

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



	·aan_PF		eturn of Privat				OMB NO 1545-0052
	partment of the Treasury ernal Revenue Service	or Secondation may	ction 4947(a)(1) None: Treated as a Priva be able to use a copy of	ate Foundati	on		2011
Fc	or calendar year 2011	or tax year beginning			, and ending		, 20
١	Name of foundation				•	A Employer identific	cation number
•	THE RUVO FAMILY	Y FOUNDATION				73-168810	2
1	Number and street (or P C	box number if mail is not delive	ered to street address)		Room/suite	B Telephone number	er (see instructions)
						(70	2) 221-7886
;	8400 S JONES BI	LVD					
(City or town, state, and Z	IP code	****			-	
						C If exemption applica pending, check here	tion is
	LAS VEGAS, NV	89139				pending, check nere	
_	Check all that apply	Initial return	Initial return of	of a former r	oublic charity	D 1 Foreign organizat	near shock hara
_	orioon an marappiy	Final return	Amended ret	•		2. Foreign organizat	
		Address change	Name change			85% test, check h	ere and attach
ш	Check type of organiz	zation X Section 501				computation .	
'n	— ·· ·	nonexempt charitable trust	Other taxable pri		tion	E If private foundation	►
<u> </u>	Fair market value of a		ounting method Ca)(1)(A), check here
•	of year (from Part II, c		other (specify)		J. G G1		in a 60-month termination (1)(B), check here
		975,165. (<i>Part I,</i>	column (d) must be on	cash basis		- 30.00.300.00.00	7.7.— N 4.1041. 110.4
•			1	00017 0001017	Γ.		(d) Disbursements
u		venue and Expenses (The columns (b), (c), and (d)	(a) Revenue and	(b) Net inve	•	(c) Adjusted net	for charitable
	may not necessari	lly equal the amounts in	expenses per books	incon	ne	ıncome	purposes (cash basis only)
_	column (a) (see ins	structions))					(cash basis only)
	if +b.	ts, etc., received (attach schedule) . e foundation is not required to					
2		ch Sch B					
	3 Interest on savings ar	nd temporary cash investments	13,972.		3,972.		AMCII 1
<u> </u>	4 Dividends and inte	rest from securities	13,972.		3,912.	· · · · · · · · · · · · · · · · · · ·	ATCH 1
'	5 a Gross rents						
	b Net rental income or ((loss)	57C 004				
e		m sale of assets not on line 10	576,224.	wr-a			
eune	b Gross sales price for a assets on line 6a				6 224		
é	7 Capital gain net in	come (from Part IV, line 2) .		5 /	6,224.		
_		oital gain				200	
		ons · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		300.	
	10 a Gross sales less return and allowances						
	b Less Cost of goods so	old					
	c Gross profit or (los	s) (attach schedule)					
		ach schedule)					
		through 11	590,196.		0,196.	300.	
	13 Compensation of office	cers, directors, trustees, etc	0			· · · · · · · · · · · · · · · · · · ·	
		alaries and wages					
Expenses	15 Pension plans, em	ployee-benefits;					
ĕ	16a Legatrees (atlach)	schedule)					
X	b Accounting lees (attach-schedule ATCH 2	2,000.				2,000.
	1 1 5	fees (attach schedule)					
ā	17 Cinterest OV . 1 9	2012					
ST	18 Taxes (attach schedu						
Ξ	19 Depreçiation (atta	ch schedule) and depletion					
Administrative	20 Occupancy	ch sehlequile) and depletion.					
⋖	21 Travel, conference	es, and meetings					
ä		cations				•	
ğ	23 Other expenses (a	ittach schedule) ATCH 3	43.		1		25.
ま	24 Total operating a	nd administrative expenses					
perating	Add lines 13 throu	igh 23	2,043.				2,025.
n		s, grants paid	611,167.				611,167.
	1	bursements Add lines 24 and 25	612 210		0		
_	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Zand . Too miles 27 and 25					

For Paperwork Reduction Act Notice, see instructions.

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a Excess of revenue over expenses and disbursements . .

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-). .

Subtract line 26 from line 12

-23,014.

300. Form **990-PF** (2011

6467

590,196.

П	art II	Attached schedules and amounts in the	Beginning of year	End	of year
	art II	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash - non-interest-bearing	146,918.		
	2	Savings and temporary cash investments	829,967.	1,229,324	1,229,324
	3	Accounts receivable			
-		Less allowance for doubtful accounts ▶	·		
- 1	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
ł	5	Grants receivable	1		
ı	6	Receivables due from officers, directors, trustees, and other	1		
-	•	disqualified persons (attach schedule) (see instructions)			
1	7	Other notes and loans receivable (attach schedule)			
	•	Less allowance for doubtful accounts			
					<u> </u>
Assets	8	Inventories for sale or use	1		
SS	9	Prepaid expenses and deferred charges			
4		Investments - U S and state government obligations (attach schedule).		 	
Ì		Investments - corporate stock (attach schedule)			
	11 °	Investments - corporate bonds (attach schedule) Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13 14	Investments - mortgage loans Investments - other (attach schedule) Land, buildings, and equipment basis ATCH 4		1,101,260	745,841
		equipment basis Less accumulated depreciation (attach schedule)			
١	15	Other assets (describe >)			<u> </u>
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	2,353,298.	2,330,584	. 1,975,165
	17	Accounts payable and accrued expenses			
	18	Grants payable	I I		
S	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			

	23	Total liabilities (add lines 17 through 22)	0		<u>o</u>
2		Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31.			
č	24	Unrestricted			\dashv
ja	25	Temporarily restricted			-
8	26	Permanently restricted			_
Assets or Fund Balances		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ► X			
0	27	Capital stock, trust principal, or current funds			_
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0 252 200	2 220 504	4
SS	29	Retained earnings, accumulated income, endowment, or other funds $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	2,353,298.	2,330,584	1
ž	30	Total net assets or fund balances (see instructions)	2,353,298.	2,330,584	<u>-</u>
ž	30 31	Total liabilities and net assets/fund balances (see		0 220 504	
		instructions)	2,353,298.	2,330,584	<u>• </u>
		Analysis of Changes in Net Assets or Fund			
1		I net assets or fund balances at beginning of year - Part			
		of-year figure reported on prior year's return)			2,353,298
2	Ente	er amount from Part I, line 27a		2	-23,014
3	Othe	er amount from Part I, line 27a	IMENT 5	3	300
		lines 1, 2, and 3			2,330,584
_	D			1 2	
6	Tota	reases not included in line 2 (itemize) ► il net assets or fund balances at end of year (line 4 minus	line 5) - Part II. column (b)	line 30 6	2,330,584

Page 3

	d describe the kind(s) of property sold (rick warehouse, or common stock, 200	-	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
la SEE PART IV SCHE	DULE				
<u>b</u>					
<u>c</u>	· · · · · · · · · · · · · · · · · · ·				
<u>d</u>		· · · · · · · · · · · · · · · · · · ·	 		
e	10.0	(a) Cost or other book	-	(1) 0 (1-	>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
a			-		
b			-		
<u>c</u>			 		
d			 		
<u>e</u>		11. 11. 12. 12. 12. 12. 12. 12. 12. 12.	-		
Complete only for assets	showing gain in column (h) and owne			Gains (Col. (h) g (k), but not less t	
(ı) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Losses (from co	
a			 		
b			 		
С			ļ		
d					
е		<u> </u>	ļ		
2 Capital gain net income or		gain, also enter in Part I, line 7	2		576,224.
Not about town applied agin	•	(loss), enter -0- in Part I, line 7	-		370,224.
	i or (loss) as defined in sections 12 t I, Iine 8, column (c) (see inst				
•	• • •		,		0
	<u> </u>		1 3 1		U
For optional use by domestic	Jnder Section 4940(e) for Recognition of the private foundations subject to the	duced Tax on Net Investment I e section 4940(a) tax on net invest		ome)	
For optional use by domestic f section 4940(d)(2) applies, Was the foundation liable for	Under Section 4940(e) for Recognitive private foundations subject to the leave this part blank. the section 4942 tax on the distributions are considered as a section 4942 tax.	duced Tax on Net Investment I e section 4940(a) tax on net invest outable amount of any year in the b	ment inco	_	Yes X N
For optional use by domestic if section 4940(d)(2) applies, Was the foundation liable for f "Yes," the foundation does	Under Section 4940(e) for Recommendations subject to the leave this part blank. the section 4942 tax on the distribution qualify under section 4940(e)	duced Tax on Net Investment I e section 4940(a) tax on net invest outable amount of any year in the b Do not complete this part	ment inco	od?	Yes X No
For optional use by domestic if section 4940(d)(2) applies, Was the foundation liable for f "Yes," the foundation does	Inder Section 4940(e) for Recommendations subject to the leave this part blank. the section 4942 tax on the distribution of qualify under section 4940(e) bount in each column for each year	e section 4940(a) tax on net invest outable amount of any year in the bound to complete this part see the instructions before makin	ment inco	nes (d)	
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(For optional use by domestic (For optional use by domestic) of section 4940(d)(2) applies, was the foundation liable for for Yes," the foundation does 1 Enter the appropriate ame (a) Base penod years Calendar year (or tax year beginning in) 2010 2009 2008 2007 2006 2 Total of line 1, column (d) 3 Average distribution ration number of years the foundation of years the foundation of t	Inder Section 4940(e) for Recomplete private foundations subject to the private foundations subject to the leave this part blank. It is section 4942 tax on the distributed qualify under section 4940(e) bount in each column for each year (b) Adjusted qualifying distributions 2,380,579. 226,309. 221,004. 498,917. 1,011,658. In for the 5-year base period - divided dation has been in existence if less incharitable-use assets for 2011 from the income (1% of Part I, line 27b).	duced Tax on Net Investment I e section 4940(a) tax on net invest butable amount of any year in the butable	g any ent	nes (d) Distribution n (col (b) divided by	0.818523 0.079082 0.097201 0.226114 0.483263 1.704183 0.340837 264,999.
(For optional use by domestic (For optional use by domestic) if section 4940(d)(2) applies, was the foundation liable for if "Yes," the foundation does 1 Enter the appropriate amplementary (a) Base period years Calendar year (or tax year beginning in) 2010 2009 2008 2007 2006 2 Total of line 1, column (d) 3 Average distribution ration number of years the foundation of the period of t	Inder Section 4940(e) for Recommendations subject to the private foundations subject to the leave this part blank. The section 4942 tax on the distribution of qualify under section 4940(e) ount in each column for each year (b) Adjusted qualifying distributions 2,380,579. 226,309. 221,004. 498,917. 1,011,658. For the 5-year base period - divided dation has been in existence if less incharitable-use assets for 2011 from the income (1% of Part I, line 27b).	duced Tax on Net Investment I e section 4940(a) tax on net invest butable amount of any year in the butable	g any ent	nes (d) Distribution n (col (b) divided by	atio (c)) 0.818523 0.079082 0.097201 0.226114 0.483263 1.704183 0.340837 264,999. 771,995. 5,902.

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions	<u>)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter 02/04/2004 (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		11,8	304.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
3	Add lines 1 and 2		11,8	304.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income Subtract line 4 from line 3 if zero or less, enter -0-		11,8	304.
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 82.			
	Exempt foreign organizations - tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868) 6c 58.			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		1	40.
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		11,6	64.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			
	instructions for definition)?	1 b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities		,	
С	Did the foundation file Form 1120-POL for this year?	1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$(2) On foundation managers \blacktriangleright \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		ĺ	
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			ł
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	<u> </u>
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)	:		
	NV,	:		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	Х	<u> </u>
9	ls the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses	10		<u> </u>
	<u>-</u>	~~		

THE RUVO FAMILY FOUNDATION

_	rt VII-A Statements Regarding Activities (continued)		'	age o
_				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			Х
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		^
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			.,
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A			
14	The books are in care of ▶ PIERCY BOWLER TAYLOR & KERN Telephone no ▶ 702-384	-112	20	
	Located at ▶6100 ELTON AVENUE, STE. 1000 LAS VEGAS, NV ZIP+4 ▶ 89107			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	. []
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of		·	
	the foreign country			
Par	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 9	During the year did the foundation (either directly or indirectly)			
ıa				
	(1) angular mana ana an anananga, an anananga ar pagaman pagaman pagaman (1) (1) (1) (1)			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified personnel.			
	(c) v annual goods, on vacanta is (or acceptance posterior 1.1.1.1.			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days) Yes X No			
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2011?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
•	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2 b		х
_	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
C		ŀ		
	District of the second			
3 a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
	at any anima defining and years 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	İ		
t	of f "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2011)	3b		
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		<u> </u>

Par	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requi	red (continued)		
5a	During the year did the foundation pay or incur any amou	nt to				
	(1) Carry on propaganda, or otherwise attempt to influen	ice legislation (section	4945(e))?	Yes X No	.	
	(2) Influence the outcome of any specific public elec	=				
	directly or indirectly, any voter registration drive?	•	•		.	İ
	(3) Provide a grant to an individual for travel, study, or oth					
	(4) Provide a grant to an organization other than a	• •		. — - — -		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	· · · · · · · · · · · · · · · · · · ·				
	(5) Provide for any purpose other than religious, ch					
	purposes, or for the prevention of cruelty to children o		=		.	
_	If any answer is "Yes" to 5a(1)-(5), did any of the					1
D	Regulations section 53 4945 or in a current notice regard		•	•	' _{5b}	
		-			30	
	Organizations relying on a current notice regarding disast			· · · · · · · · · · · · · · · · · · ·		
С	If the answer is "Yes" to question 5a(4), does the f		•			
	because it maintained expenditure responsibility for the gr			. Yes X No	' i l	
_	If "Yes," attach the statement required by Regulations sect					
6 a	Did the foundation, during the year, receive any fund	•	• • • •			
	on a personal benefit contract?				1 1	x
D	Did the foundation, during the year, pay premiums, direct	tly or indirectly, on a p	personal benefit contrac	^{t7}	· · 6b	<u> </u>
	If "Yes" to 6b, file Form 8870					
	At any time during the tax year, was the foundation a pa					v
	If "Yes," did the foundation receive any proceeds or have yill Information About Officers, Directors				7b	X
Par	and Contractors				уссэ,	
1	List all officers, directors, trustees, foundation n					
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	(e) Expense other allo	
		devoted to position	-0-)	and deferred compensation		
יים א	FACHMENT 6		0	d		0
AI	IACHMENI 0					
				. —		
				. —		
2	Compensation of five highest-paid employees	(other than thos	e included on line	e 1 - see instruction	ons). If no	ne. enter
_	"NONE."	(5000) 0000			,	
,	Name and address of each ample and the BCC CCC	(b) Title, and average	(a) Composition	(d) Contributions to employee benefit	(e) Expens	e account,
(a	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other all	owances
				our portodion		
	NONE					

Tota	I number of other employees paid over \$50,000 .					<u>-</u>
. 516	THE HELD OF GRADE CHIPTO JOSE PAIN OF OF WOOL OF OF	<u> </u>		· · · · · · · · · · · · · · · · · · ·		0-PF (2011)

73-1688102 THE RUVO FAMILY FOUNDATION Form 990-PF (2011) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE

Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1_N/A	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments. See instructions	

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0

3 NONE

Total. Add lines 1 through 3.

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn founda	tions,
Ī	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	781,867.
b	Average of monthly cash balances	1b	1,517,624.
С		1c	
d	Total (add lines 1a, b, and c)	1d	2,299,491.
е	Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Cultivated has Coferent has Add	3	2,299,491.
ţ	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
		4	34,492.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,264,999.
3	Minimum investment return. Enter 5% of line 5	6	113,250.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this j	part)	
$\overline{}$	Minimum investment return from Part X, line 6	1	113,250.
2 a	Tax on investment income for 2011 from Part VI, line 5 2a 11,804.		
b	Income tax for 2011 (This does not include the tax from Part VI.)	1	
c		2c	11,804.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	101,446.
i	Recoveries of amounts treated as qualifying distributions		300.
5		5	101,746.
3		6	
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·	7	101,746.
=			
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	613,192.
þ	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	· - · · · · · · · · · · · · · · · · · ·
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b		3b	
1	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	613,192.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	0
ò	Adjusted qualifying distributions. Subtract line 5 from line 4	6	613,192.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years.	lculating w	hether the foundation

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_	irt XIII Undistributed Income (see instru	uctions)			Page 5
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
	line 7				101,746.
2	Undistributed income, if any, as of the end of 2011				
а	Enter amount for 2010 only				
	Total for pnor years 20 09 ,20 08 ,20 07				
3	Excess distributions carryover, if any, to 2011				
а	From 2006				
b	From 2007 391, 952.				
C	From 2008 108,084,1				
d	From 2009 83, 438. From 2010 2, 238, 968.				
е	From 2010	0. 500. 004			
f	Total of lines 3a through e	3,730,294.			
4	Qualifying distributions for 2011 from Part XII, line 4 > \$ 613,192.				
а	Applied to 2010, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2011 distributable amount				101,746.
	Remaining amount distributed out of corpus	511,446.			
5	Excess distributions carryover applied to 2011				
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,241,740.			
	Prior years' undistributed income Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount - see instructions				
6	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	907,852.			
9	Excess distributions carryover to 2012.	2 222 000			
	Subtract lines 7 and 8 from line 6a	3,333,888.			
10	Analysis of line 9 Excess from 2007 391, 952.				
a	• • • • • • • • • • • • • • • • • • • •				
0					
ر ب	Excess from 2009 83, 438. Excess from 2010 2, 238, 968.				
d e	Excess from 2010				
Ť		<u>.</u> .	<u> </u>		Form 990-PF (2011)

orm	990-PF (2011)	THE RUVO	FAMILY FOUNDAT	TION	73-	-1688102 Page 10
Pa	rt XIV Private Oper	rating Foundations (see instructions and	Part VII-A, question	9)	NOT APPLICABLE
a	If the foundation has	received a ruling or d	etermination letter that	it is a private opera	ting	
	foundation, and the ruling	g is effective for 2011, e	nter the date of the ruling		•	
b	Check box to indicate wh	ether the foundation is a	private operating found	ation described in section	4942()	(3) or 4942(j)(5)
	Enter the lesser of the ad-	Tax year		Prior 3 years		(a) Tatal
2 a	justed net income from Part	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	I or the minimum investment					
	return from Part X for each year listed					
b	85% of line 2a					
	Qualifying distributions from Part				· ·	
Ŭ	XII, line 4 for each year listed .					
d	Amounts included in line 2c not					
	used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
а	"Assets" alternative test - enter					
_	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest- ment return shown in Part X.					
	line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income					
	(interest, dividends, rents,					
	payments on securities toans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942					
	(J)(3)(B)(m)					
	(3) Largest amount of sup- port from an exempt					
	organization					
Рa	<u> </u>	ary Information (C	omplete this part	only if the founda	tion had \$5 000	or more in assets
		during the year - se		only in the rounds	111011 11111 40,000	0. 111010 111 00000
1	Information Regardin	g Foundation Manage	rs:			
а	List any managers of					
	before the close of any	tax year (but only if th	ney have contributed n	nore tnan \$5,000). (Se	e section 507(d)(2))	
	LARRY & CA					
b	List any managers of					large portion of the
	ownership of a partner	iship or other entity) of	which the foundation	mas a 10% of greater	interest	
	NONE					
2	Information Regardin	a Contribution. Grant	. Gift. Loan. Scholarsh	ip. etc Programs:		
	Ä	•		to preselected charita	able organizations a	and does not accept
	unsolicited requests for					
	other conditions, comp				,	-
а	The name, address, a		of the person to whom	n applications should be	addressed:	
b	ATTACHME The form in which app		omitted and information	on and materials they	should include	
-	The second of th			and maidridio troy t		
	ATTACHME	ENT 8				
С	Any submission deadle	ines.				
	4-					
-	N/A	mitations on augusta	such as by secre	inhigal amag ahardah	ala fialde kinda ef	institutions or other
a	Any restrictions or li factors	mitations on awards	such as by geogra	ipilical aleas, charitat	DIE HEIUS, KINUS OT	manunons, or other

Page **11**

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Duri	ng the Year or Appr		uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
ATTACHMENT 9				
				•
				-
		•		•
		•		
T-4-1	<u> </u>	<u> </u>	L 2-	611,167.
b Approved for future payment	T	; : : : : : :	▶ 3a	011,107.
a ripproved for lattice payment				
		<u></u>	<u> </u>	<u> </u>
Total		<u> </u>	<u>▶</u> 3b	1

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nter gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a					
b					
c					
d	ļ				
e					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from secunties			14	13,972.	
Net rental income or (loss) from real estate					
a Debt-financed property			-		
b Not debt-financed property					
Net rental income or (loss) from personal property			18	576,224.	
Other investment income	1		1 20	0.0,22.1	
Gain or (loss) from sales of assets other than inventor Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory	i				· · · · · · · · · · · · · · · · · · ·
Other revenue a					
b					
c					
d					
θ		L			
Subtotal Add columns (b), (d), and (e)				590,196.	590,19
Total. Add line 12, columns (b), (d), and (e).					590,19
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify cale	culations)			13	590,19
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activitie	culations) s to the Ac	complishment of E	xempt Purp		
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activitie	culations) s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	uted importantly to
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Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

												, , , , , ,		
1	Did the	e organiz	ation direct	tly or indirectly	engage in	any of the f	ollowing	g with an	ıy other organız	ation d	escribed		Yes	No
	ın sect	ion 501(c) of the Co	de (other than	section 50	1(c)(3) orga	nızatıon	s) or in s	ection 527, rela	iting to	political			
	organiz	zations?												
а	Transfe	ers from	the reportin	ng foundation to	a nonchai	ritable exemp	ot organ	ization of	•					
	(1) Cas	sh										1a(1)		X
												1a(2)		X
		ransaction												
	(1) Sal	es of as	sets to a no	ncharitable exe	mpt organiz	zation						16(1)		X
	(2) Pur	chases	of assets fro	om a noncharit	able exemp	t organization	1					1b(2)		X
												1b(3)		X
	(4) Rei	imburser	ment arrang	ements								1b(4)		X
	(5) Loa	ans or lo	an guarante	es								1b(5)		X
												1b(6)		X
												1c		X
									Column (b) sho			the f	fair m	arket
									If the foundation					
	value i	n any tra	ansaction of	r sharing arran	gement, sh	now in colum	nn (d) tl	he value	of the goods, o	ther as	sets, or s	ervices	s rec	eived.
(a) Lii	ne no	(b) Amou	unt involved	(c) Name of	noncharitable	exempt organiza	ition	(d) Des	cription of transfers,	transacti	ons, and shar	nng arra	ngeme	nts
		N/A				····	_	N/A						
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				1									-	

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2 a	Is the	foundati	on directly	or indirectly a	ffiliated wit	h or related	to on	e or mor	e tax-exempt o	rganiza	ntions			
									n 527?			T Ye	es X	No
				wing schedule			,,(-,,							
			e of organizatio		(b) Type of organ	iization		(c) [escription	on of relations	ship		
					 									
	•		<u> </u>											
_		7												
												-		
												-		
	Under	penalties	of penyary, I deci-	are that have exam	nined this return	n, including accon	npanying so	chedules and	statements, and to than knowledge	e best of	my knowledg	ge and b	elief, it	is true,
Sign	correc	t, and comp	ete Declaration o	of prepared (other than		•		preparer has a	any knowledge					
Here			1 Cm	Kwo	1	N e/1 0	1-12		embe	√	•	S discus: eparer :		retum : below :
		nature of o	Ficer or trustee	1 (0100	Dai	te		Title	<u></u>	_	(see instruction		Yes	No
	3		1	1						ı	(300 11311 0000	3/.	٦.00 ا	
		Print/Ty	pe preparer's	name	Prepar	er's signature)	,	Date	Che	ck if	PTIN		
Paid		'	EL KERN			1. II			11/4/70		-employed	P001	307	57
Prep	oarer	Firm's n		ERCY, BOW	LER, TA	YLOR & K	ERN				▶88-0			
Use	Only			100 ELTON		ITE 1000				5 (-11)			- ·	
				AS VEGAS,	NV	112 1000		ឧଦ	107 PI	none no	702 3	84-1	120	
		1		ic vidency	11 7			0,9		ione no		om 99		(2011)
											r	UIII 33	J~F F	(2011)

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of		NS AND LO	'	ription		P or D	0-4-	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	М	Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adj basis	Ц	or (loss)	
507,504.		5,000 SHRS 220,604.	WYNN RESOR	rs LTD			01/16/2009 286,900.	01/11/2011
60,901.		600 SHRS WY 25,788.	NN RESORTS	LTD			03/09/2009 35,113.	01/11/2011
191,433.		1,900 SHRS 81,660.	WYNN RESOR	rs LTD			03/09/2009 109,773.	01/24/2011
251,886.		2,500 SHRS 107,448.	WYNN RESOR	rs LTD			03/20/2009 144,438.	01/24/2011
TOTAL GAIN()	Loss)					•	576,224.	
							:	
						1		
JSA								

PART I - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF,

THE RUVO FAMILY FOUNDATION

NET INVESTMENT INCOME	13,956. 13,956.	13,972.
REVENUE AND EXPENSES PER BOOKS	13,956. 13,956.	13,972.
		TOTAL
DESCRIPTION	UBS FINANCIAL SERVICES INC OPPENHEIMER CHARLES SCHWAB	

ATTACHMENT 1

PART I - ACCOUNTING FEES

FORM 990PE,

CHARITABLE	2,000.	2,000.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	2,000.	2,000.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

THE RUVO FAMILY FOUNDATION

ATTACHMENT

PART I - OTHER EXPENSES

FORM 990PF,

REVENUE AND

EXPENSES PER BOOKS

25. CHARITABLE PURPOSES

25.

DESCRIPTION BANK FEES

TOTALS

ATTACHMENT 3

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ATTACHMENT 4

INVESTMENTS	
OTHER IN	
- II	
PART	
990PE,	
FORM	

ENDING FMV	312.	745,529.	745,841.
ENDING BOOK VALUE	300,000.	801,260.	1,101,260.
BEGINNING BOOK VALUE	300,000.	-146,919. 787,832.	1,376,413.
DESCRIPTION		OPPENHEIMER - OPTIONS OPPENHEIMER - MUTUAL FUNDS	TOTALS

ATTACHMENT 4

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

INCOME MODIFICATION 300.

TOTAL 300.

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6467

ATTACHMENT 6

ATTACHMENT 6

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

THE RUVO FAMILY FOUNDATION

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

DIRECTOR

0

0

0

8400 S JONES BLVD LAS VEGAS, NV 89139 CAMILLE RUVO

GRAND TOTALS

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

CAMILLE RUVO 24 SAWGRASS COURT LAS VEGAS, NV 89113

990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

APPLICANTS SHOULD WRITE A LETTER STATING THE NAME, TAX IDENTIFICATION NUMBER, IRS STATUS, AND PURPOSE OF THE AMOUNT REQUESTED.

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CITY MISSION OF LAS VEGAS	NONE	FEED AND CARE FOR THE HUNGRY AND HOMELESS	300.
PO BOX 364179	501(C)(3)		
N. LAS VEGAS, NV 89036			
FATHER FRANCIS WHITE	NONE	CHARITY - GENERAL SUPPORT	1,200.
	INDIVIDUAL		
GUARDIAN ANGEL CATHEDRAL	NONE	CHARITY - GENERAL SUPPORT	2,800
336 CATHEDRAL WAY	501(C)(3)		
LAS VEGAS, NV 89109			
KEEP MEMORY ALIVE	NONE	\$75,000 TO SUPPORT THE 2011 POWER OF LOVE GALA,	268,427.
888 W. BONNEVILLE AVE.	501(C)(3)	\$100,000 TO SUPPORT THE 2012 POWER OF LOVE GALA,	
LAS VEGAS, NV 89106		\$93,427 FOR GENERAL SUPPORT	
MAKE A WISH FOUNDATION	NONE	\$300 FOR CHARITY - GENERAL SUPPORT. \$2,000 TO	2,300.
5105 SOUTH DURANGO DRIVE, STE 100	501(C)(3)	SPONSOR THE 10TH ANNUAL FASHION SHOW LUNCHEON AT	
LAS VEGAS, NV 89113		WOLFGANG PUCK'S SPAGO	
OUR LADY OF WISDOM	NONE	CHARITY - GENERAL SUPPORT	750.
PO BOX 42371	501(C)(3)		
LAFAYETTE, LA 70504			

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
DECTOTENT NAME AND ADDRESS	AND FOURDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
מביינות מאוד מאט היינות איני היינות ה	TOTAL TOTAL OF THE		
PARALYZED VETS OF AMERICA	NONE	CHARITY - GENERAL SUPPORT	300.
801 EIGHTEENTH STREET, NW	501(C)(3)		
WASHINGTON, DC 20006-3517			
SHRINE OF THE MOST HOLY REDEEMER	NONE	MAINTENANCE AND UPKEEP OF THE SHRINE	5,700.
55 EAST RENO AVENUE	501(C)(3)		
LAS VEGAS, NV 89119			
ST. JOSEPH HUSBAND OF MARY ROMAN CATHOLIC CHURCH	NONE	CHARITY - GENERAL SUPPORT	3,200.
7260 WEST SAHARA AVENUE	501(C)(3)		
LAS VEGAS, NV 89117-2815			
		מוראחרוני נאחרוני עמרמורי עמרמוריוי	,
ST. PATRICK'S CATHEDRAL	NONE	CHARITIT - GENERAL SUPPORT	. 400.
460 MADISON AVENUE	501(C)(3)		
NEW YORK, NY 10022			
AMERICAN HEART ASSOCIATION	NONE	TO FUND MEDICAL RESEARCH, PUBLIC & PROFESSIONAL	300.
PO BOX 78851	501(C)(3)	EDUCATION PROGRAMS, AND COMMUNITY HEALTH	
PHOENIX, AZ 85062-8851		SCREENING	
			1
CATHOLIC RELIEF SERVICES	NONE	CHARITY - GENERAL SUPPORT	300
228 W. LEXINGTON ST.	501(C)(3)		
BALTIMORE, MD 21201-3443			

ATTACHMENT 9 (CONT'D)

v 11-6.1 501 (C) (3) NONE 12:09:40 PM

> 504 NORTH ROXBURY DRIVE BEVERLY HILLS, CA 90210

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MACULAR DEGENERATION RESEARCH	NONE	CHARITY - GENERAL SUPPORT	300.
22512 GATEWAY CENTER DRIVE	501(C)(3)		
CLARKSBURG, MD 20871			
BOSTON COLLEGE	NONE	BENEFIT THE PAUL LEO LOCATELLI, S.J. SCHOLARSHIP	100,000.
BOTOLPH HOUSE	501(C)(3)	FUND	
140 COMMONWEALTH AVENUE			
CHESTNUT HILL, MA 02467			
VANGE TOWN OFFICE	NOME	CHABITY - GENEBAL SIBBODT	1 400
DNOINEN ANDRE DECEMI	NONE	CIPALLI - GENERALI SOCEONI	
	INDIVIDUAL		
CATHOLIC STEWARDSHIP APPEAL DIOCESE OF LAS VEGAS	NONE	CATHOLIC EDUCATIONAL PROGRAMS, PASTORAL	5,000.
P.O. BOX 26239	501(C)(3)	MINISTRIES AND DIOCESAN COMMUNICATION PROGRAMS	
LAS VEGAS, NV 89126			
CHILDREN'S CANCER RESEARCH FUND	NONE	CHARITY - GENERAL SUPPORT	300.
PO BOX 7006	501(C)(3)		
ALBERT LEA, MN 56007-8006			
	!!!		9
CHURCH OF THE GOOD SHEPHERD	NONE	CHARITY - GENERAL SUPPORT	300.

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HOUSE RESEARCH INSTITUTE	NONE	EVENT IN SUPPORT OF THE INSTITUTE'S RESEARCH AND	10,000.
2100 W THIRD STREET	501(C)(3)	EDUCATION PROGRAMS, 65 FACES: A CAMPAIGN TO	
LOS ANGELES, CA 90057		IMPROVE LIVES THROUGH HEARING SCIENCE	
PROSTATE CANCER FOUNDATION	NONE	DISCOVER & DEVELOP BETTER TREATMENTS AND A CURE	57,800.
1250 FOURTH STREET	501(C)(3)	FOR RECURRENT PROSTATE CANCER	
SANTA MONICA, CA 90401			
SMILE TRAIN	NONE	CHARITY - GENERAL SUPPORT	300.
41 MADISON AVE	501(C)(3)		
28TH FLOOR			
NEW YORK, NY 10010			
UNITED WAY	NONE	GENERAL SUPPORT INCLUDING PROVIDING IMMUNIZATIONS	1,000.
PO BOX 70720	501(C)(3)	& BACK TO SCHOOL SUPPLIES & COLD WEATHER JACKETS	
LAS VEGAS, NV 89170			
AMERICAN CANCER SOCIETY	NONE	CHARITY - GENERAL SUPPORT	300.
PO BOX 22718	501(C)(3)		
ОКІДНОМА СІТУ, ОК 7123-1718			
		Compressed to mental the minimum dies mental on	6
AMERICAN DIABETES ASSOCIATION	NONE	IO TREAT AND PREVENT THE ONSET OF DIABETES	300.
1/01 N BEAUKEGARD STREET	501(C) (3)		
ALEXANDRIA, VA 22311			

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300.

FUND CRITICAL RESEARCH AND PROGRAMS FOR THOSE

LIVING WITH THE PAIN OF ARTHRITIS

450.

\$300 TO SUPPORT THE 70TH ANNIVERSARY THANKSGIVING \$150 TO SUPPORT THE HEART OF HOPE AWARD LUNCHEON,

IN APRIL BANQUET

501(C)(3)

NONE

CATHOLIC CHARITIES OF SOUTHERN NEVADA

1501 LAS VEGAS BLVD NORTH

LAS VEGAS, NV 89101

501(C)(3)

333 SEVENTH AVENUE, 2ND FLOOR

NEW YORK, NY 10001

DOCTORS WITHOUT BORDERS

NONE

501(C)(3)

233 SOUTH WACKER DRIVE, STE 2400

EASTER SEALS

CHICAGO, IL 60606

FEED THE CHILDREN

PO BOX 36

NONE

501(C)(3) NONE

OKLAHOMA CITY, OK 73101

300.

UNDERREPORTED CRISES IN MORE THAN 60 COUNTRIES

AROUND THE WORLD

PEOPLE CAUGHT IN HEADLINE-MAKING AND

PROVIDE EMERGENCY MEDICAL CARE TO MILLIONS OF

300.

CHARITY - GENERAL SUPPORT

300.

CHILDREN AND THEIR FAMILIES ALL ACROSS AMERICA

PROVIDING NOURISHING FOOD ON TABLES OF HUNGRY

300.

FUND CANCER RESEARCH AND EDUCATION

PURPOSE OF GRANT OR CONTRIBUTION

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

501(C)(3)

NONE

AMERICAN INSTITUTE FOR CANCER RESEARCH

WASHINGTON, DC 20009

1759 R STREET, NW

RECIPIENT NAME AND ADDRESS

501(C)(3)

1368 PASEO VERDE PKWY

HENDERSON, NV 89012

SUITE 200 B

ARTHRITIS FOUNDATION

NONE

AMOUNT

ATTACHMENT 9 (CONT'D)

1
11-6.
>

11/9/2012

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CONTRIBUTOR	
SUBSTANTIAL	
5	
RELATIONSHIP	

ATTACHMENT 9 (CONT'D)

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
FLIGHT 93 NATIONAL MEMORIAL	NONE	CHARITY - GENERAL SUPPORT	100.
C/O NATIONAL PARK FOUNDATION	501(C)(3)		
1201 EYE STREET, NW, STE 550B			
WASHINGTON, DC 20005			
HABITAT FOR HUMANITY	NONE	GIVE FAMILIES AROUND THE WORLD THE CHANCE TO LIVE	300.
121 HABITAT ST	501(C)(3)	IN SAFE, DECENT AND AFFORDABLE HOUSING	
AMERICUS, GA 31709-3498			
JUVENILE DIABETES RESEARCH FOUNDATION	NONE	CHARITY - GENERAL SUPPORT	300.
26 BROADWAY, 14 FLOOR	501(C)(3)		
NEW YORK, NY 10004			
LAS VEGAS RESCUE MISSION	NONE	PROVIDE FOOD BASKETS TO FAMILIES IN NEED AND	300.
480 WEST BONANZA ROAD	501(C)(3)	SERVE MEALS TO THE HOMELESS & HUNGRY	
LAS VEGAS, NV 89106			
THE LEUKEMIA & LYMPHOMA SOCIETY	NONE	SPONSOR THE WORK OF RESEARCHERS WHO ARE	300.
1311 MAMARONECK AVE	501(C)(3)	DEVELOPING NEW LIFESAVING TREATEMENTS AND OFFER	
WHITE PLAINS, NY 10605		SUPPORT GROUPS, FINANCIAL AID AND ADVOCACY	
		PROGRAMS FOR PATIENTS AND THEIR FAMILIES	
MUSCULAR DYSTROPHY ASSOCIATION	NONE	RESEARCH PROGRAMS, HEALTH CARE SERVICES, AND	300.
3300 EAST SUNRISE DRIVE	501(C)(3)	EDUCATION PROGRAMS	
TUCSON, AZ 85718			

ATTACHMENT 9 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MEMORIAL SLOAN-KETTERING CANCER CENTER	NONE	CHARITY - GENERAL SUPPORT	300.
1275 YORK AVENUE	501(C)(3)		
NEW YORK, NY 10065			
OUR LADY OF TAHOE CATHOLIC CHURCH	NONE	\$500 TO SUPPORT THE OUTREACH PROGRAM PROVIDING	4,950.
PO BOX 115	501(C)(3)	FOOD, CLOTHES & HOUSEHOLD ITEMS TO NEEDY	
ZEPHYR COVE, NV 89448		FAMILIES. \$1,000 TO BENEFIT THE FUND RAISING CSA	
		PROGRAM. \$1,600 TO FUND PARISH NEEDS AND \$1,850	
		FOR CHARITY - GENERAL SUPPORT	
PRIESTS FOR LIFE	NONE	CHARITY - GENERAL SUPPORT	300.
PO BOX 141172	501(C)(3)		
STATEN ISLAND, NY 10314			
THE SALVATION ARMY	NONE	CHARITY - GENERAL SUPPORT	300.
2900 PALOMINO LANE	501(C)(3)		
LAS VEGAS, NV 89107			
SPECIAL OLYMPICS	NONE	CHARITY - GENERAL SUPPORT	300.
5670 WYNN ROAD, STE H	501(C)(3)		
LAS VEGAS, NV 89118			
ST. JUDE CHILDREN'S RESEARCH HOSPITAL	NONE	CHARITY - GENERAL SUPPORT	300.
PO BOX 50	501(C)(3)		
MEMPHIS, TN 38101			

ATTACHMENT 9 (CONT'D)

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RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
STARKEY HEARING FOUNDATION 6700 WASHINGTON AVENUE SOUTH EDEN PRAIRIE, MN 55344	NONE 501(C)(3)	SUPPORT HEARING HEALTH EDUCATION AND AWARENESS PROGRAMS WHICH PROMOTE UNDERSTANDING OF THOSE LESS FORTUNATE AND PROVIDE HEARING AIDS WORLDWIDE	300.
SUSAN G. KOMEN FOR THE CURE 5005 LBJ FREEWAY, STE 250 DALLAS, TX 75244	NONE 501(C)(3)	CHARITY - GENERAL SUPPORT	300.
USO PO BOX 96322 WASHINGTON, DC 20090-6322	NONE 501(C)(3)	CHARITY - GENERAL SUPPORT	300.
TAHOE RIM TRAIL ASSOCIATION 948 INCLINE WAY INCLINE VILLAGE, NV 89451	NONE 501(C)(3)	MAINTAIN AND ENHANCE THE TAHOE RIM TRAIL SYSTEM	250.
OPERATION SMILE 6435 TIDEWATER DRIVE NORFOLK, VA 23509	NONE 501(C)(3)	PROVIDE FREE CLEFT LIP AND CLEFT PALATE SURGERIES TO CHILDREN AROUND THE WORLD	300.
BRIGHAM AND WOMEN'S HOSPITAL 45 FRANCIS STREET BOSTON, MA 02115	NONE HOSPITAL	TO SUPPORT THE BENJAMIN M. BANKS, MD FELLOWSHIP IN GASTROENTEROLOGY AT BRIGHAM AND WOMEN'S HOSPITAL	10,000.

11TDQM K382 11/9/2012

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE BRENT SHAPIRO FOUNDATION	NONE	TO RAISE AWARENESS ACROSS THE NATION ABOUT THE	5,000.
10250 CONSTELLATION BLVD, 18TH FLOOR	501(C)(3)	DISEASE OF ALCOHOL AND DRUG DEPENDENCE.	
LOS ANGELES, CA 90067			
ROMAN CATHOLIC CHURCH OF SAINT SEBASTIAN	NONE	CHARITY - GENERAL SUPPORT	300.
58-02 ROOSEVELT AVENUE	СНОКСН		
WOODSIDE, NY 11377			
DAVIS PHINNEY FOUNDATION FOR PARKINSON'S	NONE	INVEST IN PROGRAMS & RESEARCH THAT ENABLE PEOPLE	100.
4676 BROADWAY	501(C)(3)	LIVING WITH PARKINSON'S DISEASE TO LIVE WELL	
BOULDER, CO 80304			
GEORGE RODRIGUE FOUNDATION OF THE ARTS	NONE	SUPPORT YOUTH DEVELOPMENT THROUGH ART IN	25,000.
747 MAGAZINE STREET	501(C)(3)	EDUCATION	
NEW ORLEANS, LA 70130			
THE PUBLIC EDUCATION FOUNDATION	NONE	FUND THE GORDY FINK MEMORIAL SCHOLARSHIP	1,000.
3360 WEST SAHARA AVE, STE 160	501(C)(3)		
LAS VEGAS, NV 89102			
HARMS STUDY GROUP FOUNDATION	NONE	SUPPORT ONGOING RESEARCH & IMPROVE CARE IN SPINAL	10,000.
PO BOX 178130	501(C)(3)	DEFORMITY CARE IN CHILDREN AND ADOLESCENTS	
SAN DIEGO, CA 92177			

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
JOE TORRE SAFE AT HOME FOUNDATION	NONE	TO PROVIDE HOME AND SUPPORT TO THE MANY CHILDREN	1,000.
PO BOX 1037, MIDTOWN STATION	501(C)(3)	AND FAMILIES THAT HAVE TO COPE WITH THE FEAR,	
NEW YORK, NY 10018		ABUSE AND VIOLENCE IN THEIR LIVES	
THE MEADOWS SCHOOL	NONE	FUND THE TUITION DISCOUNT PROGRAM	25,000.
8601 SCHOLAR LANE	501(C)(3)		
LAS VEGAS, NV 89128-7302			
ONE DROP FOUNDATION INC.	NONE	CHARITY - GENERAL SUPPORT	7,940.
980 KELLY JOHNSON DRIVE, STE 200	501(C)(3)		
LAS VECAS, NV 89119			
ROBIN HOOD FOUNDATION	NONE	\$15,000 FOR 2011 BENEFIT AND \$1,000 FOR THE	16,000.
826 BROADWAY, 9TH FLOOR	501(C)(3)	VETERANS INITIATIVE PROGRAM	
NEW YORK, NY 10003			
SAINT FRANCIS CHAPEL	NONE	CHARITY - GENERAL SUPPORT	300.
800 BOYLSTON STEET, STE 1001	501(C)(3)		
BOSTON, MA 02199			
STEADMAN PHILIPPON RESEARCH INSTITUTE	NONE	FUND ORTHOPAEDIC SPORTS MEDICINE RESEARCH AND	25,000.
181 WEST MEADOW DRIVE, STE 1000	501(C)(3)	EDUCATION IN THE WORLD	
VAIL, CO 81657-5059			

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PART
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AMOUNT	ORS IN 300.	1,000.	900. ON FROM A	1,000.	250.	1,000.
PURPOSE OF GRANT OR CONTRIBUTION	FEED HUNGRY FAMILIES, CHILDREN & SENIORS IN SOUTHERN NEVADA	FUND RESEARCH TO HELP THOSE WHO SUFFER WITH NEURO-IMMUNE DISEASES	PROVIDE COMFORT ITEMS, COUNSELING AND REHABILITATION TO AID IN THE TRANSITION FROM A HOSPITAL BED TO AN INDEPENDENT AND PRODUCTIVE LIFE FOR INJURED SERVICE MEN 6 WOMEN	TO FUND THE PURCHASE OF ADDITIONAL MEDICAL. EQUIPMENT	CHARITY - GENERAL SUPPORT	CHARITY - GENERAL SUPPORT
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE 501(C)(3)	NONE 501 (C) (3)	NONE 501(C)(3)	NONE OTHER	NONE 501(C)(3)	NONE 501(C)(3)
RECIPIENT NAME AND ADDRESS	THREE SQUARE 4190 N PECOS ROAD LAS VEGAS, NV 89115	WHITTEMORE PETERSON 1664 NORTH VIRGINIA STREET RENO, NV 89557	WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD, STE 300 JACKSONVILLE, FL 32256	VAIL SKI PATROL PO BOX 7 VAIL, CO 81658	ST. IGNATIUS CHURCH 650 PARKER AVENUE SAN FRANCISCO, CA 94118	MOTHER TERESA'S MISSIONARIES OF CHARITY 524 WEST CALLE PRIMERA, STE 1005N

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AMOUNT PURPOSE OF GRANT OR CONTRIBUTION CHARITY - GENERAL SUPPORT CHARITY - GENERAL SUPPORT CHARITY - GENERAL SUPPORT RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT INDIVIDUAL 501(C)(3) 501 (C) (3) NONE NONE NONE MARY QUEEN OF THE UNIVERSE SHRINE FRIARS CHARITABLE FOUNDATION RECIPIENT NAME AND ADDRESS 1801 AVENUE OF THE STARS LOS ANGELES, CA 90067 FATHER PATRICK O'NEIL 8300 VINELAND AVENUE ORLANDO, FL 32821

750.

600.

300.

ATTACHMENT 9 (CONT'D)

611,167. TOTAL CONTRIBUTIONS PAID

ATTACHMENT 9

SCHEDULE D (Form 1041)

Department of the Treasury

Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2011

Employer Identification number THE RUVO FAMILY FOUNDATION 73-1688102 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (b) Date acquired (c) Date sold (e) Cost or other basis (d) Sales once the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (see instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2010 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (e) Cost or other basis (c) Date sold the entire year (d) Sales price (mo, day, yr) (mo, day, yr) (see instructions) Subtract (e) from (d) 6a 576,224. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2010 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, 576,224.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2011

ched	ule D (Form 1041) 2011				Page 2
Par			(1) Beneficianes'	(2) Estate's	(3) Total
	Caution: Read the instructions before completing this p	oart.	(see instr)	or trust's	(3) IUIai
3	Net short-term gain or (loss)	13			
4	Net long-term gain or (loss):				
а	Total for year	14a			576,224.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b			
С	28% rate gain	14c			
5	Total net gain or (loss). Combine lines 13 and 14a ▶	15			576,224.
lote	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fori	m 990-T, Part I, line 4a	a) If lines 14a ar	nd 15, column (2), are net
ains,	go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, co	mplete	e Part IV and the Capita	Loss Carryover V	Vorksheet, as necessary
Par	t IV Capital Loss Limitation				· · · · · · · · · · · · · · · · · · ·
6	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, III	ne 4c, if a trust), the sn	naller of	
а	The loss on line 15, column (3) or b \$3,000		<i></i> .	16	()
ote	The loss on line 15, column (3) or b \$3,000 If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page	9 1, lın	e 22 (or Form 990-T, lıı	ne 34), is a loss,	complete the Capital Loss
_	over Worksheet in the instructions to figure your capital loss carryover Tax Computation Using Maximum Capital Gains Rate			· · · ·	
	·) are some or on am	sount in ontoron	tin Port Lor Port II and
	1041 filers. Complete this part only if both lines 14a and 15 in colu			iount is entered	I III Part I Or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor ion: Skip this part and complete the Schedule D Tax Worksheet in the i				
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or	1131140	aioris II.		
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
	1 990-T trusts. Complete this part only if both lines 14a and 15 are	e dain	s or qualified divide	ends are includ	ed in income in Part I
of Fo	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part a	nd co	mplete the Schedule	D Tax Works	neet in the instructions
	ner line 14b, col. (2) or line 14c, col (2) is more than zero		F		
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	(A)	17		
	· · · · · · · · · · · · · · · · · · ·	٠, ٠	· · ' / 		
8	Enter the smaller of line 14a or 15 in column (2)				
	but not less than zero		 		
9	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19				
20	Add lines 18 and 19				
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g; otherwise, enter -0 ▶ 21			1	
22	Subtract line 21 from line 20 If zero or less, enter -0		22		
23	Subtract line 22 from line 17 If zero or less, enter -0		23		
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24	17	1 1		
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box	:			
	No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same?				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
_		• • •	' '		
29	Subtract line 28 from line 27		_ 29		
30	Multiply line 29 by 15% (.15)			30	
31	Figure the tax on the amount on line 23. Use the 2011 Tax Rati				
<i>-</i> 1	(see the Schedule Ginstructions in the instructions for Form 1041).				
	(see the Schedule Sinstituctions in the instituctions for Point 1041).	• • •	• • • • • • • • • • •	· · · · · · 3 	+
	Add lines 20 and 21			32	
32	Add lines 30 and 31				+
33	Figure the tax on the amount on line 17. Use the 2011 Tax Rate			I .	
	(see the Schedule Ginstructions in the instructions for Form 1041).				+
34	Tax on all taxable income. Enter the smaller of line 32 or line 33				
	G, line 1a (or Form 990-T, line 36)	<u> </u>		34	1

Schedule D (Form 1041) 2011

Name of estate or trust as shown on Form 1041 Do n	•	oyer identification number	er if shown on the other side	1 ' -	
THE RUVO FAMILY FOUNDATION Part II Long-Term Capital Gains and		s Held More Tha	an One Year	73-16881	02
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a 5,000 SHRS WYNN RESORTS LTD	01/16/2009	01/11/2011	507,504.	220,604.	286,900.
600 SHRS WYNN RESORTS LTD	03/09/2009	01/11/2011	60,901.	25,788.	35,113.
1,900 SHRS WYNN RESORTS LTD	03/09/2009	01/24/2011	191,433.	81,660.	109,773.
2,500 SHRS WYNN RESORTS	03/20/2009	01/24/2011	251,886.	107,448.	144,438.
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Sh. Tatal Combine the empline in column	(6) Enter have one	d an Cabadula D lin	a Ch		576 224

	ev 1-2012) e filing for an Additional (Not Automatic) 3-M	onth Exten	sion, complete only Part II	and check this hov	Page 2
ote. Only	complete Part II if you have already been gra	nted an aut	tomatic 3-month extension		
	e filing for an Automatic 3-Month Extension, of Additional (Not Automatic) 3-Month Extension			inal (na annia naadad)	
.at II	Additional (Not Automatic) 3-Month Ex	kterision o			
	Name of exempt organization or other filer, see in	structions	E	ter filer's identifying number, se Employer identification num	
ype or	The state of the s				(2) 0.
rint	THE RUVO FAMILY FOUNDATION			X 73-1688102	
	Number, street, and room or suite no If a P O bo	x. see instruc	ctions	Social security number (SSN	l)
e by the	24 SAWGRASS COURT	,			•
ng your	City, town or post office, state, and ZIP code For	a foreign ad	dress, see instructions.	4. <u> </u>	
tum See structions	LAS VEGAS, NV 89113				
nter the R	eturn code for the return that this application	is for (file a	separate application for ea	ch return)	. 0 4
plication		Return	Application		Return
For		Code	Is For		Code
rm 990		01	建筑建筑中华东部等原 统	经产品的工程	公理
rm 990-B	SL.	02	Form 1041-A		08
rm 990-E	Z	01	Form 4720		09
rm 990-P	F	04	Form 5227		10
rm 990-T	(sec 401(a) or 408(a) trust)	0.5	Form 6069		11
	(trust other than above)	06	Form 8870		12
	not complete Part II if you were not already s are in the care of PIERCY BOWLER			sion on a previously filed For	m 8868.
the who with the	for a Group Return, enter the organization's for le group, check this box	f it is for pa n is for ntil	rt of the group, check this b	200x▶ and at	
	llendar year 2011, or other tax year beginni			d ending ,	20
	tax year entered in line 5 is for less than 12 m	ontns, chec	k reason Initial ref	turn Final return	
State	Change in accounting period in detail why you need the extension THIRD	PARTY	INFORMATION NECESS	SARY TO COMPLETE	
THE '	TAX RETURN HAS NOT BEEN RECEIV	ED, REO	UIRING THIS REQUES	T FOR AN	
	TIONAL EXTENSION OF TIME TO FI				
a if this	application is for Form 990-BL, 990-PF, 99	0-T, 4720	, or 6069, enter the tent	ative tax, less any	
	fundable eredite. See instructions			8a \$	
	fundable credits. See instructions				140.
	s application is for Form 990-PF, 990-T,	4720, or	6069, enter any refund	dable credits and	140.
b If this estima	s application is for Form 990-PF, 990-T, ated tax payments made Include any pri			a credit and any	
b If this estima amour	s application is for Form 990-PF, 990-T, ated tax payments made Include any print paid previously with Form 8868.	or year o	verpayment allowed as	a credit and any 8b \$	140.
b If this estima amount c Balance	s application is for Form 990-PF, 990-T, ated tax payments made Include any print paid previously with Form 8868. ce Due. Subtract line 8b from line 8a. Include	your paym	verpayment allowed as	a credit and any 8b \$ ed, by using EFTPS	
b If this estima amount c Balance	s application is for Form 990-PF, 990-T, ated tax payments made Include any print paid previously with Form 8868. ce Due. Subtract line 8b from line 8a. Include ronic Federal Tax Payment System) See instru	or year o your paym ctions	verpayment allowed as ent with this form, if require	a credit and any 8b \$ ed, by using EFTPS 8c \$	
b If this estimated amount of Balance (Election	s application is for Form 990-PF, 990-T, ated tax payments made Include any print paid previously with Form 8868. ce Due. Subtract line 8b from line 8a. Include ronic Federal Tax Payment System) See instru Signature and Verifica	your paym ctions	verpayment allowed as ent with this form, if require st be completed for P	a credit and any 8b \$ ed, by using EFTPS 8c \$ art II only.	140.
b If this estima amount c Balance (Election der penaltie	s application is for Form 990-PF, 990-T, ated tax payments made Include any print paid previously with Form 8868. ce Due. Subtract line 8b from line 8a. Include ronic Federal Tax Payment System) See instru	your paym ctions ation mus	verpayment allowed as ent with this form, if require st be completed for P	a credit and any 8b \$ ed, by using EFTPS 8c \$ art II only.	140.
b if this estima amount Balance (Election der penaltie true, corrections)	s application is for Form 990-PF, 990-T, ated tax payments made Include any print paid previously with Form 8868. ce Due. Subtract line 8b from line 8a. Include ronic Federal Tax Payment System) See instru Signature and Verificates of perjury, I declare that I have examined this form,	your paym ctions ation mus	verpayment allowed as ent with this form, if require st be completed for Prompanying schedules and statem	a credit and any 8b \$ ed, by using EFTPS 8c \$ art II only. ents, and to the best of my knowled	140.
estima amour Balance (Election penaltie	s application is for Form 990-PF, 990-T, ated tax payments made Include any print paid previously with Form 8868. ce Due. Subtract line 8b from line 8a. Include ronic Federal Tax Payment System) See instru Signature and Verificates of perjury, I declare that I have examined this form,	your paym ctions ation mus	verpayment allowed as ent with this form, if require st be completed for P	a credit and any 8b \$ ed, by using EFTPS 8c \$ art II only. ents, and to the best of my knowled	140.

Form 8868

(Rev January 2012)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

// 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 | 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 Enter filer's Identifying number, see Instructions to file income tax returns Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print THE RUVO FAMILY FOUNDATION 73-1688102 File by the Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) due date for 24 SAWGRASS COURT filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions LAS VEGAS, NV 89113 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return Application Return Is For Code is For Code Form 990 01 Form 990-T (corporation) 07 02 Form 1041-A ^rm 990-BL Jrm 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) Form 8870 The books are in the care of ▶ PIERCY BOWLER TAYLOR & KERN Telephone No ▶ 702 384-1120 FAX No ► 702 870-2474 If the organization does not have an office or place of business in the United States, check this box _ . If this is If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 08/15 , 20 12 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X | calendar year 2011 or tax year beginning _______, 20 ____, and ending _____ 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 140. nonrefundable credits. See instructions. 3a \$ b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 82. estimated tax payments made. Include any prior year overpayment allowed as a credit 3b \$ Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS 58. (Electronic Federal Tax Payment System) See instructions 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

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

Form 8868 (Rev 1-2012)