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# Form **990-PF**

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# Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

, and ending

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

For calendar year 2011 or tax year beginning

Nar	ne of	foundation				A Employer identificatio	n number
<b>N</b> T	TC	HTINGALE FAMILY FOUNDAT	IT ON			00 606100	1
		nd street (or PO box number if mail is not delivered to street			Room/suite	88-606198: B Telephone number	<u>L</u>
3384 LAKESIDE DRIVE						775-323-10	146
		own, state, and ZIP code	•		<del></del>	C If exemption application is	
•		O, NV 89509					ponemy, andarmae p
G C	heck	all that apply: Initial return	Initial return of a fo	rmer public o	harity	D 1. Foreign organization	s, check here
		Final return	Amended return				
		Address change	Name change			Foreign organizations m 2. check here and attach of	computation the 85% test,
H_C	_	type of organization: X Section 501(c)(3) ex				E If private foundation st	atus was terminated
<u>_</u>			Other taxable private founda			under section 507(b)(1	(A), check here
		irket value of all assets at end of year   J Accounti	<del>-</del>	L Accr	ual	F If the foundation is in a	
(fr			ther (specify) mn (d) must be on cash b	vacie )		under section 507(b)(1	)(B), check here
	rt I	Analysis of Revenue and Expenses				(a) Advicated and	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	21,650.			N/A	(400. 200. 600)
	2	Check I if the foundation is not required to attach Sch. B				•	
	3	Interest on savings and temporary cash investments	1.		1.		STATEMENT 1
	4	Dividends and interest from securities			_		
	5a	Gross rents		<del></del>			
	þ	Net rental income or (loss)					
e	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all			<del></del>		
Revenue	D	assets on line 6a					<del>                                     </del>
Re	7 8	Capital gain net income (from Part IV, line 2)  Net short-term capital gain			0.		
	9	Income modifications					<del> </del>
	10a	Gross sales less returns and allowances					
	b						
	C	Gross profit or (loss)					
	11	Other income			_		
	12	Total Add lines 1 through 11	21,651.		1.		
	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
	14	Other employee salaries and wages					
ģ	15	Pension plans, employee benefits					
enses		Legal fees Accounting fees STMT 2	3.650.		365.		0
xpe	b	Other professional resEIVED	3,030.				0.
ē E	17	Interest					
aţį,	18	- 161 111 -1-					· · · · · · · · · · · · · · · · · · ·
	19	Depreciation and depletion					
SE.	20	Occupancy					
eş.	21	Travel, conference Candingellags					
and	22	Printing and publications					
SCANNED         1 % 2012   10 Exp	23	Other expenses					
rati	24	Total operating and administrative					
		expenses. Add lines 13 through 23	3,650.		365.		0.
Ž	25	Contributions, gifts, grants paid	34,000.				34,000.
$\leq$	26	Total expenses and disbursements.	27 650		265		24 000
<u>-</u>	27	Add lines 24 and 25 Subtract line 26 from line 12:	37,650.		365.		34,000.
<b>1</b> 0		Excess of revenue over expenses and disbursements	-15,999.				
		Net investment income (if negative, enter -0-)	10,000		0.		
		Adjusted net income (if negative, enter -0-)				N/A	<del>                                     </del>
1235 12-0		LHA For Paperwork Reduction Act Notice, see	instructions.				Form <b>990-PF</b> (2011)

123511

Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form **990-PF** (2011)

4

6,563.

6,563.

1a		roperty sold (e.g., real estat on stock, 200 shs. MLC Co.	···	D D	low acqui - Purchas - Donatioi	e (0	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
-								
b NO	<u>NE</u>	·	<del></del>					
<u>c</u>		, <u></u>		-				-
<u>d</u>				+				
e (e) Gross sales price	(f) Depreciation (or allow		Cost or other basis s expense of sale				(h) Gain or (los (e) plus (f) minus	
<u>a</u>			·					
b c	<del> </del>							
d								,
e								
Complete only for assets shown	ng gain in column (h	) and owned by the founda	ion on 12/31/69				Gains (Col. (h) gai	
(i) F.M.V. as of 12/31/69	(j) Adjuste as of 12/3		Excess of col. (I) er col. (J), If any			col. (I	k), but not less the Losses (from col.	an -0-) <b>or</b> (h))
a								
<u>b</u>	<u></u>							
d							<u> </u>	
e								
	<u></u>	f gain, also enter in Part I. I	ne 7	٦				
Capital gain net income or (net ca	apıtal loss) 🥻 i	f gain, also enter in Part I, I f (loss), enter -0- in Part I, I	ne 7	<b>)</b> [	2			
Net short-term capital gain or (lo	ss) as defined in sec	tions 1222(5) and (6):						
If gain, also enter in Part I, line 8,				<b> </b>	_			
If (loss), enter -0- in Part I, line 8  Part V Qualification U	Inder Section	4940(e) for Reduc	ad Tay on Ne	l Inv	3   estmer	at Inco	me	
For optional use by domestic privat	e foundations subjec	et to the section 4940(a) tax	on net investment i	ncome	e. Y			
		, ,			,			
f section 4940(d)(2) applies, leave t								
	ction 4942 tax on the		•	rıod?				Yes X N
f "Yes," the foundation does not qua	ction 4942 tax on the alify under section 49	40(e). Do not complete this	part.					Yes X N
f "Yes," the foundation does not qua Enter the appropriate amount in	ction 4942 tax on the alify under section 49	40(e). Do not complete this h year; see instructions bef	part.	ies.				
f "Yes," the foundation does not qua Enter the appropriate amount in (a) Base period years	etion 4942 tax on the alify under section 49 each column for eac	40(e). Do not complete this	part.	ies.	ritable-use	assets	Distr (col. (b) d	(d)
"Yes," the foundation does not qua Enter the appropriate amount in	etion 4942 tax on the alify under section 49 each column for eac	40(e). Do not complete this h year; see instructions bef	part.  ore making any entr  Net value of no	ies.	ıtable-use	assets	Distr (col. (b) d	(d) ibution ratio ivided by col. (c))
f "Yes," the foundation does not qua Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginni	etion 4942 tax on the alify under section 49 each column for eac	(b) ed qualifying distributions  31,000 145,523	part.  ore making any entr  Net value of no	ies.	ntable-use 12, 7,	187. 329.	Dıstr (col. (b) d	(d) ibution ratio ivided by col. (c)) 2 • 54369 19 • 85577
f "Yes," the foundation does not qua Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginni 2010 2009 2008	etion 4942 tax on the alify under section 49 each column for eac	(b) ed qualifying distributions  31,000 145,523	part.  ore making any entr  Net value of no	ies.	12, 7, 12,	187. 329. 559.	Distr (col. (b) d	(d) ibution ratio ivided by col. (c))  2.54369 19.85577 6.70507
f "Yes," the foundation does not qua Enter the appropriate amount in Base period years Calendar year (or tax year beginni 2010 2009 2008 2007	etion 4942 tax on the alify under section 49 each column for eac	(b) ed qualifying distributions 31,000 145,523 84,209 150,000	part.  ore making any entr  Net value of no  .	ies.	12 , 7 , 12 , 42 ,	187. 329. 559.	Distr (col. (b) d	(d) ibution ratio ivided by col. (c))  2 . 54369  19 . 85577  6 . 70507  3 . 51774
f "Yes," the foundation does not qua Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginni 2010 2009 2008	etion 4942 tax on the alify under section 49 each column for eac	(b) ed qualifying distributions  31,000 145,523	part.  ore making any entr  Net value of no  .	ies.	12 , 7 , 12 , 42 ,	187. 329. 559.	Distr (col. (b) d	(d)
f "Yes," the foundation does not qual Enter the appropriate amount in  Base period years Calendar year (or tax year beginni 2010 2009 2008 2007 2006	etion 4942 tax on the alify under section 49 each column for eac	(b) ed qualifying distributions 31,000 145,523 84,209 150,000	part.  ore making any entr  Net value of no  .	ies.	12 , 7 , 12 , 42 ,	187. 329. 559.	(col. (b) d	(d) subtion ratio ivided by col. (c))  2 . 54369  19 . 85577  6 . 70507  3 . 51774  . 46022
2010 2009 2008 2007 2006  Total of line 1, column (d)	etion 4942 tax on the alify under section 49 each column for eac ing in) Adjust	140(e). Do not complete this th year; see instructions before (b) ed qualifying distributions 31,000 145,523 84,209 150,000 54,000	part.  ore making any entr  Net value of no	es. (c) onchar	12, 7, 12, 42, 117,	187. 329. 559.	Distr (col. (b) d	(d) subtion ratio ivided by col. (c))  2 . 54369  19 . 85577  6 . 70507  3 . 51774  . 46022
f "Yes," the foundation does not qual Enter the appropriate amount in  Base period years Calendar year (or tax year beginni 2010 2009 2008 2007 2006	etion 4942 tax on the alify under section 49 each column for each ing in)  Adjusting in)  5-year base period -	(b) ed qualifying distributions  31,000  145,523  84,209  150,000  54,000	part.  ore making any entr  Net value of no	es. (c) onchar	12, 7, 12, 42, 117,	187. 329. 559.	(col. (b) d	(d) Ibution ratio Ivided by col. (c))  2.54369  19.85577  6.70507  3.51774  .46022
Enter the foundation does not qual Enter the appropriate amount in Base period years Calendar year (or tax year beginni 2010 2009 2008 2007 2006  Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe	etion 4942 tax on the alify under section 49 each column for each ing in)  Adjusting in  5-year base period - ence if less than 5 year	140(e). Do not complete this they year; see instructions before the see instructions before the see instructions and see instructions are seen instructions before the see instructions before a see instructions and see instructions are seen instructions.	part.  ore making any entr  Net value of no	es. (c) onchar	12, 7, 12, 42, 117,	187. 329. 559.	(col. (b) d	(d) Ibution ratio Ivided by col. (c))  2 . 54369  19 . 85577  6 . 70507  3 . 51774
Enter the foundation does not qual Enter the appropriate amount in  Base period years Calendar year (or tax year beginni 2010 2009 2008 2007 2006  Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe	etion 4942 tax on the alify under section 49 each column for each ing in)  Adjusting in  5-year base period - ence if less than 5 year	140(e). Do not complete this they year; see instructions before the see instructions before the see instructions and see instructions are seen instructions before the see instructions before a see instructions and see instructions are seen instructions.	part.  ore making any entr  Net value of no	es. (c) onchar	12, 7, 12, 42, 117,	187. 329. 559.	(col. (b) d	(d) subtion ratio ivided by col. (c))  2.54369  19.85577  6.70507  3.51774  .46022  33.08251  6.61650
Enter the foundation does not qual Enter the appropriate amount in  Base period years Calendar year (or tax year beginni 2010 2009 2008 2007 2006  Total of line 1, column (d) Average distribution ratio for the the foundation has been in existed the foundation of the the foundation has been in existed the foundation of the the foundation has been in existed the foundation of the the foundation has been in existed the foundation of the the foundation has been in existed the foundation has been in existe	etion 4942 tax on the alify under section 49 each column for each ing in)  Adjusting in  5-year base period - ence if less than 5 year ble-use assets for 20	140(e). Do not complete this th year; see instructions before (b) and qualifying distributions  31,000  145,523  84,209  150,000  54,000  divide the total on line 2 by ars	part.  ore making any entr  Net value of no	es. (c) onchar	12, 7, 12, 42, 117,	187. 329. 559.	2 3	(d) Ibution ratio Ivided by col. (c))  2.54369  19.85577  6.70507  3.51774  .46022  33.08251  6.61650  8,435
f "Yes," the foundation does not qual Enter the appropriate amount in  Base period years Calendar year (or tax year beginni 2010 2009 2008 2007 2006  Total of line 1, column (d) Average distribution ratio for the	etion 4942 tax on the alify under section 49 each column for each ing in)  Adjusting in  5-year base period - ence if less than 5 year ble-use assets for 20	140(e). Do not complete this th year; see instructions before (b) and qualifying distributions  31,000  145,523  84,209  150,000  54,000  divide the total on line 2 by ars	part.  ore making any entr  Net value of no	es. (c) onchar	12, 7, 12, 42, 117,	187. 329. 559.	2 3 4 5	(d) subtion ratio ivided by col. (c))  2.54369 19.85577 6.70507 3.51774 .46022 33.08251 6.61650 8,435
Enter the foundation does not qua Enter the appropriate amount in  Base period years Calendar year (or tax year beginni 2010 2009 2008 2007 2006  Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe Enter the net value of noncharital Multiply line 4 by line 3 Enter 1% of net investment incore	tion 4942 tax on the alify under section 49 each column for each ing in)  Adjust  5-year base period - ence if less than 5 year base sets for 20 me (1% of Part I, line)	140(e). Do not complete this th year; see instructions before (b) and qualifying distributions  31,000  145,523  84,209  150,000  54,000  divide the total on line 2 by ars	part.  ore making any entr  Net value of no	es. (c) onchar	12, 7, 12, 42, 117,	187. 329. 559.	2 3 4 5 6	(d) Ibution ratio Ivided by col. (c))  2.54369  19.85577  6.70507  3.51774  .46022  33.08251  6.61650  8,435

			200 i			Page 4
		940 -	see i	istru	Ctioi	is)
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					^
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1				0.
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
-	Add lines 1 and 2	3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:					
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6a					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)  6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7_				0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶	11				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?			1a		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					,
	managers. ► \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	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, o	Г				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
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.					
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?			7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NV					
b	of 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			8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				
_	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		х
10		тмт	3	10	Х	<del></del>

Form **990-PF** (2011)

orm 990-PF (2011) NIGHTINGALE FAMILY FOUND	ATION		88-60619	981	Page 6
Part VII-B   Statements Regarding Activities for Which I	Form 4/20 May Be F	Requirea (contin	ued)	1	<del></del>
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	or to carry on, directly or indire		[ <b>10</b> ]		
any voter registration drive?	•		s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t				
the prevention of cruelty to children or animals?			es 🗓 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit		ın Regulations	/-		
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		. —	i		
expenditure responsibility for the grant?		I/A L Ye	es L No		
If "Yes," attach the statement required by Regulations section 53 494			į		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es 🗶 No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	iersonal benefit contract?		-	6b	X
If "Yes" to 6b, file Form 8870			I		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y€	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attributions. Also are Office and Division and			N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation Ma	inagers, riigni	y		
List all officers, directors, trustees, foundation managers and their	compensation.				
, , , , , , , , , , , , , , , , , , , ,	I	(c) Compensation	(d) Contributions to	1 (	e) Expense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid,	(d) Contributions to employee benefit plans and deferred	aò	e) Expense count, other allowances
JACQUELINE NIGHTINGALE	TRUSTEE	enter -0-)	compensation	+-	allowalices
3384 LAKESIDE DRIVE	IROSIEE				
RENO, NV 89509	2.00	0.	0.		0.
STEVEN NIGHTINGALE	TRUSTEE	•		1	<u> </u>
3384 LAKESIDE DRIVE	INODIEE				
RENO, NV 89509	2.00	0.	0.		0.
	2.00			<del>' </del>	
				1	
, , , , , , , , , , , , , , , , , , ,					
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
A Name and address of such assistance and assistance of the CO	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(	e) Expense count, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	ac	count, other allowances
NONE	<u> </u>				
				İ	
		1			
			-		
Total number of other employees paid over \$50,000					0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	, , , , , , , , , , , , , , , , , , ,	
		•
7		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical	al information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produc	ed, etc.	-
1 <u>N/A</u>		
2		
0		
3		
4		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lin	es 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·		1a	0.
b		1b	<u> </u>
c	Fair market value of all other assets	1c	
d		1d	8,563.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	8,563.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	128.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,435.
6	Minimum investment return. Enter 5% of line 5	6	422.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	422.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	422.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	422.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	422.
P	art XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	34,000.
b	• • • • • • • • • • • • • • • • • • •	1b	0.
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	34,000.
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	5	<u> </u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	34,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for th	e section
	4940(e) reduction of tax in those years.		

Form **990-PF** (2011)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,		voulo prior to 2010	20.0	
line 7				422.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
<b>b</b> Total for prior years:				
		0.		<del>.</del>
3 Excess distributions carryover, if any, to 2011:				
a From 2006 53,391.				
b From 2007 150,000.				
c From 2008 84,209. d From 2009 145,523.				
d From 2009 145,523. e From 2010 31,000.				
f Total of lines 3a through e	464,123.			
4 Qualifying distributions for 2011 from	404,123.			
Part XII, line 4: ► \$ 34,000.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				<del></del>
(Election required - see instructions) **	34,000.			
d Applied to 2011 distributable amount			· · · · · · · · · · · · · · · · ·	0.
e Remaining amount distributed out of corpus	0.			· <u>-</u> .
Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	422.			422.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	497,701.			
b Prior years' undistributed income. Subtract	401,101.			
line 4b from line 2b		0.		
c 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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006	50.060		i	
not applied on line 5 or line 7	52,969.			
9 Excess distributions carryover to 2012	444 722			
Subtract lines 7 and 8 from line 6a	444,732.			
10 Analysis of line 9:				
a Excess from 2007 150,000. b Excess from 2008 84,209.				
b Excess from 2008 84,209. c Excess from 2009 145,523.				
d Excess from 2010 31,000.				
e Excess from 2011 34,000.				
\$2,000 none 2011   34,000 s	** CEE CUVUE	/D)////		F 000 DE (0044)

Form 990-PF (2011) NIGHTIN	GALE FAMILY	FOUNDATION		88-60	61981 Page 10
Part XIV Private Operating F	<u>`</u>		-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo			▶ ∟		
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or49	942(j)(5) T
2 a Enter the lesser of the adjusted net	Tax year (a) 2011	<b>(b)</b> 2010	Prior 3 years (c) 2009	(d) 2008	(a) Total
income from Part I or the minimum	(4) 2011	(0) 2010	(6) 2009	(0) 2000	(e) Total
investment return from Part X for		1	•		
each year listed	-				
<b>b</b> 85% of line 2a		<del>  - · · · · · · · · · · · · · · · · · · </del>		<u> </u>	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			<del> </del>		
e Qualifying distributions made directly		1			
for active conduct of exempt activities.		;			
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "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 investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter;					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (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)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income				1	
Part XV Supplementary Info	ormation (Comple	ete this part only	if the foundatior	n had \$5,000 or mo	ore in assets
at any time during t		ructions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation wh year (but only if they have contributed r			ributions received by the	toundation before the clos	se of any tax
* , , , ,	nore than 40,000). (Occ 3	section 307 (u)(2)-)			
STEVEN NIGHTINGALE			/		
b List any managers of the foundation when other entity) of which the foundation has			or an equally large port	on of the ownership of a pa	artnership or
NONE	•				
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship etc. Pr	oorame.		
Check here ► X if the foundation of	only makes contributions	to preselected charitable	organizations and does		
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations u	nder other conditions, c	omplete items 2a, b, c, and	l d.
a The name, address, and telephone num	ber of the person to who	m applications should be	addressed:		
b The form in which applications should I	be submitted and informa	tion and materials they sh	nould include:		
c Any submission deadlines:			· · · · ·		
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields.	kinds of institutions, or	other factors:	
,	,	,	,		
100804 10.00 11					Farm 000 DE (0011)

			<del></del>	
3 Grants and Contributions Paid During the	fear or Approved for Future	Payment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
NEVADA MUSEUM OF ART		PUBLIC CHARITY	ENDOWMENT FUND FOR	
160 WEST LIBERTY STREET RENO, NV 89501			CULTURAL AND	34 000
RENO, NV 09301			EDUCATIONAL RESOURCE	34,000
			_	
-				
		:		
Total			<b>&gt;</b> 3a	24 000
b Approved for future payment				34,000
• Approved to retare payment				
NONE				
Total			<b>▶</b> 3b	0

Excluded by section 512, 513, or 514

Unrelated business income

#### Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ided by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
	Code		0000		
a		<u></u>	<del> </del>		
b			-		
<u> </u>					
d					
e				<u> </u>	
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income	-				
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events	-		-		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			ļ		
b					
c			ļ		
đ					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		1.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13 _	1.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	to the Acc	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which inco			contri	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than	by providing fu	inds for such purposes).			
		•			·
				·	<del></del>
		<del></del>			
				<del></del> .	
123621					Form <b>990-PF</b> (2011)

Form 990-PF (2011) NIGHTINGALE FAMILY FOUNDATION 88-6061981 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ∃Yes X No b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below (see instr )? Sign Here X Yes No Signature of officer or trustee Date Title Print/Type preparer's name Preparet's signatur Date Check PTIN self-employed **Paid** DEANE A. ALBRIGHT P00286122

Form **990-PF** (2011)

775-826-5432

Firm's EIN ► 88-0149095

Phone no.

**Preparer** 

**Use Only** 

Firm's name ► ALBRIGHT,

& ASSOCIATES,

PERSING

Firm's address ► 1025 RIDGEVIEW DRIVE, SUITE 300

RENO, NV 89519

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

**Employer identification number** 

2011

NIGHTINGALE FAMILY FOUNDATION 88-6061981 Organization type (check one) Filers of: Section: Form 990 or 990-EZ \_\_\_\_ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

# NIGHTINGALE FAMILY FOUNDATION

88-6061981

Part I	Contributors (see instructions) Use duplicate copies of Part I if additiona	space is needed.
(a)	(b)	(c)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JACQUELINE NIGHTINGALE  3384 LAKESIDE DRIVE  RENO, NV 89509	\$ <u>4,650</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	STEVEN NIGHTINGALE  3384 LAKESIDE DRIVE  RENO, NV 89509	\$17,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	3-12	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

### NIGHTINGALE FAMILY FOUNDATION

88-6061981

Part II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3453 01-23	2.40	Schedule R /Form 9	 990, 990-EZ, or 990-PF) (2

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Name of organization **Employer identification number** NIGHTINGALE FAMILY FOUNDATION

Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once)

\$\[
\begin{array}{c}
\text{88-6061981}
\text{98-6061981}
\end{array}
\] Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift from (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT	1		
SOURCE				AMOUNT			
CITIGROUP GLOBAL MKTS INC.		1.					
TOTAL TO FORM 990-PF, PART I,		1.					
FORM 990-PF	STATEMENT	2					
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	(D) CHARITA E PURPOS	BLE ES		
ACCOUNTING FEE	3,650.	365.			0.		
TO FORM 990-PF, PG 1, LN 16B	3,650.	365.			0.		
	' SUBSTANTIA PART VII-A,	L CONTRIBUTOR LINE 10	S	STATEMENT	3		
NAME OF CONTRIBUTOR	ADDR	ADDRESS					
JACQUELINE NIGHTINGALE		3384 LAKESIDE DRIVE RENO, NV 89509					
STEVEN NIGHTINGALE		3384 LAKESIDE DRIVE RENO, NV 89509					

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION
53.4942(A)-3(D)(2) TO TREAT
EXCESS QUALIFYING DISTRIBUTIONS
AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT

\_\_\_\_

PURSUANT TO IRC SECTION 4942(H)(2) AND REGULATIONS 53.4942(A)-3(D)(2), NIGHTINGALE FAMILY FOUNDATION HEREBY ELECTS TO TREAT THE CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS BEING MADE OUT OF CORPUS.

#### Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

<ul><li>If you a</li></ul>	are filing for an Automatic 3-Month Extension, comple	te only Pa	rt I and check this box			ightharpoons	
<ul><li>If you a</li></ul>	are filing for an Additional (Not Automatic) 3-Month Ex	ctension, c	complete only Part II (on page 2 of	this form)			
Do not c	omplete Part II unless you have already been granted	an automa	itic 3-month extension on a previous	ly filed Fo	rm 8868.		
	ic filing (e-file). You can electronically file Form 8868 if			-		rporation	
	to file Form 990-T), or an additional (not automatic) 3-mo						
	ifile any of the forms listed in Part I or Part II with the ex		<del>-</del>				
	Benefit Contracts, which must be sent to the IRS in page	-					
	urs.gov/efile and click on e-file for Charities & Nonprofits		(see instructions). For more details t			3 101111,	
Part I	Automatic 3-Month Extension of Time		submit original (no copies ne	eded).			
	ation required to file Form 990-T and requesting an auto-						
Part I onl		matic o me	onth extension - check this box and t	complete			
All other	y corporations (including 1120-C filers), partnerships, REN ome tax returns	IICs, and t	rusts must use Form 7004 to reques	t an exter	sion of time		
Type or	Name of exempt organization or other filer, see instru	Employe	r identification nu	mber (FIN) or			
print					Employer identification number (EIN)		
print							
File by the		· ·	tions		Social security number (SSN)		
due date for filing your	·			Social se	Ciai security number (SSN)		
return See		araina add	Irana ana matanatana				
instructions							
	RENO, NV 89509						
	Data and a facility of the little of the lit						
Enter the	Return code for the return that this application is for (fil	e a separa	te application for each return)			0 4	
	· · · · · · · · · · · · · · · · · · ·	1	I				
Applicati	on	Return	Application			Return	
ls For		Code	Is For			07	
Form 990		01	Form 990-T (corporation)	990-T (corporation)			
Form 990		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	O-T (trust other than above)	06	Form 8870			12	
	ALBRIGHT, PERS	ING &	ASSOCIATES LTD.				
<ul> <li>The be</li> </ul>	ooks are in the care of   1025 RIDGEVIEW	DRIV	E, SUITE 300 - REN	O, NV	89519		
Teleph	none No. ► 775-826-5432		FAX No. ► 775-826-55	10			
• If the	organization does not have an office or place of busines	s in the Ur	nited States, check this box				
<ul><li>If this</li></ul>	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	f this is fo	r the whole group	o, check this	
box 🕨	If it is for part of the group, check this box	-					
1   re	quest an automatic 3-month (6 months for a corporation						
			tion return for the organization name		The extension		
ıs f	or the organization's return for						
	X calendar year 2011 or						
	tax year beginning	an	d ending				
	tax your boginning	, , u.,			<del>-</del> ·		
2 If ti	ne tax year entered in line 1 is for less than 12 months, o	chack rose	on Initial return	Fınal retur	'n		
	Change in accounting period	oncer reas	on initial return	i iiiai ietai	••		
_	Change in accounting period						
32 If +1	ore application is for Form 900 BL 900 BE 900 T 4700	or 6060 o	nter the tentative tay less and	<del></del>			
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentat			mer the tentative tax, less any	3a	_	0	
	nonrefundable credits. See instructions				\$	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.					\$	0.	
Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,						_	
	using EFTPS (Electronic Federal Tax Payment System)		<del>-</del>	3c	\$	0.	
	If you are going to make an electronic fund withdrawal		-	orm 8879-			
LHA F	or Privacy Act and Paperwork Reduction Act Notice	, see Instr	uctions.		Form <b>8868</b>	(Rev 1-2012)	