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Form **990-PF** Department of the Treasury internal Revenue Service

EXTENDED TO NOVEMBER 15, 20 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www. IS gov/fbm 990pf.

| For | <u>calèr</u> | idar year 2015 or tax year begin | ning | | , and ending | | |
|------------------------|--------------|---|-----------------------------|------------------------------|---------------------|--|---|
| Na | me of | foundation | | | | A Employer identification | number |
| N | EV. | ADA BAR FOUNDAI | TION | | | 88-0399023 | |
| Nur | nber a | and street (or P O box number if mail is | not delivered to street | address) | Room/suite | B Telephone number | |
| 3 | 10 | 0 WEST CHARLEST | ON BLVD | | | 702-317-14 | 05 |
| Cit | y or to | own, state or province, country, a | ind ZIP or foreign p | ostal code | | C If exemption application is p | |
| | | VEGAS, NV 891 | | | | , | g , |
| G (| Check | all that apply: Initial | return | Initial return of a fo | rmer public charity | D 1. Foreign organizations | s, check here |
| | | Final r | return | Amended return | | | , |
| | | Addre | ss change | Name change | | 2 Foreign organizations me check here and attach co | eting the 85% test, mputation |
| H (| Check | type of organization: X S | Section 501(c)(3) ex | empt private foundation | | E If private foundation sta | |
| |] Se | ction 4947(a)(1) nonexempt chai | ritable trust | Other taxable private founda | ition | under section 507(b)(1) | |
| I Fa | air ma | arket value of all assets at end of y | year J Accounti | ng method: Cash | X Accrual | F If the foundation is in a | 60-month termination |
| (fi | rom I | Part II, col. (c), line 16) | | her (specify) | | under section 507(b)(1) | |
| | \$ | | | mn (d) must be on cash t | oasis) | | |
| Pa | art I | Analysis of Revenue and Expe (The total of amounts in columns (b), | nses (c) and (d) may not | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements for charitable purposes |
| 2016 | | necessarily equal the amounts in col | umn (a)) | expenses per books | ıncome | income | (cash basis only) |
| 7 | 1 | Contributions, gifts, grants, etc., | , received | 2,861,084. | | | |
| ေ | 2 | Check if the foundation is not re | quired to attach Sch B | | | | |
| Θ | 3 | Interest on savings and temporary cash investments | | 370. | 370. | 370. | STATEMENT 1 |
| E | 4 | Dividends and interest from seco | urities | | | | |
| | 5a | Gross rents | | | | | |
| 7 | b | Net rental income or (loss) | | | | | |
| 氢虫 | 6a | Net gain or (loss) from sale of assets n Gross sales price for all | | -299. | 1-144 | | |
| Z Z | _b | assets on line 6a | <u> 068,000.</u> | | | | |
| SCARRED DEC Revenue | 7 | Capital gain net income (from Part IV, | line 2) | | 0. | | |
| W) | 8 | Net short-term capital gain | | | | | |
| | 19 | Income modifications Gross sales less returns | | | ···· | ****** | |
| | 10a | | | | | | |
| | 1 | Cross profit or (loss) | | | | | *************************************** |
| | 11 | Gross profit or (loss) Other income | | | | | |
| | 12 | Total Add lines 1 through 11 | | 2,861,155. | 370. | 370. | |
| | 13 | Compensation of officers, directors, tr | rustana eta | 0. | 0. | 0. | 0. |
| | 14 | Other employee salaries and war | · | - 0. | <u> </u> | | <u> </u> |
| | 15 | Pension plans, employee benefit | • | | | | · · · · · · · · · · · · · · · · · · · |
| es | 162 | Legal fees | | | * * | | |
| ě | Ь | Accounting fees | STMT 2 | 12,220. | 0. | 0. | 0. |
| Administrative Expens | C | Other professional fees. | STMT-3 | 45,095. | 0. | 0. | 0. |
| Š | 17 | Interest REC | jelveu | 2 | | | |
| rati | 18 | Taxes | h 40.00 | 384. | | | |
| nist | 19 | Depreciation and depletion OV | 8 0 2015 | 384. | 0. | 0. | |
| Ē | 20 | Occupancy 💆 | | <u>e</u> | | | |
| Ψ | 1 | Travel, conferences, and meetin | PSEN UT | 4,640. | 0. | 0. | 0. |
| and | 22 | Printing and publications | المريد مسيد مسيد | - | | | |
| <u>6</u> | 23 | Other expenses | STMT 4 | 19,914. | 100. | 100. | 0. |
| rati | 24 | Total operating and administra | | | | | |
| Operating | | expenses. Add lines 13 through | | 82, 253. | 100. | <u> </u> | |
| J | 25 | Contributions, gifts, grants paid | | 2,942,055. | | | 2,942,055. |
| | 26 | Total expenses and disbursem | ents. | 2 204 222 | 4 6 5 | | |
| _ | 6- | Add lines 24 and 25 | | 3,024,308. | 100. | 100. | 2,942,055. |
| | 27 | Subtract line 26 from line 12: | | 162 453 | | | _ |
| | Ι. | Excess of revenue over expenses and | | -163,153. | 070 | | |
| | 1 | Net investment income (if negative | | | 270. | 270. | |
| 5235 11-2 | 01 01 | Adjusted net income (if negative, LHA For Paperwork Reduction | | inetructions | | <u> </u> | Form 990-PF (2015) |
| 11-2 | 4-15 | I OI Lahelmaik Denaciii | on Aut Munice, 566 | เกอนขอนบทอิ. | | | FUHI 330-FF (2015) |

| For | m <u>9</u> 9 | 0-PF (2015) NEVADA BAR FOUNDATION | | 88- | 0399023 Page 2 |
|--------------------------------|--------------|--|-------------------|----------------|---------------------------|
| D | art | Balance Sheets Attached schedules and amounts in the description column should be for end of wear amounts only | Beginning of year | End o | |
| | ai t | Datance Streets column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1` | Cash - non-interest-bearing | 1,135,520. | 4,275,100. | 4,275,100. |
| | 2 | Savings and temporary cash investments | | | |
| | 3 | Accounts receivable ► 396,969. | | | |
| | | Less: allowance for doubtful accounts ▶ | 1,031,658. | 396,969. | 396,969. |
| | 4 | Pledges receivable ▶ | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons | | | |
| | 7 | Other notes and loans receivable | | | |
| | | Less: allowance for doubtful accounts | | | |
| ts | 8 | Inventories for sale or use | | | |
| Assets | ı | Prepaid expenses and deferred charges | | 3,620. | 3,620. |
| ∢ | 10a | Investments - U.S. and state government obligations | 2,499,992. | | |
| | Ь | Investments - corporate stock | | | |
| | C | Investments - corporate bonds | | | |
| | 11 | Investments - land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation | | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other | | | |
| | 14 | Land, buildings, and equipment: basis 11,513. | | | |
| | | Less accumulated depreciation STMT 7 ► 6,080. | 5,817. | 5,433. | 5,433. |
| | | Other assets (describe ►) | | | |
| | 16 | Total assets (to be completed by all filers - see the | 4 450 005 | 1 604 400 | |
| _ | | instructions. Also, see page 1, item I) | 4,672,987. | 4,681,122. | 4,681,122. |
| | | Accounts payable and accrued expenses | 842. | 925. | |
| | I | Grants payable | 2,942,055. | 3,041,574. | |
| ies | | Deferred revenue | | | |
| Liabilities | I | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Lial | | Mortgages and other notes payable | | | |
| | 22 | Other liabilities (describe) | | | |
| | 00 | Table 12-billion (add loses 47 through 99) | 2,942,897. | 3,042,499. | |
| | 23 | Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here | 4,344,031. | 3,044,433. | |
| | | • | | | |
| S | 0.4 | and complete lines 24 through 26 and lines 30 and 31. | 1,232,915. | 1,135,639. | |
| Š | 24 | Unrestricted | 28,849. | 224,458. | |
| 3ala | 25 26 | Temporarily restricted Permanently restricted | 468,326. | 278,526. | |
| Assets or Fund Balances | 20 | Foundations that do not follow SFAS 117, check here | 400,520. | 270,320. | |
| Ē | | and complete lines 27 through 31. | | | |
| 9 | 27 | Capital stock, trust principal, or current funds | | | |
| ets | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | 1 |
| Ass | 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| Net. | 30 | Total net assets or fund balances | 1,730,090. | 1,638,623. | |
| Z | " | - Star Hot about of faile balanoo | | | |
| | 31 | Total liabilities and net assets/fund balances | 4,672,987. | 4,681,122. | |
| | | | | | · |
| <u> </u> | art | III Alialysis of Changes III Net Assets of Fund Da | | | |
| _1_ | Tota | l net assets or fund balances at beginning of year = Part II, column (a), line 3 | 30 | | |
| | • | st agree with end-of-year figure reported on prior year's return) | | 1 | 1,730,090. |
| | | r amount from Part I, line 27a | | 2 | -163,153. |
| 3 | | r increases not included in line 2 (itemize) | SEE STA | ATEMENT 5 3 | 171,205. |
| 4 | | lines 1, 2, and 3 | | 4 | 1,738,142. |
| 5 | | eases not included in line 2 (itemize) | | ATEMENT 6 5 | 99,519. |
| <u>6</u> | Tota | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col | umn (b), line 30 | | 1,638,623. |
| | | • | | | Form 990-PF (2015) |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Form **990-PF** (2015)

1,794,063.

2,942,055.

7

8

Add lines 5 and 6

Enter qualifying distributions from Part XII, line 4

| | 990-PF (2015) NEVADA BAR FOUNDATION 88-0 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s | 39902: see instr | | Page 4 |
|----|--|---------------------|--------------|--------------|
| 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 X and enter 1% | | | <u>3.</u> |
| | of Part I, line 27b | | _ | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | _ | 0. |
| 3 | Add lines 1 and 2 | | | 3. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | | 3. |
| 6 | Credits/Payments: | | | |
| а | 2015 estimated tax payments and 2014 overpayment credited to 2015 | | | |
| | Exempt foreign organizations - tax withheld at source | | | |
| | Tax paid with application for extension of time to file (Form 8868) | | | |
| | Backup withholding erroneously withheld | | | • |
| | Total credits and payments. Add lines 6a through 6d | | | 0. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 | · | | |
| | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | <u>3.</u> |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| | Enter the amount of line 10 to be: Credited to 2016 estimated tax ► Refunded ► 11 rt VII-A Statements Regarding Activities | | | |
| | | | Yes | No |
| 12 | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | | 1 65 | |
| L | any political campaign? | 1 <u>a</u> | + | X |
| | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? | <u>1b</u> | + | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities | | | |
| | Did the foundation file Form 1120-POL for this year? | 10 | | X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | 10 | | |
| | (1) On the foundation. \$\Bigs\\$ 0. (2) On foundation managers. \$\Bigs\\$ 0. | | | |
| | 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, or | | İ | ì |
| - | 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? | A 4b | | |
| | 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: | | 1 | 1 |
| | By language in the governing instrument, or | | ļ | } |
| | 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 | <u> </u> |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | 7 | X | |
| | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | 1 |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | |
| | of each state as required by General Instruction G? If "No," attach explanation | 8b | X | <u> </u> |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar | | | T |
| | year 2015 or the taxable year-beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV | 9 | X | |
| 10 | | 8 10 | Х | |
| | | Form 9 9 | 90-PF | (2015) |

| Part VII-A | Statements Regarding Activities (continued) | | | | | | | |
|---------------|--|----------------|--------------|------------|--|--|--|--|
| | | | Yes | No | | | | |
| 11 At any tim | e during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | | | | | |
| section 5 | 12(b)(13)? If "Yes," attach schedule (see instructions) | 11 | ļ | <u>X</u> _ | | | | |
| 12 Did the fo | undation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | | | | | |
| If "Yes," a | ttach statement (see instructions) | 12 | X | <u>X</u> | | | | |
| 13 Did the fo | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | | | | | | | |
| Website a | ddress ► <u>WWW.NVBAR.ORG</u> | | | | | | | |
| | s are in care of ▶ <u>MARC_MERSOL</u> Telephone no. ▶ <u>702-3</u> | | | | | | | |
| Located a | t ▶ 3100 W CHARLESTON BLVD., LAS VEGAS, NV ZIP+4 ▶8 | 9102 | | | | | | |
| 15 Section 4 | 947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | | | | | | |
| and enter | the amount of tax-exempt interest received or accrued during the year | N | I/A | | | | | |
| 16 At any tin | ne during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | | | | | |
| | , or other financial account in a foreign country? | 16 | <u> </u> | <u>X</u> _ | | | | |
| See the in | structions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | 1 | | | | | | |
| foreign co | | | | | | | | |
| | Statements Regarding Activities for Which Form 4720 May Be Required | | Ts. 2 | | | | | |
| | m 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No | | | | |
| | e year did the foundation (either directly or indirectly): | ļ | | | | | | |
| | ge in the sale or exchange, or leasing of property with a disqualified person? | | | | | | | |
| | ow money from, lend money to, or otherwise extend credit to (or accept it from) | | | | | | | |
| | qualified person? Yes X No | | | | | | | |
| | ish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | | | | | | | |
| • • | compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No | | | | | | | |
| , , | sfer any income or assets to a disqualified person (or make any of either available ne benefit or use of a disqualified person)? Yes X No | | | | | | | |
| | | | | | | | | |
| | e to pay money or property to a government official? (Exception Check "No" | İ | 1 1 | | | | | |
| | foundation agreed to make a grant to or to employ the official for a period after ination of government service, if terminating within 90 days.) Yes X No | | | | | | | |
| | | | | | | | | |
| | swer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 41 | | | | | | |
| | 3.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | - | | | | | |
| _ | nions relying on a current notice regarding disaster assistance check here | | | | | | | |
| | oundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | 4. | | х | | | | |
| | e first day of the tax year beginning in 2015? | 1c | | | | | | |
| | failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation a section 4942(j)(3) or 4942(j)(5)); | - | | | | | | |
| | d of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | - | | | | | | |
| before 20 | | İ | | | | | | |
| | THE STATE OF THE S | | | | | | | |
| | any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | | | | | |
| | of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | | | | | | |
| | t - see instructions.) | 26 | | | | | | |
| | visions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | \ <u></u> | | | | | | |
| ▶ | | | | | | | | |
| 3a Did the fo | bundation hold more than a 2% direct or indirect interest in any business enterprise at any time | 1 | | | | | | |
| during th | | | | | | | | |
| - | fid it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after | | | | | | | |
| | 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose | | | | | | | |
| | gs acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, | | } | | | | | |
| | 720, to determine if the foundation had excess business holdings in 2015) N/A | 3b | | | | | | |
| | oundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X | | | | |
| | pundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | | | | | | | |
| | peen removed from jeopardy before the first day of the tax year beginning in 2015? | 4b | | X | | | | |
| | | Form 99 | 0-PF | | | | | |

| orm 990-PF (2015) NEVADA BAR FOUNDATION Part VII-B Statements Regarding Activities for Which I | Form 4720 May Re I | | 88-03990 | 23 | Page 6 |
|--|---|---|---|----------|-------------------------------|
| 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section Influence the outcome of any specific public election (see section 4955); of any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instructions) If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945 Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a party to 6b, file Form 8870 At any time during the tax year, was the foundation a party to a prohibited tax so if "Yes," did the foundation receive any proceeds or have any net income attributed the statement of the foundation of the foundation receive any proceeds or have any net income attributed the foundation of the founda | r to carry on, directly or indirectly or indirectly or indirectly or indirectly or indirectly or indirectly or educational purposes, or independent of the exceptions described octions)? Here is the tax because it maintated in the education of | ectly, | s No s X No s X No N/A | 5b 6b | x |
| Paid Employees, and Contractors | | | | | |
| List all officers, directors, trustees, foundation managers and their (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | accour | xpense nt, other vances |
| SEE STATEMENT 9 | | 0. | 0. | | 0. |
| Compensation of five highest-paid employees (other than those inc (a) Name and address of each employee paid more than \$50,000 NONE | cluded on line 1). If none, (b) Title, and average hours per week devoted to position | , enter "NONE." (c) Compensation | (d) Contributions to employee benefit plans and deterred compensation | accou | xpense nt, other wances |
| Fotal number of other employees paid over \$50,000 | | | | | |
| | | | Form | 990-P | F (2015) |

Form **990-PF** (2015)

| | n 990-PF (2015) NEVADA BAR FOUNDATION | 00-0399023 | age U |
|----|--|-----------------------------|-------------|
| P | Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations, see instructions) | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| | Average monthly fair market value of securities | 1a 754,5 | |
| b | Average of monthly cash balances | 1b 2,225,3 | |
| C | Fair market value of all other assets | 1c 406,0 | |
| d | Total (add lines 1a, b, and c) | 1d 3,385,8 | <u>363.</u> |
| е | 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 3,385,8 | |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 50, | |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 3,335,0 | <u> </u> |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 166,7 | <u>754.</u> |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are | nd certain | |
| | foreign organizations check here 🕨 🗶 and do not complete this part.) | <u> </u> | |
| 1 | Minimum investment return from Part X, line 6 | 1 | |
| 2a | Tax on investment income for 2015 from Part VI, line 5 | <u> </u> | |
| b | Income tax for 2015. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7_ | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | |
| P | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a 2,942,0 | 055. |
| b | Program-related investments - total from Part IX-B | | 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: | <u> </u> | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | | 3b | |
| 4 | Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 2,942, | <u>055.</u> |
| 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>3.</u> |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 2,942, | <u>052.</u> |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation | qualifies for the section | |

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

| Part XIII Undistributed Income (s | ee instructions) | N/A | | |
|--|------------------|---------------------|------|------|
| ` | (a) | (b) | (c) | (d) |
| | Corpus | Years prior to 2014 | 2014 | 2015 |
| 1 Distributable amount for 2015 from Part XI, line 7 | | | | |
| 2 Undistributed income, if any, as of the end of 2015 | | | | |
| a Enter amount for 2014 only | | | | |
| b Total for prior years: | | | | |
| ,, | | | | |
| 3 Excess distributions carryover, if any, to 2015: | | | | |
| a From 2010 | | | | |
| b From 2011 | | | | |
| c From 2012 | | | | |
| d From 2013 | | | | |
| e From 2014 | | 1 | | |
| f Total of lines 3a through e | | | | |
| 4 Qualifying distributions for 2015 from | | | | |
| Part XII, line 4: ► \$ | |] | | 1 |
| a Applied to 2014, but not more than line 2a | | | | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | | | | |
| d Applied to 2015 distributable amount | | | | |
| e Remaining amount distributed out of corpus | | | | |
| 5 Excess distributions carryover applied to 2015 | | | | |
| (If an amount appears in column (d) the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | | ···· | |
| 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 | | | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | } | | |
| e Undistributed income for 2014. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | | |
| f Undistributed income for 2015. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2016 | | | | |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | | | |
| may be required - see instructions) | • | | | |
| 8 Excess distributions carryover from 2010 | | | | |
| not applied on line 5 or line 7 | п | | | |
| 9 Excess distributions carryover to 2016. | | _ | | |
| Subtract lines 7 and 8 from line 6a | | 1 | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2011 | | | | |
| b Excess from 2012 | | | | |
| c Excess from 2013 | | | | |
| d Excess from 2014 | | | | |
| e Excess from 2015 | | | | |

| Form 990-P | F (2015) NEVADA V Private Operating F | BAR FOUNDAT | | A guartina (I) | 88-03 | 99023 Page 1 |
|------------------|--|---------------------------------------|------------------------------|------------------------------|--------------------------|---------------|
| | <u> </u> | · | | A, question 9) | | |
| | oundation has received a ruling o | | | | | |
| | ation, and the ruling is effective fo | · · · · · · · · · · · · · · · · · · · | • | ► L | | |
| | box to indicate whether the found | | g foundation described in | | 942(j)(3) or 49 | 42(j)(5) |
| | the lesser of the adjusted net | Tax year | 410044 | Prior 3 years | (4) 0040 | (a) T-4-1 |
| incom | e from Part I or the minimum | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (e) Total |
| ınvestı | ment return from Part X for | | | | | |
| each y | ear listed | 270. | 64. | 35. | 87. | 456. |
| b 85% o | of line 2a | 230. | 54. | 30. | 74. | 388. |
| c Qualify | ying distributions from Part XII, | } | | | į | |
| line 4 t | for each year listed | 2,942,055. | 59,776. | 2,800. | 85,050. | 3,089,681. |
| d Amou | nts included in line 2c not | | | | | |
| used o | directly for active conduct of | | | | | 1 |
| exemp | ot activities | 0. | 0. | 0. | 0. | 0. |
| e Qualify | ying distributions made directly | | | | | |
| | tive conduct of exempt activities. | | | | | 1 |
| Subtra | act line 2d from line 2c lete 3a, b, or c for the | 2,942,055. | 59,776. | 2,800. | 85,050. | 3,089,681. |
| | ative test relied upon: | ļ | | | | |
| a "Asset | s" alternative test - enter: | 4 504 400 | 4 650 005 | 72 112 | 00 054 | 0 516 006 |
| (1) V | alue of all assets | 4,681,122. | 4,672,987. | 73,143. | 88,974. | 9,516,226. |
| | alue of assets qualifying nder section 4942(j)(3)(B)(i) | 4,675,689. | 4,198,309. | 64,702. | 81,439. | 9,020,139. |
| 2/3 of | wment" alternative test - enter minimum investment return n in Part X, line 6 for each year | | | | | 0. |
| | ort" alternative test - enter: | | | | | |
| (1) T ir d | otal support other than gross investment income (interest, ividends, rents, payments on ecurities loans (section | | | | | |
| 5 | 12(a)(5)), or royalties) | | | | | 0. |
| a | support from general public nd 5 or more exempt irganizations as provided in ection 4942(j)(3)(B)(iii) | | | | | 0. |
| (3) L | argest amount of support from | | | | | |
| a | n exempt organization | | | | | 0. |
| <u>(4)</u> G | Gross investment income | <u> </u> | | | | 0. |
| Part X\ | Supplementary Info | | | f the foundation h | nad \$5,000 or mo | ore in assets |
| | at any time during | the year-see instr | uctions.) | | | |
| a List a | mation Regarding Foundation who managers of the foundation who but only if they have contributed it | no have contributed more | | ibutions received by the fo | oundation before the clo | se of any tax |
| NONE | | | | | | |
| | ny managers of the foundation whentity) of which the foundation ha | | | or an equally large portion | of the ownership of a p | artnership or |
| NONE | | | | | | |
| 2 Infor | rmation Regarding Contribut k here X if the foundation of bundation makes gifts, grants, etc. | only makes contributions t | to preselected charitable o | organizations and does no | | |
| | name, address, and telephone num | | | | | |
| b The fo | orm in which applications should | be submitted and informa | tion and materials they sh | ould include: | | |
| c Any s | submission deadlines: | | | | | |
| d Any r | estrictions or limitations on award | is, such as by geographic | al areas, charitable fields, | kınds of ınstıtutıons, or ot | her factors: | |

Form **990-PF** (2015)

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year LEGAL AID CENTER OF SOUTHERN NEVADA NONE PROVIDING LEGALLY RELATED SERVICES TO 725 E CHARESTON BLVD LAS VEGAS, NV 89104 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 1,572,630. NEVADA LEGAL SERVICES NONE PROVIDING LEGALLY 530 S 6TH ST RELATED SERVICES TO LAS VEGAS, NV 89101 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 427,025. SOUTHERN NEVADA SENIOR LAW PROGRAM NONE PROVIDING LEGALLY 530 LAS VEGAS BLVD. SOUTH, SUITE 310 RELATED SERVICES TO LAS VEGAS, NV 89101 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 223,820. VOLUNTEER ATTORNEYS FOR RURAL NEVADA NONE PROVIDING LEGALLY 904 N NEVADA ST RELATED SERVICES TO THE POOR, TO THE CARSON CITY, NV 89703 VICTIMS OF DOMESTIC VIOLENCE, AND TO 170,810. NONE PROVIDING LEGALLY WASHOE COUNTY LEGAL SERVICE RELATED SERVICES TO 299 S ARLINGTON AVE THE POOR, TO THE RENO, NV 89501 VICTIMS OF DOMESTIC VIOLENCE AND TO 323 950. SEE CONTINUATION SHEET(S) Total **▶** 3a 2,942,055. **b** Approved for future payment NONE CASA OF CARSON CITY PROVIDING LEGALLY 1545 E 5TH ST RELATED SERVICES TO CARSON CITY, NV 89701 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 11,200. LEGAL AID CENTER OF SOUTHERN NEVADA NONE PROVIDING LEGALLY 725 E CHARESTON BLVD RELATED SERVICES TO LAS VEGAS, NV 89104 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE AND TO 1,553,873. NEVADA LEGAL SERVICES NONE PROVIDING LEGALLY 530 S 6TH ST RELATED SERVICES TO

Total

** SEE PURPOSE OF GRANT CONTINUATIONS

SEE CONTINUATION SHEET(S)

LAS VEGAS, NV 89101

THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE AND TO

▶ 3b

Form **990-PF** (2015)

304,500,

3.041.574.

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

| Enter gross amounts unless otherwise indicated. | Unrelated b | usiness income | | by section 512, 513, or 514 | (e) |
|--|-----------------|----------------|-------------------------------|-----------------------------|-----------------------------------|
| | (a) Business | (b) Amount | (C) Exclu- sion code | (d) Amount | Related or exempt function income |
| 1 Program service revenue: | code | | code | , another | |
| ab | - | | | | |
| | - | | | | |
| d | _ | | | | · |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| Investments | | | 14 | 370. | |
| 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 | | | | | <u></u> |
| 8 Gain or (loss) from sales of assets other than inventory | į | | 18 | -299. | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a | | | | | |
| b | | | | | |
| c | _ | | | | |
| d | _ | | | | |
| e | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | | 0. | | 0 |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 71 |
| (See worksheet in line 13 instructions to verify calculations. | .) | | | | |

| 7 | the foundation | s exempt purp | oses (other tha | n by providing t | funds for such | purposes). | | _ | | |
|-----|----------------|---------------|-----------------|------------------|----------------|------------|---|----------|-----|---|
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Form **990-PF** (2015)

| Dort VVII | | A BAR FC | | | | <u>88-0399023</u> | | age 13 |
|---------------------|--|-----------------------------|----------------------|--------------------------------------|---|---|---------------------------|---------------|
| Part XVII | Information Re Exempt Organi | | insfers To a | and Transactions ar | nd Relationships With | ı Noncharitabl | е | |
| 1 Did the or | ganization directly or indire | ectly engage in ai | ny of the followin | g with any other organization | described in section 501(c) of | | Yes | No |
| | | | | 27, relating to political organiz | | | | |
| | from the reporting founda | | | | | | | |
| (1) Cash | | | | • | | 1a(1) | \ | х |
| (2) Other | assets | | | | | 1a(2) | | X |
| b Other tran | | | | | | 14(2) | + | -23 |
| | of assets to a noncharitat | ile exempt organi | zation | | | 1b(1) | | Х |
| | nases of assets from a nor | | | | | 1b(2) | | X |
| | al of facilities, equipment, o | • | n organization | | | | | |
| • • | bursement arrangements | 51 Other 4550t5 | | | | 1b(3) | | X |
| ٠, | s or loan guarantees | | | | | 1b(4) | | X |
| | rmance of services or mer | mhershin or fund | raisina salicitatia | ine | | 1b(5) | | X |
| • • | f facilities, equipment, mai | • | • | | | 1b(6) | - | X |
| _ | | • . | | | ays show the fair market value o | | | |
| or service | s given by the reporting fo | undation. If the fo | oundation receive | | in any transaction or sharing ar | | 5615, | |
| (a) Line no | (b) Amount involved | | | e exempt organization | (d) Description of transfers, tra | insactions, and sharing a | rrangeme | |
| | | | N/A | | | | 3 | |
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| ın section | ndation directly or indirectly 501(c) of the Code (other complete the following sche | than section 501 | | or more tax-exempt organiza | itions described | Yes | X |] No |
| | (a) Name of orga | anization | | (b) Type of organization | (c) Descriptio | n of relationship | | |
| | N/A | | | | | | | |
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| Under | populting of powers I deployed | h = 4 h = 1 = = 1 = 1 = 1 | Abra -ski | | | | | |
| Sign Here | elief, it is true, correct, and com | plete Declaration of | preparer (other than | n taxpayer) is based on all informat | atements, and to the best of my knowled on of which preparer has any knowled SECRETARY Title | May the IRS return with the shown below | ne prepare v (see inst | er |
| (1a. | Print/Type preparer's nai | me | Preparer's si | | Date Check | ıf PTIN | | |
| | ,, , ,, ,, ,, ,, ,, | | 1 | | self- employe | · . | | |
| Paid | -MICHAEL E | DAVIS- | Mash | ael) NO | V_1_0_2015 | P00626 | 99-1- | |
| Preparer | Firm's name ► BARI | | LER & C | O, CPAS | | ► 88-01188 | | |
| Use Only | | | | -, | | . 55 51100 | | |
| | Firm's address ► 10 | O WEST I | IBERTY | ST. SUITE 110 | 10 | | | |
| | | NO, NV 8 | | | Phone no. | (775) 786 | -61 | 41 |
| | | | | · <u></u> | 11 110110 110. | Form 99 | | |

523622 11-24-15

NEVADA BAR FOUNDATION

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor WASHOE COUNTY LEGAL SERVICE - RURAL NONE PROVIDING LEGALLY LEGAL SERVICES RELATED SERVICES TO 299 S ARLINGTON AVE THE POOR, TO THE RENO, NV 89501 VICTIMS OF DOMESTIC VIOLENCE AND TO 106,020. NONE CASA OF CARSON CITY PROVIDING LEGALLY 1545 E 5TH ST RELATED SERVICES TO CARSON CITY, NV 89701 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 16,000. NORTHEASTERN NEVADA CASA NONE PROVIDING LEGALLY PO BOX 1543 RELATED SERVICES TO ELKO, NV 89803 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 15,000. NONE PIONEER TERRITORY CASA PROVIDING LEGALLY 1321 S HIGHWAY 160 STE 9 RELATED SERVICES TO PAHRUMP, NV 89048 THE POOR, TO THE VICTIMS OF DOMESTIC 21,000. VIOLENCE, AND TO S.A.F.E. HOUSE NONE PROVIDING LEGALLY 921 AMERICAN PACIFIC DR. STE 300 RELATED SERVICES TO HENDERSON, NV 89014 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 12,800. SAFE NEST NONE PROVIDING LEGALLY 2915 W. CHARLESTON BLVD., STE 12 RELATED SERVICES TO LAS VEGAS, NV 89102 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 24,000. RSVP NONE PROVIDING LEGALLY 2621 NORTHGATE LANE, STE 6 RELATED SERVICES TO CARSON CITY, NV 89706 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 29 000. Total from continuation sheets 223,820.

NEVADA BAR FOUNDATION

Part XV **Supplementary Information** Grants' and Contributions Approved for Future Payment (Continuation) If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient NORTHEASTERN NEVADA CASA NONE PROVIDING LEGALLY PO BOX 1543 RELATED SERVICES TO ELKO, NV 89803 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 10 500. PIONEER TERRITORY CASA NONE PROVIDING LEGALLY 1321 S HIGHWAY 160 STE 9 RELATED SERVICES TO PAHRUMP, NV 89048 THE POOR TO THE VICTIMS OF DOMESTIC VIOLENCE AND TO 17.514. NONE RSVP PROVIDING LEGALLY 2621 NORTHGATE LANE, STE 6 RELATED SERVICES TO THE POOR AND SENIORS. CARSON CITY, NV 89706 26,600. NONE PROVIDING LEGALLY S.A.F.E. HOUSE 921 AMERICAN PACIFIC DR. STE 300 RELATED SERVICES TO HENDERSON, NV 89014 THE POOR TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 12,250. SAFE NEST NONE PROVIDING LEGALLY 2915 W. CHARLESTON BLVD., STE 12 RELATED SERVICES TO LAS VEGAS, NV 89102 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 35,000. NONE PROVIDING LEGALLY SOUTHERN NEVADA SENIOR LAW PROGRAM RELATED SERVICES TO 530 LAS VEGAS BLVD. SOUTH, SUITE 310 THE POOR AND SENIORS. LAS VEGAS NV 89101 <u>211,892.</u> PROVIDING LEGALLY VOLUNTEER ATTORNEYS FOR RURAL NEVADA NONE 904 N NEVADA ST RELATED SERVICES TO CARSON CITY, NV 89703 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE, AND TO 164,805. NONE WASHOE COUNTY LEGAL SERVICE PROVIDING LEGALLY 299 S ARLINGTON AVE RELATED SERVICES TO THE POOR, TO THE RENO, NV 89501 VICTIMS OF DOMESTIC VIOLENCE, AND TO 329,609. WASHOE COUNTY LEGAL SERVICE - RURAL NONE PROVIDING LEGALLY LEGAL SERVICES RELATED SERVICES TO 299 S ARLINGTON AVE THE POOR, TO THE RENO, NV 89501 VICTIMS OF DOMESTIC VIOLENCE, AND TO 94,174. COMMITTEE TO AID ABUSED WOMEN (CAAW) NONE PROVIDING LEGALLY 1735-VASSAR-ST-RELATED_SERVICES_TO RENO, NV 89502 THE POOR, TO THE VICTIMS OF DOMESTIC VIOLENCE AND TO 28,000. Total from continuation sheets 1 172 001.

NEVADA BAR FOUNDATION

Part XV **Supplementary Information** Grants' and Contributions Approved for Future Payment (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor PROVIDING LEGALLY COURT APPOINTED SPECIAL NONE RELATED SERVICES TO ADVOCATES-LYON CO THE POOR, TO THE PO BOX 242 YERINGTON, NV 89447 VICTIMS OF DOMESTIC VIOLENCE, AND TO 14,000. LEGAL AID CENTER OF SOUTHERN NEVADA NONE PROVDING FUNDS FOR FORECLOSURES 725 E CHARESTON BLVD LAS VEGAS, NV 89104 PREVENTION AND COMMUNITY REDEVELOPMENT LEGAL 80,774. NONE PROVDING FUNDS FOR NEVADA LEGAL SERVICES FORECLOSURES 530 S 6TH ST PREVENTION AND LAS VEGAS, NV 89101 COMMUNITY 119,883. REDEVELOPMENT LEGAL SOUTHERN NEVADA SENIOR LAW PROGRAM NONE PROVDING FUNDS FOR 530 LAS VEGAS BLVD. SOUTH, SUITE 310 FORECLOSURES PREVENTION AND LAS VEGAS, NV 89101 COMMUNITY 27,000. REDEVELOPMENT LEGAL Total from continuation sheets

| Part XV Supplementary Inform | nation |
|--------------------------------|--------|
|--------------------------------|--------|

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - LEGAL AID CENTER OF SOUTHERN NEVADA

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

PROTECTION OF THE JUVENILE COURT.

NAME OF RECIPIENT - NEVADA LEGAL SERVICES

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

PROTECTION OF THE JUVENILE COURT.

NAME OF RECIPIENT - SOUTHERN NEVADA SENIOR LAW PROGRAM

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

PROTECTION OF THE JUVENILE COURT.

NAME OF RECIPIENT - VOLUNTEER ATTORNEYS FOR RURAL NEVADA

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

PROTECTION OF THE JUVENILE COURT.

NAME OF RECIPIENT - WASHOE COUNTY LEGAL SERVICE

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

PROTECTION OF THE JUVENILE COURT.

NAME OF RECIPIENT - WASHOE COUNTY LEGAL SERVICE - RURAL LEGAL SERVICES

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

523655 04-01-15

Supplementary Information Part XV

3b Grants and Contributions Approved for Future Payment Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - CASA OF CARSON CITY

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

PROTECTION OF THE JUVENILE COURT.

NAME OF RECIPIENT - LEGAL AID CENTER OF SOUTHERN NEVADA

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

PROTECTION OF THE JUVENILE COURT.

NAME OF RECIPIENT - NEVADA LEGAL SERVICES

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

PROTECTION OF THE JUVENILE COURT.

NAME OF RECIPIENT - NORTHEASTERN NEVADA CASA

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

PROTECTION OF THE JUVENILE COURT.

NAME OF RECIPIENT - PIONEER TERRITORY CASA

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

PROTECTION OF THE JUVENILE COURT.

NAME OF RECIPIENT - S.A.F.E. HOUSE

PROVIDING LEGALLY RELATED SERVICES TO THE POOR, TO THE VICTIMS OF

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

523651 04-01-15

NAME OF RECIPIENT - COURT APPOINTED SPECIAL ADVOCATES-LYON CO

DOMESTIC VIOLENCE, AND TO CHILDREN PROTECTED BY OR IN NEED OF

523651 04-01-15

PROTECTION OF THE JUVENILE COURT.

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www ams.gov/form 990 .

OMB No 1545-0047

Name of the organization

Employer identification number

| | NEVADA BAR FOUNDATION | 88-0399023 |
|--|---|--|
| Organization type (chec | k 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 | |
| | on is covered by the General Rule or a Special Rule. I(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru | ule See instructions |
| _ | tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling any one contributor. Complete Parts I and II. See instructions for determining a contributor | = |
| Special Rules | | |
| sections 509(a) any one contrib | ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a outor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amou EZ, line 1. Complete Parts I and II | , or 16b, and that received from |
| year, total cont | ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990·EZ that received from ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or eductor of cruelty to children or animals. Complete Parts I, II, and III | |
| year, contribute is checked, ent purpose Do no | ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from ons exclusively for religious, charitable, etc., purposes, but no such contributions totaled noter here the total contributions that were received during the year for an exclusively religious to complete any of the parts unless the General Rule applies to this organization because able, etc., contributions totaling \$5,000 or more during the year | nore than \$1,000. If this box s, charitable, etc , |
| but it must answer "No" | on that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Filling requirements of Schedule B-(Form 990, 990-EZ, or 990-PF) | form 990-PF, Part I, line 2, to |
| LHA For Paparete B | adjustion Ast Notice and the Instructions for Form 990, 990-F7, or 990-PE. Schadula | B /Form 990, 990-F7, or 990-PE) /2015) |

Name of organization

Employer identification number

| NEV <u>À</u> D | A BAR FOUNDATION | | 8-0399023 |
|----------------|---|----------------------------|--|
| Part I | Contributors (see instructions). Use duplicate copies of Part I if additional | Il space is needed | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | EL CORD FOUNDATION 320 W LIBERTY ST RENO, NV 89501 | \$20,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | THELMA B. AND THOMAS P HART FOUNDATION PO BOX 2670 RENO, NV 89505 | \$30,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | BANK OF AMERICA 100 NORTH TRYON STREET CHARLOTTE, NC 28255 | \$355,047. | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | Name, address, and ZIP + 4 | Total contributions | (d) |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |

Name of organization

Employer identification number

NEVADA BAR FOUNDATION

88-0399023

| | 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 |
| | | | |
| | | s | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) = No. from | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |

| Name of orga | rnization | | Employer identification number |
|---------------------------|--|---------------------------------------|---|
| NEVÀDA | BAR FOUNDATION | | 88-0399023 |
| Part III | Exclisively religious, charitable, etc., contributor. Complete of completing Part III, enter the total of exclusively religious. | niumns (a) through (e) and the follow | in section 501(c)(7), (8), or (10) that total more than \$1,000 for |
| | Use duplicate copies of Part III if additional | Il space is needed | less for the year (Little this line of the year) |
| (a) No. from Part I | (b) Purpose of gift (c) Use of gift (d) | | (d) Description of how gift is held |
| | | | |
| - | | (e) Transfer of gif | t |
| | Transferee's name, address, an | d ZIP + 4 | Relationship of transferor to transferee |
| (a) No. | | | |
| Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | Transferee's name, address, an | (e) Transfer of gif | 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 gif | it |
| | Transferee's name, address, ar | nd ZIP + 4 | Relationship of transferor to transferee |
| (a) No. | | | |
| Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | Transferee's name, address, ar | (e) Transfer of gif | Relationship of transferor to transferee |
| | | | |
| | | | |

| FORM 990-PF INTEREST ON SAVI | NGS AND TEM | PORARY CA | SH II | NVESTMENTS | STATEMENT | 1 |
|---|------------------------------|-----------------------------|-------------|------------------------------|------------------------------|------|
| SOURCE | (A REVE PER B | NUE N | | (B) NVESTMENT NCOME | (C) ADJUSTEI NET INCOM | |
| INTEREST INCOME | | 370. | _ | 370. | 3 | 370. |
| TOTAL TO PART I, LINE 3 | | 370. | | 370. | 3 | 370. |
| FORM 990-PF | ACCOUNTI | NG FEES | _ | | STATEMENT | 2 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVE MENT INC | | (C) ADJUSTED NET INCOM | | |
| ACCOUNTING | 12,220. | | 0. | | 0. | 0. |
| TO FORM 990-PF, PG 1, LN 16B | 12,220. | | 0. | | 0. | 0. |
| FORM 990-PF C | THER PROFES | SIONAL FE | ES | | STATEMENT | 3 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVE MENT INC | | (C) ADJUSTED NET INCOM | | |
| VARIOUS | 45,095. | · | 0. | | 0. | 0. |
| TO FORM 990-PF, PG 1, LN 16C | 45,095. | | 0. | | 0. | 0. |
| FORM 990-PF | OTHER E | XPENSES | | | STATEMENT | 4 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVE MENT INC | | (C) ADJUSTED NET INCOM | | |
| BANK FEES TRAINING FUNDRAISING EXPENSES | 2,304. 695. 5,370. | | 100. | | 0. | 0. |
| | 450. | | 0. | | 0_• | 0. |
| DUES/MEMBERSHIP | 5,573. | | 0. | | 0. | υ. |
| DUES/MEMBERSHIP | 5,573. 5,522. | - | 0. 0. | | 0. 0. — ———— | 0. |

| FORM 990-PF | OTHER INCREASES IN | NET ASSETS | OR FUN | D BALANCES | STATEMENT | 5 |
|------------------------------|----------------------|----------------------|---------|-----------------------------|-----------|-----|
| DESCRIPTION | | | | | TRUOMA | |
| NET ASSETS RE ACQUISITION | CEIVED IN NEVADA LA | W FOUNDATION | I/IOLTA | PROGRAM | 171,2 | 05. |
| TOTAL TO FORM | 1 990-PF, PART III, | LINE 3 | | | 171,2 | 05. |
| FORM 990-PF | OTHER DECREASES I | N NET ASSETS | OR FU | ND BALANCES | STATEMENT | 6 |
| DESCRIPTION | | | | | AMOUNT | |
| ACCRUAL TO CA | ASH DIFFERENCE IN GR | ANTS PAID VS | S ACCRU | ED | 99,5 | 19. |
| TOTAL TO FORM | 1 990-PF, PART III, | LINE 5 | | | 99,5 | 19. |
| FORM 990-PF | DEPRECIATION OF AS | SETS NOT HE | D FOR | INVESTMENT | STATEMENT | 7 |
| DESCRIPTION | | COST OI OTHER BAS | | ACCUMULATED DEPRECIATION | BOOK VALU | E |
| MEMORIAL | | 11 | ,513. | 6,080. | 5,4 | 33. |
| TOTAL TO FM | 990-PF, PART II, LN | 14 11 | ,513. | 6,080. | 5,4 | 33. |

| | SUBSTANTIAL CONTRIBART VII-A, LINE 10 | UTORS | STATI | EMENT 8 |
|---|---------------------------------------|-------------------|---------------------------------|---------|
| NAME OF CONTRIBUTOR | ADDRESS | | | |
| BANK OF AMERICA | 100 NORTH TRY CHARLOTTE, NO | | | |
| | LIST OF OFFICERS, D | | STAT | EMENT 9 |
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | |
| KIMBERLY FARMER 3100 W CHARLESTON BLVD LAS VEGAS, NV 89102 | SECRETARY 1.00 | 0. | 0. | 0. |
| CONSTANCE AKRIDGE 9555 HILLWOOD DRIVE LAS VEGAS, NV 89134 | PRESIDENT 1.00 | 0. | 0. | 0. |
| RICHARD POCKER 300 S FOURTH STREET LAS VEGAS, NV 89101 | TREASURER 1.00 | 0. | 0. | 0. |
| CYNTHIA ALEXANDER 3883 HOWARD HUGHES PKWY LAS VEGAS, NV 89169 | TRUSTEE 1.00 | 0. | 0. | 0. |
| ANN BERSI 3100 W CHARLESTON BLVD LAS VEGAS, NV 89102 | TRUSTEE 1.00 | 0. | 0. | 0. |
| JAMES BRADSHAW 100 WEST LIBERTY STREET RENO, NV 89501 | TRUSTEE 1.00 | 0. | 0. | 0. |
| HON. LINDA GARDNER 75 COURT STREET RENO, NV 89501 | TRUSTEE 1.00 | 0. | 0. | 0. |
| VIDV INCODGON | MDIICMEE | | | |

TRUSTEE

9139-W-RUSSELL-ROAD 1.00 0. 0. 0. 0. LAS VEGAS, NV 89148

KIRK JACOBSON

| NEVADA BAR FOUNDATION | | 88-039902 | | |
|---|------------------------|-----------|-----------|----|
| MARK KNOBEL 100 WEST LIBERTY STREET RENO, NV 89501 | TRUSTEE 1.00 | 0. | 0. | 0. |
| MARGARET WIGHTMAN LAMBROSE 300 SOUTH 4TH STREET LAS VEGAS, NV 89101 | TRUSTEE 1.00 | 0. | 0. | 0. |
| GENE LEVERTY 832 WILLOW STREET RENO, NV 89502 | TRUSTEE 1.00 | 0. | 0. | 0. |
| LORI TEICHER 411 BONNEVILLE AVE LAS VEGAS, NV 89101 | TRUSTEE 1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, | PAGE 6, PART VIII | 0. | 0. | 0. |
| FORM 990-PF SUMMARY | OF DIRECT CHARITABLE A | CTIVITIES | STATEMENT | 10 |

ACTIVITY ONE

THE NEVADA BAR FOUNDATION (THE FOUNDATION) WAS FORMED TO PROMOTE/PROVIDE LAW RELATED EDUCATION TO MEMBERS OF THE PUBLIC, DEVELOP/IMPROVE LEGAL EDUCATION, ENGAGE IN RESEARCH IN THE FIELD OF LAW AND LEGAL PRACTICE, ASSIST QUALIFIED INDIVIDUALS IN THE STUDY OF LAW, AND TO FUND THE CHARITABLE AND TAX EXEMPT ACTIVITIES OF THE STATE BAR AS REPORTED IN PART XV.

| | | | | | EXPENSES | |
|--------------------|-----------|-----------|------------|------------|-----------|-----|
| TO FORM 990-PF, PA | ART IX-A, | LINE 1 | | | 23,8 | 07. |
| FORM 990-PF | SUMMARY | OF DIRECT | CHARITABLE | ACTIVITIES | STATEMENT | 11 |

ACTIVITY TWO

DURING 2014, THE NEVADA BAR FOUNDATION (FOUNDATION) ASSUMED THE OPERATIONS OF THE INTEREST ON LAWYERS TRUST ACCOUNTS (IOLTA) PROGRAM PREVIOUSLY OPERATED BY THE JUSTICE LEAGUE OF NEVADA (LEAGUE). THE PURPOSE OF THE IOLTA PROGRAM IS TO PROVIDE LEGALLY RELATED SERVICES TO THE POOR, TO VICTIMS OF DOMESTIC-VIOLENCE-AND-TO-CHILDREN-PROTECTED BY OR IN NEED_OF

88-0399023

PROTECTION OF THE JUVENILE COURT; PROMOTING LAW RELATED EDUCATION PROGRAMS FOR MEMBERS OF THE PUBLIC; AND PROVIDING SIMILAR PROGRAMS WHICH QUALIFY FOR TAX-EXEMPT STATUS.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 2

2,872,263.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

12

ACTIVITY THREE

DURING 2015, THE NEVADA BAR FOUNDATION (FOUNDATION)RECEIVED MONIES FROM BANK OF AMERICA FOR USE IN PROVIDING FUNDS TO LEGAL AID ORGANIZATIONS IN THE STATE OF NEVADA FOR FORECLOSURE PREVENTION LEGAL ASSISTANCE AND COMMUNITY REDEVELOPMENT LEGAL ASSISTANCE.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 3

227,657.

2015 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

| Current Year Deduction | 384. | |
|-----------------------------|---|--|
| Current Sec 179 | 0 | |
| Accumulated Depreciation | 5,696. | |
| Basis For Depreciation | 11,513. | |
| Reduction In Basis | .0 | |
| Bus % Excl | - | |
| Unadjusted Cost Or Basis | 11,513. | |
| No o | 16 | |
| Life | 30.001 | |
| Method | | |
| Date Acquired | 030100SL | |
| Description | 16MEMORIAL * TOTAL 990-PF PG 1 DEPR | |
| Asset No | 161 | |

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction