. A STAFF MEMBER PROVIDES A BRIEF OVERVIEW AND WILL GIVE A
PAGE BY PAGE REVIEW OF FORM 990 IF REQUESTED BY THE BOARD.

FORM 990, PART VI, SECTION B, LINE 15A: 15A) COMPENSATION PROCESS FOR TOP
OFFICIAL - THE BOARD WILL HIRE AN INDEPENDENT CONTRACTOR TO COORDINATE AND
FACILITATE THE EXECUTIVE SEARCH PROCESS AND HELP DEVELOP THE COMPENSATION
PACKAGE. AS PART OF THIS CONTRACT, THE CONSULTANT WILL RESEARCH AND REVIEW
NATIONAL AND LOCAL INDUSTRY STANDARDS FOR PRESIDENTS/CEOS OF COMPARABLE
SIZE ORGANIZATION. SPECIFIC ATTENTION WILL BE PLACED ON COMMUNITY
FOUNDATIONS OF COMPARABLE SIZE AND SOUTHERN NEVADA NONPROFITS OF COMPARABLE
SIZE. THE FINDINGS OF THE CONSULTANT ARE PRESENTED TO THE EXECUTIVE SEARCH
COMMITTEE AND THAT COMMITTEE WILL PROVIDE A RECOMMENDATION TO THE BOARD.
THE BOARD WILL DISCUSS AND DELIBERATE THE ENTIRE COMPENSATION PACKAGE
INCLUDING BASE SALARY, PERFORMANCE INCENTIVES AND BENEFITS.

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

15B) THE COMPENSATION FOR OTHER EMPLOYEES IS COMPARED TO AVAILABLE DATA ON COMPENSATION FOR OTHER SIMILAR ORGANIZATIONS OF SIMILAR SIZE. THE PRESIDENT WITH ADVICE FROM THE BOARD OF DIRECTORS IS RESPONSIBLE FOR SETTING THE COMPENSATION PACKAGE FOR ALL OTHER EMPLOYEES.

FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FORM 990 AND FINANCIAL STATEMENTS ARE AVAILABLE FOR INSPECTION AT THE OFFICE OF THE COMMUNITY FOUNDATION. COPIES OF THESE DOCUMENTS ARE AVAILABLE ON REQUEST. THE FINANCIAL STATEMENTS AND FORM 990 ARE POSTED ON THE NEVADA COMMUNITY FOUNDATION WEBSITE, WWW.NEVADACF.ORG.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS:	1,632,891.
DONATED SERVICES AND USE OF FACILITIES:	5,947.
PRIOR PERIOD ADJUSTMENTS:	3,598.
IN-KIND DONATIONS	-4,948.
TOTAL TO FORM 990, PART XI, LINE 5	1,637,488.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number
88-0241420

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
BADGER FAMILY FOUNDATION - 20-7097904 1635 VILLAGE CENTER CIRCLE, STE 160 LAS VEGAS, NV 89135	SUPPORTING EDUCATION & MEDICAL RESEARCH FOR YOUTH	NEVADA	501(C)(3)	LINE 11A, I	NEVADA COMMUNITY FOUNDATION		X
RITTER CHARITABLE TRUST - 04-6971851 3455 CLIFF SHADOWS PARKWAY, SUITE 220 LAS VEGAS, NV 89129	TO IMPROVE QUALITY OF LIFE FOR WOMEN & CHILDREN	NEVADA	501(C)(3)	LINE 11A, I	NEVADA COMMUNITY FOUNDATION		X
SCHETTLER FAMILY FOUNDATION - 25-6884543 3455 CLIFF SHADOWS PARKWAY, SUITE 220 LAS VEGAS, NV 89129	SUPPORT SERVICES TO CHILDREN WITH CANCER	NEVADA	501(C)(3)	LINE 11A, I	NEVADA COMMUNITY FOUNDATION		X

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

Schedule R (Form 990) 2010

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

[illegible]

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

[illegible]

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to other organization(s)**c** Gift, grant, or capital contribution from other organization(s)**d** Loans or loan guarantees to or for other organization(s)**e** Loans or loan guarantees by other organization(s)**f** Sale of assets to other organization(s)**g** Purchase of assets from other organization(s)**h** Exchange of assets**i** Lease of facilities, equipment, or other assets to other organization(s)**j** Lease of facilities, equipment, or other assets from other organization(s)**k** Performance of services or membership or fundraising solicitations for other organization(s)**l** Performance of services or membership or fundraising solicitations by other organization(s)**m** Sharing of facilities, equipment, mailing lists, or other assets**n** Sharing of paid employees**o** Reimbursement paid to other organization for expenses**p** Reimbursement paid by other organization for expenses**q** Other transfer of cash or property to other organization(s)**r** Other transfer of cash or property from other organization(s)

	Yes	No
1a		X
1b		X
1c	X	
1d		X
1e		X
1f		X
1g		X
1h		X
1i		X
1j		X
1k	X	
1l		X
1m		X
1n		X
1o		X
1p		X
1q		X
1r		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) BADGER FAMILY FOUNDATION	K	88.	
(2) RITTER CHARITABLE TRUST	C	23,999.	
(3) SCHETTLER FAMILY FOUNDATION	K	4.	
(4)			
(5)			
(6)			

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII	Supplemental Information
-----------------	---------------------------------

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

[illegible]

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

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

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

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

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

Part I only

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

Type or print	Name of exempt organization	Employer identification number
	NEVADA COMMUNITY FOUNDATION, INC.	88-0241420
	Number, street, and room or suite no. If a P.O. box, see instructions. 1635 VILLAGE CENTER CIRCLE, NO. 160	
File by the due date for filing your return. See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions LAS VEGAS, NV 89134	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

NEVADA COMMUNITY FOUNDATION

- The books are in the care of ► 1635 VILLAGE CENTER CIRCLE #160 - LAS VEGAS, NV 89134
Telephone No. ► 702-892-2326 FAX No. ► 702-892-8580

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2012**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year _____ or
- ☒ tax year beginning **JUL 1, 2010**, and ending **JUN 30, 2011**

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
- ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$	0.

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

LHA For Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 1-2011)

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II		Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)	
Type or print File by the extended due date for filing your return. See instructions	Name of exempt organization		Employer identification number
	NEVADA COMMUNITY FOUNDATION, INC.		88-0241420
	Number, street, and room or suite no. If a P.O. box, see instructions. 1635 VILLAGE CENTER CIRCLE, NO. 160		
City, town or post office, state, and ZIP code For a foreign address, see instructions LAS VEGAS, NV 89134			

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

NEVADA COMMUNITY FOUNDATION

• The books are in the care of **1635 VILLAGE CENTER CIRCLE #160 - LAS VEGAS, NV 89134**
Telephone No. **702-892-2326** FAX No. **702-892-8580**

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

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

4 I request an additional 3-month extension of time until **MAY 15, 2012**

5 For calendar year _____, or other tax year beginning **JUL 1, 2010**, and ending **JUN 30, 2011**

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature

Title

Date

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	
Type or print File by the extended due date for filing your return See instructions	Name of exempt organization	Employer identification number
	NEVADA COMMUNITY FOUNDATION, INC.	88-0241420
	Number, street, and room or suite no. If a P.O. box, see instructions. 1635 VILLAGE CENTER CIRCLE, NO. 160	
	City, town or post office, state, and ZIP code For a foreign address, see instructions. LAS VEGAS, NV 89134	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

NEVADA COMMUNITY FOUNDATION

- The books are in the care of **1635 VILLAGE CENTER CIRCLE #160 - LAS VEGAS, NV 89134**
Telephone No. **702-892-2326** FAX No. **702-892-8580**
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **MAY 15, 2012**

5 For calendar year _____, or other tax year beginning **JUL 1, 2010**, and ending **JUN 30, 2011**

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title Date

THE BYLAWS OF THE NEVADA COMMUNITY FOUNDATION

Article I - Name

The name of this organization shall be the Nevada Community Foundation, Inc., hereinafter known as the Community Foundation.

Article II - Purpose

The Purpose of the Community Foundation is to receive and accept property to be administered for charitable purposes primarily, but not exclusively, in or for the benefit of Nevadans including:

- a. To administer for charitable purposes all property donated to and accepted by the Community Foundation;
- b. To distribute property for such purposes in accordance with the terms of gifts, bequests or devises made to the Community Foundation which are not inconsistent with the Bylaws and Articles of Incorporation of the Community Foundation Inc.;
- c. To distribute property to qualified charitable organizations or for charitable purposes;
- d. To promote and to solicit gifts to the Community Foundation; and
- e. To modify any restriction or condition on the distribution of funds for any specified charitable purposes or to specified organizations if in the sole judgment of the Board of Directors (without the necessity of the approval of any director, custodian, or agent), such restriction or condition becomes, in effect, unnecessary, incapable of fulfillment, or inconsistent with the charitable needs of Nevada.

Article III - Geographic Area

The Community Foundation shall do business in southern Nevada. To the extent necessary, the Community Foundation may conduct activities throughout or outside of the State of Nevada to the extent necessary to achieve its Purpose.

Article IV - Board of Directors

Section 1. Composition. The membership of the Community Foundation shall consist of a Board of Directors of not less than nine (9) individuals or more than twenty five (25) individuals. They shall be residents of Nevada who embrace the beliefs and principles of the Community Foundation

Section 2. Election and Term of Office. The term of office of directors shall be for four (4) years or until their successors are duly elected. No director shall serve more than three (3) consecutive terms.

Section 3. Vacancies. Any vacancy occurring in the board membership may be filled for the unexpired term by the Board of Directors upon recommendation of the chairperson and/or other member of the Executive Committee and approved by the Board of Directors at the next regular meeting of the board.

Section 4. Functions and Responsibilities.

a. The business and affairs of the Community Foundation shall be managed and controlled by its Board of Directors. Subject to the laws of the State of Nevada and the Articles of Incorporation and Bylaws of the Community Foundation, the Board of Directors shall do and perform every act and thing whatsoever which it shall deem necessary, expedient or advisable to carry out the purposes of the Community Foundation. These powers shall include but not be limited to:

1. The authorization of an annual audit of the Community Foundation's financial operations by a firm of Certified Public Accountants.
2. The formulation or revision of measures to safeguard all assets entrusted to the Community Foundation.
3. The administration and control of endowment funds, investments, securities, properties, and real estate, including the authorization to buy, sell, or alter any such holdings in accordance with the instructions, if any, by the donor.
4. The enactment into agreements with a qualified financial institution to act as trustee or agent for administering trust agreements.

b. The Board of Directors shall adopt policies and procedures governing the conduct of the affairs of the Community Foundation.

c. The Board of Directors may create such committees as deemed necessary to carry out the functions of the Community Foundation and shall monitor the functions of all committees. At a minimum, there shall be an Executive Committee, Investment Committee, and Audit Committee.

Section 5. Removal of Officers. The Board of Directors, by resolution adopted by a majority of the directors in office, may remove at any time, with or without cause, a director.

Article V - Officers

Section 1. Officers. The officers of the Community Foundation shall include a chairperson, a vice-chairperson, a secretary, and a treasurer.

Section 2. Election and Term. The officers shall be elected for a term of two (2) years or until their successors are duly elected. The election shall be conducted at the first regular meeting of the Board of Directors following the election of new directors. No officer shall serve more than two (2) consecutive terms without approval from a majority of directors. Any vacancy occurring among the officers shall be filled for an unexpired term by a special election to be conducted at the next meeting of the Board of Directors.

Section 3. Duties of Officers.

a. The chairperson shall preside at all meetings of the Community Foundation; shall be the chairperson of the Executive Committee; shall appoint the chairs of all standing and special committees; shall be ex-officio member of all committees; and shall be signatory to all contracts and similar documents enacted by the Community Foundation. The chairperson must have served at least one (1) prior year as an officer of the Community Foundation or as a standing committee chairperson or as a member in good standing for two (2) or more years.

b. The vice-chairperson shall preside at meetings in the absence of the chairperson and perform other duties as assigned by the directors.

c. The secretary shall record or cause to be recorded the minutes of all meetings of the directors and shall be a signatory to documents requiring verification by a secretary.

d. The treasurer shall also compile or cause to be compiled periodic financial records necessary to meet the stewardship and business needs of the Community Foundation.

Article VI - Meetings

Section 1. Regular Meetings There shall be regular meetings of the Board of Directors at least four (4) times each year at dates and times selected by the chairperson.

Section 2. Annual Meeting. One meeting shall be designated as the Annual Meeting and shall be the meeting at which the officers are elected.

Section 3. Special Meetings. A special meeting may be held at any time to conduct such business as set forth in the notice of a special meeting. Special meetings may be called by the chairperson or upon written request of three (3) members of the board.

Section 4. Notices. Written or verbal notice of the meeting of the Board of Directors shall be given by, or at the direction of, the chairperson to each member of the board not less than five (5) days prior to the date of such meeting. A director may request in writing to only receive notices and minutes, rather than the board packet.

Section 5. Quorum. At no time shall the quorum be less than five (5) members. When the total membership of the board is at least ten (10), but is less than fifteen (15), the quorum shall be five (5) members. When the total membership is at least fifteen (15), but less than twenty one (21), the quorum shall be seven (7) members. When the total membership exceeds twenty (20), the quorum shall be nine (9) members.

Section 6. Voting. Each director shall have one (1) vote to cast for each question put before the membership for vote. Unless otherwise directed by the Board of Directors, votes by proxy or by mail will not be counted. Persons representing a board member may not vote.

Section 7. Action by Majority Written Consent. Any action which may be taken at a meeting of the Board of Directors may be taken without a meeting if a consent in writing (including electronic communications), setting forth the action so taken, shall be signed (electronically or otherwise) by a majority of directors of the Community Foundation.

Section 8. Action by the Executive Committee. Any action which may be taken at a meeting of the Board of Directors may be taken without a meeting if a consent in writing or in such other medium as approved by the Board of Directors. Such consent shall set forth the action so taken, shall be signed or otherwise consented to by all members of the Executive Committee of the Community Foundation.

Article VII - Committees

Section 1. Standing Committees. The standing committees of the board shall be the Executive Committee, Investment Committee, and Audit Committee. Executive Committee members shall serve two (2) year terms and all other committee members shall serve one (1) year terms.

Section 2. Executive Committee.

a. Composition: The Executive Committee shall consist of the officers of the Community Foundation and the immediate past chairperson.

b. Duties: The Executive Committee shall have and may exercise the powers of the board in the interim between board meetings. The Executive Committee shall annually review the performance of the President and shall cause the annual report to be presented to the board.

Section 3. Investment Committee.

a. Composition: The committee shall consist of not less than three members who shall be nominated by the chairperson. One such member shall be the treasurer.

b. Duties: The Committee shall recommend actions to the Board of Directors regarding the proper safeguarding and investment of the assets of the Community Foundation. It shall review the Investment Policy, portfolio and investment manager performance, and report investment results to the Board of Directors.

Section 4. Audit Committee.

- a. Composition: The committee shall consist of not less than three members who shall be nominated by the chairperson.
- b. Duties: The Committee shall recommend actions to the Board of Directors regarding engaging independent auditors to review financial data annually, engaging accounting professionals to review internal controls, and establishing and implementing policies that assist the Community Foundation in adhering to the highest of ethical standards. The Committee shall also provide oversight of all of the Community Foundation's financial matters.

Section 6. Other Committees. Such other committees, standing or special, shall be appointed by the chairperson as the Board of Directors shall from time to time deem necessary to carry on the work of the Community Foundation. The chairperson and President shall be ex-officio members of such committees.

Section 7. Quorum. A majority of the members of a committee shall constitute a quorum and any transaction of a committee shall require a majority vote of the quorum present at any meeting. Each member of a committee, including the person presiding at the meeting, excluding the President, shall be entitled to one vote.

Section 8. Removal of Members. The Board of Directors, by resolution adopted by a majority of the directors in office, may remove at any time, with or without cause, a member or members of any committee.

Section 9. Meetings. Members of committees shall meet at the call of the chairperson at such place as the chairperson shall designate after reasonable notice has been given to each committee members. Each committee shall keep minutes of its proceedings and make a written report to the Board of Directors of its action within a reasonable time subsequent to the meeting.

Article VIII - President and Other Employees

The Executive Committee of the Community Foundation shall at least annually review the performance of the President and communicate the results of this review to the Board of Directors. The President is not an officer of the Community Foundation. The President shall be an assistant secretary and assistant treasurer of the Community Foundation, shall be an ex-officio member of all committees, shall advise the directors on all aspects of and developments relating to the Community Foundation's objectives, and shall supervise other staff working on Community Foundation activities. The President shall perform such other duties as from time to time may be prescribed by the chairperson.

Article IX - Contracts and Banking

Section 1. Contracts. The Board of Directors may authorize any officer or officers, agent or agents, to enter into any contract or execute or deliver any instrument in the name of and on behalf of the Community Foundation, and such authority may be general or confined to specific instances. The President may, at the Board's discretion and upon receiving written Board approval, have signing authority on all contracts and other binding documents with a total obligation of less than \$10,000. All such contracts and other binding agreements shall be reported to the Board of Directors in the President's report at the next Board of Directors' meeting.

Section 2. Deposits. All funds of the Community Foundation not otherwise employed shall be deposited from time to time to the credit of the Community Foundation in such banks, trust companies or other depositories as the Board of Directors may select.

Section 3. Checks. All checks, drafts or other orders for the payment of money, notes or other evidences of indebtedness issued in the name of the Community Foundation shall be signed by such officer, officers, or President of the Community Foundation, and in such manner shall from time to time be determined by resolution of the Board of Directors. The President may, at the board's discretion and upon receiving written board approval, have authority for checking transactions up to \$25,000 . The chairperson, vice-chairperson, secretary and treasurer all have individual authority for checking transactions up to \$25,000 . A dual signature, including either the chairperson, vice-chairperson, secretary and/or treasurer, is required for transactions above \$25,000 .

Section 4. Loans. No loan shall be made by or to the Community Foundation and no evidences of indebtedness shall be issued in its name, unless authorized by a resolution of the Board of Directors. Such authority may be general or confined to specific instances; provided, however, no loans shall be made by the Community Foundation to its directors, officers, or employees.

Article X - Gifts

As needed, the Community Foundation shall establish a gift acceptance policy that donors must agree to in order to have their gift accepted by the Community Foundation.

Article XI - Distributions and Disbursements

Section 1. Determination of Distributions in General. The Board of Directors, or any special distribution committee, not less frequently than annually, shall determine the nature and amount of distributions to be made: (i) for charitable, educational or scientific purposes; and (ii) administrative expenses. The Board of Directors, or any special distribution committee, not less frequently than annually, may direct distributions to such persons, organizations, governments or governmental agencies as in the opinion of the Board of Directors or the special distribution committee can best carry out such purposes or help create new qualified charitable, educational and scientific organizations to carry out such purposes.

Section 2. Voting Requirements. All determinations shall be by the affirmative vote of a majority of the Board of Directors or any special distribution committee, unless otherwise expressly provided in these Bylaws or by a donor's restriction or condition at the time of the gift.

Section 3. Distribution of Capital. Determinations may be made to distribute capital from funds given without restrictions as to principal or income as well as pursuant to provisions expressly permitting use of principal.

Section 4. Research. The Board of Directors may conduct research and/or create partnerships with appropriate organizations to help assist the Community Foundation in making effective distributions to help meet the ongoing needs of southern Nevadans.

Article XII - Dissolution

In the event of the liquidation or dissolution of the Community Foundation, whether voluntary or involuntary, the net proceeds of the corporation, after payment of all debts and obligations, shall be distributed in compliance with Section 501(c)(3) of the Internal Revenue Code of 1986 as amended from time to time.

Article XIII - Parliamentary Authority

The rules contained in the current edition of Robert's Rules of Order Newly Revised shall govern the Community Foundation in all cases to which they are applicable and in which they are not inconsistent with these Bylaws and any special rules of order that may be adopted.

Article XIV - Amendments

The Bylaws of the Community Foundation may be altered, amended, or repealed by the following methods by the vote of a majority of the directors at any meeting of the Board of Directors.

Dated this 8th day of February, 2011.

Chris Wilcox, Secretary