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Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

OMB No 1545-0047

<u> </u>	A F.		2012 calendar year, or tax year beginning JUL 1, 2011 and ending	JUN 30, 2012										
-														
E	3 Ch	eck if plicable	C Name of organization	D Employer identific	cation number									
			PROJECT REAL (FORMERLY FOUNDATION FOR											
		Address change	RELEVANT EDUCATION ABOUT THE LAW)											
		Name change	Doing Business As	43-2	<u>074467 </u>									
		Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/st	lite E Telephone number	,									
		Termin- ated	310 SOUTH FOURTH STREET	•	388-7527									
		Amende		G Gross receipts \$	276,850.									
		Ireturn Applica-												
		Ition pending			H(a) Is this a group return for affiliates?									
			F Name and address of principal officer SHANNON NORDSTROM		,									
-			310 SOUTH FOURTH ST., LAS VEGAS, NV 89101	H(b) Are all affiliates inc										
-				 1	list. (see instructions)									
			E ► WWW.PROJECTREALNV.ORG	H(c) Group exemption										
ļ				ear of formation: 2004 N	State of legal domicile: NV									
Į	Pa		Summary											
		1 B	Briefly describe the organization's mission or most significant activities: THE ORGA	NIZATION'S FO	UR MAIN									
	ğΙ	E	PROGRAMS HAVE THE FOLLOWING PURPOSES: (1) "F	OUNDATIONS OF	DEMOCRACY"									
	Ē	2 0	Check this box If the organization discontinued its operations or disposed of m	nore than 25% of its net as	sets									
	Š	3 N	lumber of voting members of the governing body (Part VI, line 1a)	3	7									
	ğ		lumber of independent voting members of the governing body (Part VI, line 1b)	4	7									
	8		otal number of individuals employed in calendar year 2012 (Part V, line 2a)	5	5									
	Activities & Governance		otal number of volunteers (estimate if necessary)	6	50									
	[≩	-		• —	0.									
	8		otal unrelated business revenue from Part VIII, column (C), line 12	7a 7b	0.									
•	\dashv	D IV	Net unrelated business taxable income from Form 990-T, line 34											
			Don't be to see and more to the Mill beautiful	Prior Year 106,337.	Current Year 271, 282.									
	의		Contributions and grants (Part VIII, line 1h)	100,337.										
	Revenue		Program service revenue (Part VIII, line 2g)		<u>0.</u> 5.									
~	æ	10 lr	nvestment income (Part-VIII, column (A), lines 3, 4, and 7d)	54.										
2013		11 (Other revenue (Part VIII, column (A), (1) 5 5 6 7 8 9 9 c, 10 c, and 11 e)	0.	5,563.									
			otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	106,391.	276,850.									
വ			Grants and similar amounts paid (Part IX, column (A), (1) \$ 1-3)	0.	0.									
$\boldsymbol{\Leftrightarrow}$			Benefits paid to or for nembers (Part IX, Column (A), Ine 4)	0.	0.									
MAR	es		Salaries, other compensation, employee benefits (Partix) column (A), lines 5-10)	106,786.	126,114.									
Ž	penses	16a F	Professional fundraising fees (Part IX Column (A) Fine 11e)	0.	0.									
	흋	ьT	Total fundraising expenses (Part IX, column (D), line 25)											
RAMED	Ψ	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	80,710.	104,336.									
4		18 T	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	187,496.	230,450.									
<<	l	19 F	Revenue less expenses. Subtract line 18 from line 12	-81,105.	46,400.									
CA	58			Beginning of Current Year	End of Year									
W	Assets or Balances	20 T	Fotal assets (Part X, line 16)	100,835.	121,810.									
	888		Fotal liabilities (Part X, line 26)	28,124.	2,699.									
	ESE ESE		Net assets or fund balances Subtract line 21 from line 20	72,711.	119,111.									
			Signature Block											
			ties of perjury, I declare that I have examined this return, including accompanying schedules and sta	stements, and to the hest of m	v knowledge and belief, it is									
		-	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep											
	1100,	T	A MA A A A A A A A A A A A A A A A A A	9 1 1	113									
	e:		Senature of officer	Date										
	Sigr		SHARON MCNAIR, TREASURER	**										
	Here	B	Type or print name and title											
				Date , Check	PTIN									
			Print/Type preparer's name Preparer's signature	-/14/12 f 5	'									
	Paid		MARK A. JOLLEY	self-emptoy										
		- F	Firm's name BRADSHAW, SMITH AND CO., LLP	/ Firm's EIN	88-0150455									
	use	Only	Firm's address 5851 W. CHARLESTON BLVD		700\ 070 0500									
			LAS VEGAS, NV 89146	Phone no. (702) 878-9788									
	May	the IR	S discuss this return with the preparer shown above? (see instructions)	· · · · · · · · · · · · · · · · · · ·	X Yes No									
	2320	01 12-10	D-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2012)									

232001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

PROJECT REAL (FORMERLY FOUNDATION FOR Form 990 (2012) 43-2074467 Page 2 RELEVANT EDUCATION ABOUT THE LAW) Part III Statement of Program Service Accomplishments X Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission: PROJECT REAL EDUCATES K-12 STUDENTS ABOUT THE PRINCIPLES OF DEMOCRACY, LAW, AND THE RESPONSIBILITIES OF CITIZENSHIP. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 43,590 _ including grants of \$) (Revenue \$) (Expenses \$ _ YOUR DAY IN COURT - CONTINUING AS ONE OF PROJECT REAL'S MOST POPULAR PROGRAMS, ALL AVAILABLE COURT TOUR DATES WERE RESERVED BY TEACHERS FOR BOTH CLARK AND WASHOE COUNTIES BY MID-OCTOBER. 84 TOURS WERE CONDUCTED IN STATE AND FEDERAL COURTS FOR 226 TEACHERS AND 4,626 MIDDLE SCHOOL, HIGH SCHOOL AND SOME COLLEGE STUDENTS. YOUR DAY IN COURT ALLOWS STUDENTS OF ALL AGES TO EXPERIENCE THE JUDICIAL SYSTEM FIRST-HAND IN A POSITIVE AND EDUCATIONAL FORMAT. 51,973. including grants of \$) (Revenue \$) (Expenses \$ PLAY BY THE RULES - WORK CONTINUED ON THE SOON TO BE RELEASED 2ND ENGLISH EDITION OF PLAY BY THE RULES - NEVADA LAWS FOR YOUTH AND THE 1ST SPANISH EDITION OF PLAY BY THE RULES - NEVADA LAWS FOR YOUTH. 90 SCHOOLS PARTICIPATING STATEWIDE, BY THE END OF JUNE 2012, 54,000 BOOKS HAD BEEN DISTRIBUTED TO STUDENTS SINCE THE INCEPTION OF THE PROGRAM IN 2009. PLAY BY THE RULES HELPS CHILDREN LEARN 200 PLUS NEVADA LAWS THAT PERTAIN TO THEIR DAILY LIVES AND THE CONSEQUENCES FOR BREAKING THOSE LAWS. 22,861 __ including grants of \$) (Revenue \$) (Expenses \$ REAL DRAMA - IN ADDITION TO OFFERING THE REAL DRAMA CURRICULUM AND PLAY TO AREA MIDDLE AND HIGH SCHOOLS AS PART OF THE SOCIAL STUDIES CLASSES, PROJECT REAL'S REAL DRAMA IT'S NONE OF YOUR BUSINESS...OR IS IT?, STUDY OF THE GOVERNMENT, PRIVACY AND YOU, WAS SELECTED BY THE NEVADA SUPREME COURT TO BE THE BASIS OF THEIR 2012 LAW DAY LIVE ACTIVITIES. OVER 10,000 STUDENTS THROUGHOUT THE STATE HAD THE OPPORTUNITY TO STUDY THE PRIVACY CURRICULUM AND STREAM THE PLAY THROUGH VEGAS PBS OR WATCH IT ON DVD.

Other program services (Describe in Schedule O)

4,007. including grants of \$

122,431. Total program service expenses

Form 990 (2012)

PROJECT REAL (FORMERLY FOUNDATION FOR RELEVANT EDUCATION ABOUT THE LAW)

	t IV Checklist of Required Schedules	40/	<u> </u>	age 3
· u	tra official of frequired confedence		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
•	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	dunng the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		ĺ	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	١		
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		^
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11c		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	110		1
a	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			†
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
19a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
120	Schedule D, Parts XI and XII	12a		X
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	The state of the s	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	1		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	ļ	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			1.
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	ـــ	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	- -	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	\vdash	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	+-	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	\bot	X

Form **990** (2012)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

RELEVANT EDUCATION ABOUT THE LAW) 43-2074467 Page 4 Form 990 (2012) Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the Х United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, X column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X Schedule K. If "No", go to line 25 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a X disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-EZ? If "Yes," complete Х 25b Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified X person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member X of any of these persons? If "Yes." complete Schedule L. Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28_a X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? 31 X If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 X Part V line 1

Form **990** (2012)

35a

35b

36

37

Х

X

X

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

If "Yes," complete Schedule R, Part V, line 2

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

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?

	PROJECT REAL (FORMERLY FOUNDATION FOR	467	_	=
	1990 (2012) RELEVANT EDUCATION ABOUT THE LAW 43-2074 rt V Statements Regarding Other IRS Filings and Tax Compliance	46/	P:	age 5
rai	Tt V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Check if Scriedule O contains a response to any question in this Part V			بيا
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b		5b		X
C	·	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		
a		7a_		X
		7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	🚚		v
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	-		-
e		7e 7f		
f		7g		
9		7 <u>9</u> 7h		 -
ь 8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	- '''-		
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	The state of the s	9a	-	-
-	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
О				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1	1	1
11	Section 501(c)(12) organizations. Enter	1		
a	Consequence Consequence and Associations			
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
_	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a]	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			

14b Form **990** (2012)

14a

X

a Is the organization licensed to issue qualified health plans in more than one state?

14a Did the organization receive any payments for indoor tanning services during the tax year?

organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

Note. See the instructions for additional information the organization must report on Schedule O **b** Enter the amount of reserves the organization is required to maintain by the states in which the

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2012)

RELEVANT EDUCATION ABOUT THE LAW)

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

	and the second s			
	Check if Schedule O contains a response to any question in this Part VI			X
<u>sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7			
	If there are material differences in voting rights among members of the governing body, or if the governing			,
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	_		
	officer, director, trustee, or key employee?	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	_3_		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u> </u>
6	Did the organization have members or stockholders?	6_		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		<u>X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	ĺ.		
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		-	
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			\Box
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		١.	
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►NV			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion:	• _	
	JANE JENSEN SAINT - 702-388-7527	_		
	310 SOUTH FOURTH STREET, LAS VEGAS, NV 89101			
23200	8	Form	990	(2012)

Form 990 (2012) Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) IRWIN MOLASKY	1.50								_	_
DIRECTOR		X	_		$ldsymbol{ldsymbol{ldsymbol{eta}}}$	_		0.	0.	0
(2) SAMUEL S. LIONEL	1.50	1								_
DIRECTOR/SECRETARY	4	X	<u> </u>	X	<u> </u>	ऻ_		0.	0.	0
(3) SHANNON NORDSTROM	1.50	l								_
DIRECTOR/PRESIDENT		X	ļ	X		 		0.	0.	0
(4) RICHARD MORGAN	1.50	١.,	į							_
DIRECTOR	1 50	X	\vdash					0.	0.	0
(5) SHARON MCNAIR	1.50			٠,					_	•
DIRECTOR/TREASURER	1.50	X		X	\vdash	├		0.	0.	0
(6) SCOTT COOK	1.50	$ \mathbf{x} $						0.	0.	0
DIRECTOR	1.50		\vdash		\vdash			0.	<u> </u>	<u> </u>
(7) GINA GENTLEMAN DIRECTOR	1.50	x						0.	0.	0
		_								
		_				-				
		ļ.,	ļ		<u> </u>	<u> </u>	-			
		-	_	_		ļ				
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		1	ļ			-				
		_	<u> </u>			<u> </u>				
		+								

232007 12-10-12

Par	VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	and	iH b	ghe	st C	ompensated Employe	es (continued)			
	(A)	(B)			(0	>)			(D)	(E)		(F)	
	Name and title	Average	Position (do not check more than one					one	Reportable	Reportable		timate	
		hours per week	box	, unle	ss pe	rson	s bot	han	compensation	compensation	1	nount other	-
		(list any	ă					Ė	from the	from related organizations	1	pensa	
		hours for	Individual trustee or director				bet		organization	(W-2/1099-MISC)	1	om th	
		related	stee	Insblutional trustee			Highest compensated employee		(W-2/1099-MISC)		1 -	anızat	
		organizations below	lag E	Bonal		Key employee	st com	_				d relat anızatı	
		line)	P P	nsttu	Officer	e er	Hope and be	Former			Joige	4111241	
			 	┢▔	<u> </u>	-	<u> </u>						
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			ł										
46	Sub sasal	I		<u> </u>		<u> </u>	_	<u> </u>	0.	0.	 		0.
	Sub-total . Total from continuation sheets to Part V	Il Section A							0.	0			0.
	Total (add lines 1b and 1c)	ii, Se ction A							0.	0			0.
2	Total number of individuals (including but r	ot limited to th	nose	liste	ed a	bov	e) wi	ho r	<u> </u>				
	compensation from the organization												0
												Yes	No
3	Did the organization list any former officer,			e, ke	у ег	mplo	оуее	, or	highest compensated e	mployee on			
	line 1a? If "Yes," complete Schedule J for s										3		X
4	For any individual listed on line 1a, is the si	-								the organization	-	ŀ	
_	and related organizations greater than \$15 Did any person listed on line 1a receive or			•						idual for conviose	4	-	X
5	rendered to the organization? If "Yes," con	•					-	Clai	ted organization or indiv	idual for services	5	1	Lx
Sec	tion B. Independent Contractors	ipioto combati									.1	·	
1	Complete this table for your five highest co	mpensated in	dep	ende	ent c	ont	racto	ors 1	that received more than	\$100,000 of compen	sation	from	
	the organization. Report compensation for	the calendar y	ear_	end	ıng v	vıth	or w	/ithii	n the organization's tax	year.			
	(A)				_				(B)		()	C)	
	Name and business	address	N	ON:	E			-	Description of s	services	Compe	risau	J11
								-					
				-							-		-
						·							
													_
									<u> </u>				
2	Total number of independent contractors (not l	ımıte	ed to		ose II O	ste	a above) who received r	nore tnan			
_	\$100,000 of compensation from the organ	ization -	-		-		U				Form	900	(2012)
23200 12-10	8										i VIIII	550	(2012)

PROJECT REAL (FORMERLY FOUNDATION FOR Form 990 (2012) RELEVANT EDUCATION ABOUT THE LAW) 43-2074467 Page 9 Part VIII Statement of Revenue

		Check ii Schedule O conta	allis a response t	o any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts, Grants Amounts	1 a b	Membership dues Fundraising events	1a 1b 1c					
Contributions, Gifts, Grants and Other Similar Amounts	d e f	Government grants (contributions) All other contributions, gifts, grant similar amounts not included above	ts, and /e 1f	68,298. 202,984. 5,676.			-	
등	g h	Noncash contributions included in lines Total. Add lines 1a-1f	ia-ir \$	<u> </u>	271,282.			, i
		TOTAL TITLE		Business Code				
Program Service Revenue	2 a b							
요림	С							
e a	d	L						
5	е							
م	f	All other program service reve	nue [ļ
	g	Total. Add lines 2a-2f		•	<u> </u>	-		
	3	Investment income (including	dividends, intere	st, and	_			i -
		other similar amounts)		. 🏲	5.			5.
	4	Income from investment of tax	k-exempt bond pi	roceeds				
	5	Royalties	() Deat	(3 Daniel	· · · · · · · · · · · · · · · · · · ·			
		Crass vents	(i) Real	(ii) Personal				
	6 a				_			
	b	•				,		
	C	Rental income or (loss)	\		,		'	_
		Net rental income or (loss) Gross amount from sales of	(i) Securities	(ii) Othor	·			
		assets other than inventory	(i) Securities	(ii) Other				: {
	D	Less: cost or other basis and sales expenses						,
	_	Gain or (loss)						
	d		<u> </u>				-	-
	Ω α	Gross income from fundraising	a events (not					
venue	0 4	including \$ contributions reported on line	of					
8		Part IV, line 18						}
Other Rev		Less direct expenses	a b		•			
δ		Net income or (loss) from fund	- •				* -	
		Gross income from gaming ac	-					
		Part IV, line 19	. a					
	ь	Less: direct expenses	. u					1
		Net income or (loss) from gam	ning activities		•	ļ		1
		Gross sales of inventory, less	_					
		and allowances	а	_		1		
	t	Less: cost of goods sold	b					
		Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenu		Business Code		_	v	***
	11 a	REFUNDS AND REI	MBURSEM	900099	5,563.	5,563.		
	t	o			· · · · · · · · · · · · · · · · · · ·			
	ď	·						
	ď	All other revenue						
	•	Total. Add lines 11a-11d			5,563.		ļ	
23200	12	Total revenue. See instructions.	<u>.</u>		276,850.	5,563.	0.	5 .

Form 990 (2012)

RELEVANT EDUCATION ABOUT THE LAW)

Part IX Statement of Functional Expenses

Check if Schedule O contains a responsible Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to governments and			3	remark
organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in				
the United States. See Part IV, line 22				
3 Grants and other assistance to governments,			1	•
organizations, and individuals outside the				
United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors,				
trustees, and key employees				
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	109,825.	59,075.	26,037.	24,713.
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	5,318.		5,318.	
10 Payroll taxes	10,971.	5,409.	3,493.	2,069.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	26,452.		26,452.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17		-		
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25,				200
column (A) amount, list line 11g expenses on Sch 0.)				200
12 Advertising and promotion	50.	50.		
13 Office expenses				
14 Information technology				
15 Royalties .	11 400	7 200	1 000	2,400
16 Occupancy	11,408.	7,200.	1,808.	2,400
17 Travel .		···		
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	777.	197.	467.	113
19 Conferences, conventions, and meetings	1110	137.	407.	
20 Interest				
21 Payments to affiliates	135.		135.	
22 Depreciation, depletion, and amortization 23 Insurance	1,854.		1,854.	
23 Insurance 24 Other expenses. Itemize expenses not covered	1,034.	· · ·	1,002.	
above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PRINTING & PRODUCTION O	23,061.	23,061.		
b LICENSING FEES	10,050.	10,000.	50.	
c PENALTIES & INTEREST	6,647.		6,647.	
d SUPPLIES	6,162.	3,759.	2,239.	164
e All other expenses	17,540.	13,680.	1,674.	2,186
25 Total functional expenses. Add lines 1 through 24e	230,450.	122,431.	76,174.	31,845
26 Joint costs. Complete this line only if the organization		· · · · · · · · · · · · · · · · · · ·		
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.				
Check here If following SOP 98-2 (ASC 958-720)				

Form 990 (2012)

Part X Balance Sheet

Part)	<u> </u>	Balance Sheet				
		Check if Schedule O contains a response to any question	ın this Part X	т	Т	
				(A) Beginning of year		(B) End of year
-	1	Cash - non-interest-bearing	L	84,942.	1	97,322
2	2	Savings and temporary cash investments		2		
3	3	Pledges and grants receivable, net		14,758.	3	23,488
4		Accounts receivable, net			4	
. ا	5	Loans and other receivables from current and former offic	ers, directors,			
		trustees, key employees, and highest compensated empl	oyees Complete			
ļ		Part II of Schedule L			5	
- 6	В	Loans and other receivables from other disqualified person	ns (as defined under			· · · · ·
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		i	
		employers and sponsoring organizations of section 501(c	1 1			
		employees' beneficiary organizations (see instr). Complete			6	
3 7	7	Notes and loans receivable, net			7	
Sapera Sapera	В	Inventories for sale or use			8	
- 1	9	Prepaid expenses and deferred charges	Ī	1,000.	9	1,000
10	0a	Land, buildings, and equipment: cost or other		<u> </u>		
		basis. Complete Part VI of Schedule D 10a	6,320.	_	İ	_
	ь	Less: accumulated depreciation 10b	6,320.	135.	10c	<u> </u>
1.	1	Investments - publicly traded securities			11	
12	2	Investments - other securities. See Part IV, line 11			12	
1;	3	Investments - program-related See Part IV, line 11	. [13	
14	4	Intangible assets		14		
15	5	Other assets. See Part IV, line 11	[15	
10	6	Total assets. Add lines 1 through 15 (must equal line 34)		100,835.	16	121,810
1	7	Accounts payable and accrued expenses		28,124.	17	2,699
11	8	Grants payable			18	
19	9	Deferred revenue			19	
2	0	Tax-exempt bond liabilities			20	
ဂ္ဂ 2	1	Escrow or custodial account liability. Complete Part IV of	Schedule D		21	
[2	2	Loans and other payables to current and former officers,	directors, trustees,			
		key employees, highest compensated employees, and di	squalified persons.	_		
-		Complete Part II of Schedule L			22	
2	3	Secured mortgages and notes payable to unrelated third	parties		23	·
2	4	Unsecured notes and loans payable to unrelated third pa	rties		24	
2	5	Other liabilities (including federal income tax, payables to				
		parties, and other liabilities not included on lines 17-24)	Complete Part X of			
		Schedule D			25	
2	6	Total liabilities. Add lines 17 through 25		28,124.	26	2,699
		Organizations that follow SFAS 117 (ASC 958), check	here ▶ 🐰 and	:		
Net Assets or Fund Balances		complete lines 27 through 29, and lines 33 and 34.				64 280
ğ 2	7	Unrestricted net assets		1,788.		61,378
	8	Temporanly restricted net assets	-	70,923.	28	57,733
2	9	Permanently restricted net assets			29	
2		Organizations that do not follow SFAS 117 (ASC 958),	check here ▶∟			
ğ		and complete lines 30 through 34.				
ກິ 3	Ю	Capital stock or trust principal, or current funds	<u> </u>		30	
ğ 3	11	Paid-in or capital surplus, or land, building, or equipment			31	
를 3	2	Retained earnings, endowment, accumulated income, or	other funds		32	110 111
3	13	Total net assets or fund balances		72,711.	33	119,111
3	4_	Total liabilities and net assets/fund balances		100,835.	34	121,810 Form 990 (201

Form	PROJECT REAL (FORMERLY FOUNDATION FOR RELEVANT EDUCATION ABOUT THE LAW)	43-207446	. <u>7</u> 1	⊳ _{age} 12
Pa	rt XI Reconciliation of Net Assets			<u>-</u>
	Check if Schedule O contains a response to any question in this Part XI			
	· ·	1 -		
1	Total revenue (must equal Part VIII, column (A), line 12)			<u>850.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2 2		<u>450.</u>
3	Revenue less expenses Subtract line 2 from line 1	3		<u>400.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u>72,</u>	<u>711.</u>
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities .	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10 1	19,	111.
Pa	rt XII Financial Statements and Reporting			
·	Check if Schedule O contains a response to any question in this Part XII			
			Ye	s No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2	a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis	i		
b		2	ь	~ X
-	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat			
	consolidated basis, or both:	·		

Both consolidated and separate basis

Form 990 (2012)

X

2c

3a

Separate basis

Act and OMB Circular A-133?

Consolidated basis

review, or compilation of its financial statements and selection of an independent accountant?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

2012

2012

Open to Public Inspection

Name of t	he organization		REAL (FORME				FOR	E		identificati 3 <u>- 2 0 7 4</u>		nber
Part I	Reason f		T EDUCATION ty Status (All organize) See inst	ructions	4.	3-20/4	40/	
						-		uctions.				
		-	pecause it is: (For lines 1 , or association of churc									
1	•		•		ibeu ili se i	ction 170	(Б)(Т)(А)(Т).	•				
2			0(b)(1)(A)(ii). (Attach Sci			470/5\/4\/	AVIII					
3			al service organization o					LV4VAV::	::\ Entort	the becatal	'e nam	
4 📖		-	perated in conjunction	with a nos	pitai uesci	ibeu iii se	ction 170	идади да	ii). Ciilei i	ille Hospital	SHalli	σ,
	city, and state		penefit of a college or ur	an contract	upod or op	aratad by	a governo	nontal uni	t docomb	od in		
5	_	(b)(1)(A)(iv). (Comple	=	iiversity ov	vileu oi op	erated by	a governi	ilentai uni	t describ	ea iii		
e 🗀			ent or governmental unit	t describer	t in soction	- 170/b\/1	VAVA					
6 L		· -	eives a substantial part					r from the	general	nublic desc	rihad ii	n
7 LXJ	_	b)(1)(A)(vi). (Complet		or its supp	oit iioiii a	governine	mai umi o	1 110111 1116	gonorar	public desc	ibou ii	
• 🗀	-		ection 170(b)(1)(A)(vi). ((Complete	Part II \							
9 🗔	•		eives (1) more than 33 1			om contri	hutions m	emhershi	n fees a	nd aross rea	ceints f	from
9	-	•	ections - subject to certa									
			axable income (less sect									
		509(a)(2). (Complete	•		,,			, 3-			-,	
10 🗔			perated exclusively to te	st for publ	c safety S	ee sectio	n 509(a)(4	٠).				
11	•	•	erated exclusively for th	•	-			-	y out the	purposes o	f one o	or
	_		tions described in section									
	describes the	type of supporting	organization and compl	ete lines 1	1e through	11h.						
	a Type I	ь 🔲 ту	rpe II c 🔙 T	ype III - Fu	nctionally i	ntegrated	d	∣ 🗀 Тур	e III - Noi	n-functional	y integ	yrated
e 🗔	By checking t	this box, I certify tha	t the organization is not	controlled	directly or	ndirectly	by one or	more dis	qualified	persons oth	er than	n
	foundation m	anagers and other t	han one or more publicly	y supporte	d organiza	tions desc	cribed in s	ection 509	9(a)(1) or	section 509	(a)(2).	
f	If the organization	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	III				_
	supporting or	rganization, check th	nis box									
g	•	· ·	rganization accepted ar			-						
		•	irectly controls, either al	lone or tog	ether with	persons o	lescribed i	n (ii) and ((III) below		Yes	No
	•	4 -	upported organization?							11g(i)		<u> </u>
		•	n described in (i) above?				-			11g(ii)	\vdash	├
		-	person described in (i)							11g(iii)	L	L
h	Provide the fo	ollowing information	about the supported or	ganization	(S).							
			T	(iv) lo the	organization	(u) Did vo	u notificatho	(vi) ls	s the			
	of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9		sted in your			Lorganizati	on in col.	(vii) Amoun		netary
Of G a	anization		above or IRC section	governing	document?	(i) of you	r support?	(i) organiz U.S	2eu iii uie 5.?	Sup	port	
			(see instructions))	Yes	No	Yes	No	Yes	No	İ		
								ĺ				
	<u> </u>			 	 		 			-		
				ļ			ļ <u>.</u>		ļ			
 -				-	 	<u> </u>				-		
Total					<u> </u>							

232021 12-04-12 Schedule A (Form 990 or 990-EZ) 2012

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

PROJECT REAL (FORMERLY FOUNDATION FOR

Schedule A (Form 990 or 990-EZ) 2012 RELEVANT EDUCATION ABOUT THE LAW)

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	307,927.	284,449.	282,252.	106,390.	271,282.	1,252,300.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	307,927.	284,449.	282,252.	106,390.	271,282.	1,252,300,
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly	~					
	supported organization) included	e .			-		
	on line 1 that exceeds 2% of the				,		
	amount shown on line 11,					_	
	column (f)		"		v	,	445,853.
6	Public support. Subtract line 5 from line 4						806,447.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	307,927.	284,449.	282,252.		271,282.	1,252,300.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carned on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						1,252,300.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and stor	here .					▶□_
	ction C. Computation of Publ					r=	
14	Public support percentage for 2012 (line 6, column (f) di	ivided by line 11, o	column (f))		14	<u>64.40 %</u>
	Public support percentage from 2011	· ·	•			15	46.16 %
16a	33 1/3% support test - 2012. If the o				14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies		-	• •			►X
b	33 1/3% support test - 2011. If the	organization did no	t check a box on i	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	fies as a publicly s	supported organization	ation			
17a	10% -facts-and-circumstances tes	-					· ·
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	nere. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"	_	<u>-</u>		•		▶∟
t	10% -facts-and-circumstances tes	•				•	
	more, and if the organization meets the				-		,
	organization meets the "facts-and-cire		-	-		•	▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16	<u>a, 16b, 17a, or 17l</u>	b, check this box a	ind see instruction	s D
					Sche	edule A (Form 990	or 990-EZ) 2012

232022 12-04-12

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	low, please comp	piete Part II.)			· ·· · · · · · · · · · · · · · · · · ·				
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")									
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose									
3	Gross receipts from activities that are not an unrelated trade or business under section 513									
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf									
5	The value of services or facilities furnished by a governmental unit to the organization without charge									
6	Total. Add lines 1 through 5									
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons									
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year									
c	: Add lines 7a and 7b									
	Public support (Subtract line 7c from line 6) ction B. Total Support	· · · · · · · · · · · · · · · · · · ·			<u></u>					
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
	Amounts from line 6									
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources									
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975									
	: Add lines 10a and 10b					-				
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on									
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)									
	Total support. (Add lines 9, 10c, 11, and 12)		<u> </u>	L		1	l			
14	First five years. If the Form 990 is for	the organization	's first, second, thi	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3) organi	zation,			
_	check this box and stop here			<u> </u>			. ▶			
	ction C. Computation of Publ									
	Public support percentage for 2012 (I			column (f))		15	%			
	Public support percentage from 2011			· · ·		16	%			
	ction D. Computation of Inves					T.=1				
17	Investment income percentage for 20			ne 13, column (f))		17	%			
18	, c					18	<u>%</u>			
19	a 33 1/3% support tests - 2012. If the						1 / is not			
	more than 33 1/3%, check this box as 33 1/3% support tests - 2011. If the	-	-				▶ ∟l and			
'	- •	=					. —			
20	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation if the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions									
	20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions									

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2012
Open to Public Inspection

Name of the organization

PROJECT REAL (FORMERLY FOUNDATION FOR RELEVANT EDUCATION ABOUT THE LAW)

Employer identification number 43-2074467

Par	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	rised funds
	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor	advisors in writing that grant funds can b	e used only
	for charitable purposes and not for the benefit of the donor	• •	-
	impermissible private benefit?		Yes No
Par	rt II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply)	
	Preservation of land for public use (e.g., recreation or	education) Preservation of an h	istorically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the form	n of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	cture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by t	he organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located	_
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling o	f
	violations, and enforcement of the conservation easements	rt holds?	└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, inspecting, and	l enforcing conservation easements durir	ng the year > \$
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 17	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		L Yes L No
9	in Part XIII, describe how the organization reports conserva	tion easements in its revenue and expen-	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describe	es the organization's accounting for
	conservation easements.	44.40.4	
Pa	rt III Organizations Maintaining Collections	•	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A	•	
	historical treasures, or other similar assets held for public ex	· · · · · · · · · · · · · · · · · · ·	rance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that desc		
b	If the organization elected, as permitted under SFAS 116 (A	•	
	treasures, or other similar assets held for public exhibition,	education, or research in furtherance of p	public service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		. \$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical tr		cial gain, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
а			. \$
b	Assets included in Form 990, Part X		. • \$

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

Schedule D (Form 990) 2012

PROJECT REAL (FORMERLY FOUNDATION FOR

Sche		T EDUCATIO				or Oth		43-20			ege 2
3											
٠	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):							S			
а	Public exhibition	d		an or evo	hange progra	ame					
b	Scholarly research	e		ther	nange progra	21115					
	Preservation for future generations	e							 -		
C 4		alloctions and system	n haw tha	G adda a a a Al	ha aa-			D	. VIII		
4	Provide a description of the organization's co							ose in Par	t XIII.		
5	During the year, did the organization solicit o					er sımıla	r assets		٦	_	1
Par	t IV Escrow and Custodial Arrane					***			Yes		No
: ai	t IV Escrow and Custodial Arranger reported an amount on Form 990, Par		ete if the o	rganizatio	n answered	"Yes" to	Form 990	, Part IV, I	ine 9, or		
4-											
та	Is the organization an agent, trustee, custodi	an or other intermed	liary for co	ontribution	is or other as	sets not	included	_	٦		1
	on Form 990, Part X?							L_	」Yes	L	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing tat	ble:							
									Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year		•		•		1e				
f	Ending balance						1f		-	-	
									Yes		No
	If "Yes," explain the arrangement in Part XIII										<u> </u>
Par	t V Endowment Funds. Complete	f the organization ar	swered "Y	es" to Fo	rm 990, Part	IV, line 1	10.				
		(a) Current year	(b) Pro	or year	(c) Two year	rs back	(d) Three	ears back	(e) Four	years	back
1a	Beginning of year balance				_						
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs	_									
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	rent year end baland	e (line 1g,	column (a	a)) held as:						
а	Board designated or quasi-endowment	·	%								
b	Permanent endowment	%	_								
С	Temporarily restricted endowment ▶	 %									
	The percentages in lines 2a, 2b, and 2c shou	uld equal 100%									
За	Are there endowment funds not in the posse		ation that	are held a	nd administe	red for t	he organi	zation			
	by.	J							Г	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations		•				•		3a(ii)	$\neg \uparrow$	
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedu	le R?	•				3b	\neg	
4	Describe in Part XIII the intended uses of the				••		•		<u> </u>		
Par							-				
	Description of property	(a) Cost or o			or other	(c) A	ccumulate	ed	(d) Book	value	
		basis (investr			(other)	٠,	preciation		(u) Doon	. value	,
12	Land	, ,			· - ′ -				·		
	Buildings										
	Leasehold improvements										
d	Equipment										
	Other				6,320.		6,3	20			0.
	Add lines 1a through 1e (Column (d) must e	aual Form 990 Part	Y column	/P) /roo 1			<u> </u>	20.			~

Schedule D (Form 990) 2012

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

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2012

(10) (11)

PROJECT REAL (FORMERLY FOUNDATION FOR RELEVANT EDUCATION ABOUT THE LAW 43-2074467 Page 4 Schedule D (Form 990) 2012 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2<u>a</u> Net unrealized gains on investments Donated services and use of facilities 2b c Recoveries of prior year grants 2c Other (Describe in Part XIII.) 2d Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1. Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) c Add lines 4a and 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities 2a **b** Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII.) 2d Add lines 2a through 2d Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1. Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 Part XIII Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) 2012

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

omplete to provide information for responses to specific questions or Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ. 2012
Open to Public Inspection

Name of the organization

PROJECT REAL (FORMERLY FOUNDATION FOR RELEVANT EDUCATION ABOUT THE LAW)

Employer identification number 43-2074467

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
IS SPECIFICALLY TARGETED AT ELEMENTARY SCHOOL AGED CHILDREN TO TEACH
BASIC PRINCIPLES OF LIVING IN A DEMOCRATIC SOCIETY: (2) "YOUR DAY IN
COURT" SPONSORS TOURS TO THE US DISTRICT COURT AND STATE COURT FOR 5TH
TO 12TH GRADE STUDENTS; (3) "REAL DRAMA" TEACHES MIDDLE AND HIGH SCHOOL
STUDENTS ABOUT RELEVANT AND CONTROVERSIAL SUBJECTS THROUGH THE MEDIUM
OF DRAMA; (4) "PLAY BY THE RULES" UTILIZES TEAMS OF TEACHERS AND LAW
ENFORCEMENT OFFICERS TO PRESENT NEVADA LAW TO MIDDLE SCHOOL STUDENTS.
ALL PROGRAMS ARE OFFERED AT NO COST TO ANY SCHOOL IN NEVADA THAT
DESIRES TO INCORPORATE PROJECT REAL'S PROGRAMMING INTO THEIR
CURRICULUM.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
FOUNDATIONS OF DEMOCRACY AND OTHER PROGRAMS
EXPENSES \$ 4,007. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION B, LINE 11: THE BOARD TREASURER REVIEWS THE 990
IN DETAIL WITH THE PREPARER BEFORE SUBMISSION TO THE BOARD OF DIRECTORS AND
IRS. THE BOARD TREASURER PRESENTS THE FORM 990 TO THE BOARD OF DIRECTORS
FOR THEIR REVIEW AND APPROVAL PRIOR TO ITS FINAL SUBMISSION.
FORM 990, PART VI, SECTION B, LINE 12C: AT THE BEGINNING OF THE NEW FISCAL
YEAR BOARD AND STAFF SIGN CONFLICT OF INTEREST STATEMENTS.
FORM 990, PART VI, SECTION B, LINE 15: THE BOARD PRESIDENT SHALL CONDUCT

ANNUAL PERFORMANCE REVIEWS OF THE EXECUTIVE DIRECTOR. PERFORMANCE

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

232211 01-04-13 Schedule O (Form 990 or 990-EZ) (2012)

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

Form 8868 (Rev. 1-2012)

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box						ightharpoons		
• If	you are filing for an Additional (Not Automatic) 3-Month Ext	tension, d	complete only Part II (on page 2 of	this form).				
Do п	ot complete Part II unless you have already been granted a	an automa	atic 3-month extension on a previous	sly filed Fo	rm 8868.			
Elec	tronic filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tin	ne to file (6 months for a co	rporation		
requ	red to file Form 990-T), or an additional (not automatic) 3-mor	nth extens	sion of time. You can electronically fi	ile Form 8	868 to request an	extension		
	ne to file any of the forms listed in Part I or Part II with the exc		-					
Pers	onal Benefit Contracts, which must be sent to the IRS in paper	er format	(see instructions). For more details of	on the elec	ctronic filing of thi	s form,		
	www.irs.gov/efile and click on e-file for Chanties & Nonprofits.		,		Ū	•		
Pa		_	submit original (no copies ne	eded).				
A co	rporation required to file Form 990-T and requesting an autom	natic 6-mc	onth extension - check this box and	complete				
	l only			•				
All of	her corporations (including 1120-C filers), partnerships, REMI	ICs, and to	rusts must use Form 7004 to reques	t an exten	sion of time	-		
	ncome tax returns.	,						
Туре	or Name of exempt organization or other filer, see instruc	ctions.		Employe	r identification nu	mber (EIN) or		
print	1		ON FOR		dontineation number (Ent) or			
	RELEVANT EDUCATION ABOUT TH		_	X	43-20744	4467		
File by due da	the Number street and some action as 16 a D.O. have			Social security number (SSN)				
filing y	our 310 SOUTH FOURTH STREET				oum, named (or	5.1,		
return Instruc	369	reign add	ress, see instructions		,,			
	LAS VEGAS, NV 89101							
	, ====							
Ente	the Return code for the return that this application is for (file	a separat	te application for each return)			0 1		
	the second secon	шоорша	to application for dadin rotally			<u> </u>		
Appl	ication	Return	Application					
's Fo		Code	is For	Return Code				
-	990	01	Form 990-T (corporation)	07				
	990·BL	02	Form 1041-A		08			
	990-EZ	01	Form 4720			09		
	990-PF	04	Form 5227			10		
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
	990-T (trust other than above)	06	Form 8870	12				
	JANE JENSEN SAI	NT						
• T}	ne books are in the care of 310 SOUTH FOURT		REET - LAS VEGAS.	NV 89	101			
	elephone No. ► 702-388-7527		FAX No.					
	the organization does not have an office or place of business	in the Un						
	this is for a Group Return, enter the organization's four digit G		·	f this is fo	r the whole group	check this		
	▶ . If it is for part of the group, check this box ▶		· · · · · · · · · · · · · · · · · · ·					
	I request an automatic 3-month (6 months for a corporation				OID LING OXIONOION	10 101.		
	FEBRUARY 15, 2013 , to file the exempt				The extension			
	is for the organization's return for:	J		, a abovo.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	calendar year or							
	▶ X tax year beginning JUL 1, 2011	. an	d ending <u>JUN 30, 2012</u>					
				·	 •			
2	If the tax year entered in line 1 is for less than 12 months, ch	neck reaso	on: Initial return I	Final retur	n			
_	Change in accounting period	ioon road		i iriai ietui	rı			
	onlings in accounting period							
3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	r 6069 e	nter the tentative tax less any					
nonrefundable credits. See instructions.			,,					
b If this application is for Form 990-PF, 990-T, 4720, or 6069,			3a \$					
estimated tax payments made. Include any prior year overp.				26	s	0.		
	Balance due. Subtract line 3b from line 3a. Include your pay			3b	7	<u> </u>		
<i>.</i>	by using EFTPS (Electronic Federal Tax Payment System). S		•	2-	e	0.		
	ion. If you are going to make an electronic fund withdrawal w			3c	EO for pourset :-			
<u></u>	ion , are going to make an electronic fand mitidiawal w	141 HIS I'C	Ann COOC, SEE I ONN CHOOSE O AND FL	71111 001 5	LO IOI PAYITIENT IT	เอเเนษแบทรู.		

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