

EXTENDED TO MAY 16, 2016

Form **990****Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Information about Form 990 and its instructions is at www.irs.gov/form990.**A** For the 2014 calendar year, or tax year beginning **JUL 1, 2014** and ending **JUN 30, 2015**

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NEVADA COMMUNITY FOUNDATION, INC.		D Employer identification number 88-0241420
	Doing business as		E Telephone number 702-892-2326
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 34,835,379.
	410 SOUTH RAMPART		390
	City or town, state or province, country, and ZIP or foreign postal code LAS VEGAS, NV 89145		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
F Name and address of principal officer: GIAN F. BROSCO 410 SOUTH RAMPART, SUITE 390, LAS VEGAS, NV			H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.NEVADACF.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1988 M State of legal domicile: NV

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE MISSION OF THE NEVADA COMMUNITY FOUNDATION IS TO RECEIVE AND ACCEPT FUNDS TO BE		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	10
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	5
	6 Total number of volunteers (estimate if necessary)	6	14
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	1,981,596.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 98,880,210.	Current Year 4,206,733.
	9 Program service revenue (Part VIII, line 2g)	18,575.	2,054.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,986,437.	7,311,363.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	121,283.	123,395.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	103,006,505.	11,643,545.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,637,744.	8,460,025.
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	471,618.	488,483.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) 238,643.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,384,841.	1,762,952.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,494,203.	10,711,460.
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12	99,512,302.	932,085.
	20 Total assets (Part X, line 16)	Beginning of Current Year 134,491,035.	End of Year 131,229,615.
	21 Total liabilities (Part X, line 26)	4,049,579.	9,483,093.
	22 Net assets or fund balances. Subtract line 21 from line 20	130,441,456.	121,746,522.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date	
	JOSELYN COUSINS, CHAIRPERSON			
Paid Preparer	Print/Type preparer's name	Prep	Date	Check if self-employed <input type="checkbox"/> PTIN
	GARY R. LAMBRIX, CPA	<i>Gary R. Lambrix</i>	2/20/16	P01349556
Use Only	Firm's name	Firm's EIN	Phone no.	
	RSM US LLP	42-0714325	702 759 4000	
Firm's address 300 SOUTH 4TH STREET, SUITE 1200 LAS VEGAS, NV 89101				

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X**

- 1 Briefly describe the organization's mission:
TO RECEIVE AND ACCEPT FUNDS TO BE ADMINISTERED AND DISBURSED THROUGH
GRANTS EXCLUSIVELY FOR CHARITABLE PURPOSES PRIMARILY IN NEVADA OR FOR
THE BENEFIT OF RESIDENTS OF NEVADA, SUPPORT THE SOLVING OF COMMUNITY
ISSUES AND TO MATCH DONOR PHILANTHROPIC INTEREST WITH THE MYRIAD NEEDS
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
 If "Yes," describe these new services on Schedule O.
- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes," describe these changes on Schedule O.
- 4 Describe the 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.
- 4a (Code:) (Expenses \$ 7,965,370. including grants of \$ 7,128,724.) (Revenue \$ 4,961,849.)
DONOR ADVISED PROGRAM - THIS PROGRAM CONSISTS OF THE FOUNDATION'S
DIRECT FINANCIAL SUPPORT OF OTHER CHARITIES AND CHARITABLE CAUSES TO
ASSIST THEM IN ACCOMPLISHING THEIR GOALS AND OBJECTIVES AND TO SUPPORT
PUBLIC EDUCATION EFFORTS DESIGNED TO RAISE THE LEVEL OF CHARITABLE
GIVING FOR THE BROAD BENEFIT OF ALL NON-PROFITS.
- 4b (Code:) (Expenses \$ 1,057,565. including grants of \$ 901,083.) (Revenue \$ 30,857.)
COMMUNITY SUPPORTED PROGRAM - THIS PROGRAM CONSISTS OF THE FOUNDATION'S
DIRECT SUPPORT OF OTHER CHARITIES AND CHARITABLE CAUSES. OTHER
SUBSTANTIAL ACTIVITIES CLASSIFIED AS PROGRAM EXPENDITURES INCLUDE
CONVENINGS TO EXAMINE DIFFERENT COMMUNITY ISSUES, THE CREATION AND
PUBLICATION OF EDUCATIONAL AND RESOURCE MATERIALS, TECHNICAL AND
ORGANIZATIONAL CONSULTING ASSISTANCE TO CHARITIES, AND PUBLIC EDUCATION
EFFORTS DESIGNED TO RAISE THE LEVEL OF CHARITABLE GIVING FOR THE BROAD
BENEFIT OF ALL NONPROFITS IN NEVADA.
- 4c (Code:) (Expenses \$ 52,092. including grants of \$ 35,000.) (Revenue \$ 94,533.)
SCHOLARSHIP PROGRAM - PROVIDE COLLEGE AND UNIVERSITY SCHOLARSHIPS TO
QUALIFYING STUDENTS. GRANTS ARE MADE DIRECTLY TO THE INSTITUTION OF
HIGHER LEARNING FOR THE BENEFIT OF THE STUDENT.
- 4d Other program services (Describe in Schedule O.)
 (Expenses \$ 1,040,825. including grants of \$ 395,218.) (Revenue \$ 2,319,573.)
- 4e Total program service expenses 10,115,852.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	X	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		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	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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	X	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b 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	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		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		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		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		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
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 any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
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 prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 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 of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38 X	

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

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	X	
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	N/A	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	N/A	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	N/A	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	N/A	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

Check if Schedule O contains a response or note to any line in this Part VI

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

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 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 O.	10	10		
b Enter the number of voting members included in line 1a, above, who are independent		10		
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	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?			3	X
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	X
6 Did the organization have members or stockholders?			6	X
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	X
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:				
a 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

Section 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	X
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12c	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	13	X
13 Did the organization have a written whistleblower policy?	14	X
14 Did the organization have a written document retention and destruction policy?		
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	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	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **NONE**

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) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ 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, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ►
KEITH LATHAM - 702-892-2326
410 SOUTH RAMPART, SUITE 390, LAS VEGAS, NV 89145

Part VII	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees <i>(continued)</i>
-----------------	--

[illegible]

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

1

		Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
NONE		
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	0

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d	19,500.			
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	4,187,233.			
	g	Noncash contributions included in lines 1a-1f: \$		2,570,731.			
	h	Total. Add lines 1a-1f		4,206,733.			
Program Service Revenue	2 a	PROGRAM SERVICE REVENUE	Business Code 900099	2,054.	2,054.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		2,054.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		6,455,147.	6,455,147.		
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real (ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other 24,048,050.				
	b	Less: cost or other basis and sales expenses	23,191,834.				
	c	Gain or (loss)	856,216.				
	d	Net gain or (loss)		856,216.	856,216.		
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	a					
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a	LAND GAIN	531390	84,376.	84,376.			
b	ADMIN FEES INCOME	541900	36,367.	36,367.			
c	MISCELLANEOUS INCOME	541900	2,652.	2,652.			
d	All other revenue						
e	Total. Add lines 11a-11d		123,395.				
12	Total revenue. See instructions.		11,643,545.	7,436,812.	0.	0.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	8,460,025.	8,460,025.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	227,559.	56,890.	56,890.	113,779.
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	165,290.	75,786.	84,609.	4,895.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	10,938.	3,694.	3,940.	3,304.
9 Other employee benefits	60,481.	20,424.	21,785.	18,272.
10 Payroll taxes	24,215.	8,177.	8,723.	7,315.
11 Fees for services (non-employees):				
a Management	40,514.	2,487.	29,451.	8,576.
b Legal	49,033.		49,033.	
c Accounting	3,300.		3,300.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,070,004.	1,070,004.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	201,924.	141,528.	36,270.	24,126.
12 Advertising and promotion	14,504.			14,504.
13 Office expenses	210,458.	203,164.	4,069.	3,225.
14 Information technology	25,852.	8,716.	9,225.	7,911.
15 Royalties				
16 Occupancy	59,571.	19,678.	25,048.	14,845.
17 Travel	2,055.		2,055.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,238.	479.	5,280.	479.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	11,069.	4,759.	2,657.	3,653.
23 Insurance	10,213.	3,449.	3,679.	3,085.
24 Other expenses. Itemize expenses not covered 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 COMMUNITY INVOLVEMENT	29,421.	29,421.		
b EQUIPMENT RENTAL & MAIN	9,298.	3,069.	3,998.	2,231.
c TELEPHONE	8,092.	2,883.	2,907.	2,302.
d DONOR MEETINGS AND RECO	4,569.			4,569.
e All other expenses	6,837.	1,219.	4,046.	1,572.
25 Total functional expenses. Add lines 1 through 24e	10,711,460.	10,115,852.	356,965.	238,643.
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)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	39,527.	1	40,446.
	2 Savings and temporary cash investments	202,306.	2	202,812.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	0.	4	0.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net	0.	7	158,061.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	453,635.	9	507,379.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 144,225.		
	b Less: accumulated depreciation	10b 122,437.		
		30,931.	10c	21,788.
	11 Investments - publicly traded securities	93,929,397.	11	88,671,449.
	12 Investments - other securities. See Part IV, line 11	38,467,798.	12	40,181,425.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	1,367,441.	15	1,446,255.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	134,491,035.	16	131,229,615.	
Liabilities	17 Accounts payable and accrued expenses	164,345.	17	61,779.
	18 Grants payable	166,028.	18	1,516,083.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	3,719,206.	25	7,905,231.
	26 Total liabilities. Add lines 17 through 25	4,049,579.	26	9,483,093.
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
27 Unrestricted net assets		108,503,980.	27	100,398,339.
28 Temporarily restricted net assets		21,183,911.	28	20,591,618.
29 Permanently restricted net assets		753,565.	29	756,565.
Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
30 Capital stock or trust principal, or current funds			30	
31 Paid-in or capital surplus, or land, building, or equipment fund			31	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 Total net assets or fund balances		130,441,456.	33	121,746,522.
34 Total liabilities and net assets/fund balances	134,491,035.	34	131,229,615.	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,643,545.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,711,460.
3	Revenue less expenses. Subtract line 2 from line 1	3	932,085.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	130,441,456.
5	Net unrealized gains (losses) on investments	5	-8,130,680.
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	-1,496,339.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	121,746,522.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? _____ 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	3b	

Form 990 (2014)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see Instructions)	(vi) Amount of other support (see Instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1782043.	5192669.	2795897.	98880210.	4184433.	112835252
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3	1782043.	5192669.	2795897.	98880210.	4184433.	112835252
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						112835252

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	1782043.	5192669.	2795897.	98880210.	4184433.	112835252
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	450,725.	476,444.	532,975.	1924257.	6455147.	9839548.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...				6,543.	2312549.	2319092.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	245,114.	-68,160.	103,446.	139,858.	979,263.	1399521.
11 Total support. Add lines 7 through 10						126393413
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	89.27 %
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	84.47 %
16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2014

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests - 2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b **Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c **Substitutions only.** Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Part IV Supporting Organizations (continued)

- 11 Has the organization accepted a gift or contribution from any of the following persons?
- a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- b A family member of a person described in (a) above?
- c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in **Part VI**.

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
1		

Section D. Type III Supporting Organizations

- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.

	Yes	No
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):
- a ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- b ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in **Part VI**.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.		
9	Distributable amount for 2014 from Section C, line 6		
10	Line 8 amount divided by Line 9 amount		

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.
Also complete this part for any additional information. (See instructions).

OTHER INCOME LINE 10

PROGRAM SERVICES; ADMINISTRATION FEE REVENUE; AND REALIZED GAINS

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public
Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization NEVADA COMMUNITY FOUNDATION, INC.	Employer identification number 88-0241420
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ **3,300.**
- 3 Volunteer hours **0.**

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2014

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a. If zero or less, enter -0-															
i Subtract line 1f from line 1c. If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?															

☐ Yes ☐ No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2014

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?	X		3,300.
j Total. Add lines 1c through 1i			3,300.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART I-A, LINE 1:

CONTRACT WITH PRIVATE COMPANY TO MONITOR AND LOBBY FOR LEGISLATION

IMPORTANT TO COMMUNITY FOUNDATIONS ON A NATIONAL LEVEL.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

CONTRACT WITH PRIVATE COMPANY TO MONITOR AND LOBBY FOR LEGISLATION

Schedule C (Form 990 or 990-EZ) 2014 NEVADA CO	
Part IV	Supplemental Information (continued)

IMPORTANT TO COMMUNITY FOUNDATIONS ON A NATIONAL LEVEL.

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.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number
88-0241420

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	57	46
2 Aggregate value of contributions to (during year)	2,952,462.	1,153,520.
3 Aggregate value of grants from (during year)	7,128,724.	1,242,313.
4 Aggregate value at end of year	100,632,911.	5,245,645.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☒ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

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

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

(i) Revenue included in Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included in Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

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

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

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
 e ☐ Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ Nob If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	14,649,355.	12,628,262.	11,892,712.	12,387,279.	
b Contributions	3,469.	500,000.	4,698.		12,387,278.
c Net investment earnings, gains, and losses	-32,853.	2,018,017.	1,168,986.	-193,964.	5,028.
d Grants or scholarships	11,000.	72,921.		65,677.	
e Other expenditures for facilities and programs			60,620.	500.	
f Administrative expenses	453,710.	424,003.	377,514.	234,426.	
g End of year balance	14,155,261.	14,649,355.	12,628,262.	11,892,712.	12,392,306.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ☐ 49.00 %
 b Permanent endowment ☐ 5.00 %
 c Temporarily restricted endowment ☐ 46.00 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations ☐
 (ii) related organizations ☐

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

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		144,225.	122,437.	21,788.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				21,788.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	17,080,000.	END-OF-YEAR MARKET VALUE
(3) Other		
(A) 143,960 SHS VANGAURD		
(B) TOTAL STOCK MARKET	13,590,105.	END-OF-YEAR MARKET VALUE
(C) 182,910 SHS ISHARE TR		
(D) CORE MSCI	9,511,320.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	40,181,425.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) AGENCY OBLIGATIONS	1,750,506.
(3) CHARITABLE REMAINDER TRUST	38,049.
(4) OTHER PAYABLES	7,217.
(5) FDN ADMIN FEES PAYABLE	-3,103.
(6) DEFERRED TAX LIABILITY	6,112,562.
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	7,905,231.

2. Liability for uncertain tax positions. 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 ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	3,528,037.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-8,130,680.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	15,172.
e	Add lines 2a through 2d	2e	-8,115,508.
3	Subtract line 2e from line 1	3	11,643,545.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	11,643,545.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	12,332,101.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	1,620,641.
e	Add lines 2a through 2d	2e	1,620,641.
3	Subtract line 2e from line 1	3	10,711,460.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	10,711,460.

Part XIII Supplemental Information.

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.

PART V, LINE 4:

TO AID NEVADA ORGANIZATIONS ENGAGED IN THE ASSISTANCE FOR ABUSED CHILDREN, ANIMALS, WILDLIFE, SENIORS, AND LOCAL PBS. TO SUPPORT ORGANIZATIONS THAT PROMOTE SCIENCE AND MATH PROJECTS. TO DISTRIBUTE FUNDS AS DESIGNATED BY THE DONOR OR SOURCE OF FUNDS.

PART X, LINE 2:

THE AUDITED FINANCIAL STATEMENTS INCLUDED A FOOTNOTE THAT ADDRESSED THE FIN 48 (ASC 740) UNCERTAIN TAX POSITIONS. THIS FOOTNOTE STATES, "MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE THE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF

Part XIII Supplemental Information (continued)

THIS GUIDANCE."

PART XI, LINE 2D - OTHER ADJUSTMENTS:

INTEREST INCOME INCLUDED IN SUPPORTING ORGANIZATIONS' FORM

990 8.

CONTRIBUTIONS INCLUDED IN SUPPORTING ORGANIZATIONS' FORM

990 2,800.

NET UNREALIZED GAINS ON INVESTMENTS IN SUPPORTING

ORGANIZATIONS' FORM 990 12,364.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 15,172.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

ACCOUNTING FEES INCLUDED IN SUPPORTING ORGANIZATIONS' FORM

990 800.

CONSULTING SERVICE FEES INCLUDED IN SUPPORTING

ORGANIZATIONS' FORM 990 7,500.

OTHER EXPENSES INCLUDED IN SUPPORTING ORGANIZATIONS' FORM

990 1,670.

OFFICE EXPENSES INCLUDED IN SUPPORTING ORGANIZATIONS' FORM

990 1,342.

ADMIN FEES INCLUDED IN SUPPORTING ORGANIZATIONS' FORM 990 12,716.

GRANTS INCLUDED IN SUPPORTING ORGANIZATIONS' FORM 990 100,274.

PREPAID FEDERAL INCOME TAXES 1,496,339.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 1,620,641.

SCHEDULE I
(Form 990)Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.Department of the Treasury
Internal Revenue Service

2014

Open to Public
Inspection▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.Employer identification number
88-0241420

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEVELAND CLINIC FOUNDATION-LOU RUVO CENTER - 888 WEST BONNEVILLE AVENUE - LAS VEGAS, NV 89106	34-0714585	501(C)(3)	2,082,000.	0.			CHARITABLE GRANT
LOS ANGELES OPERA COMPANY 135 N GRAND AVENUE LOS ANGELES, CA 90012	95-2096402	501(C)(3)	1,000,000.	0.			CHARITABLE GRANT
UNIVERSITY OF SOUTHERN CALIFORNIA 700 CHILDS WAY LOS ANGELES, CA 90089-0914	95-1642394	501(C)(3)	1,000,000.	0.			CHARITABLE GRANT
GOLDEN HEART RANCH 730 PIER AVENUE, SUITE B194 HERMOSA BEACH, CA 90254	26-3131470	501(C)(3)	1,000,000.	0.			CHARITABLE GRANT
NEVADA MILITARY SUPPORT ALLIANCE 985 DAMONTE RANCH PARKWAY, SUITE 31 RENO, NV 89521	27-1095956	501(C)(3)	500,000.	0.			CHARITABLE GRANT
I HAVE A DREAM FOUNDATION, INC - LAS VEGAS - 3773 HOWARD HUGHES PKWY, THIRD FLOOR SOUTH - LAS VEGAS, NV 89169	88-0312222	501(C)(3)	492,698.	0.			CHARITABLE GRANT
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table							78.
3 Enter total number of other organizations listed in the line 1 table							

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

Schedule I (Form 990) (2014)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROVIDENCE HEALTH & SERVICES FOUNDATION - 501 SOUTH BUENA VISTA STREET - BURBANK, CA 91505	95-3544877	501(C)(3)	400,000.	0.			CHARITABLE GRANT
COMMUNITIES IN SCHOOLS OF NEVADA 3720 HOWARD HUGHES PARKWAY LAS VEGAS, NV 89169	88-0292094	501(C)(3)	350,000.	0.			CHARITABLE GRANT
WESTCARE NEVADA, INC. 5659 DUNCAN DRIVE LAS VEGAS, NV 89130	94-2778981	501(C)(3)	350,000.	0.			CHARITABLE GRANT
WORLD BOXING COUNCIL BOXERS FOUNDATION - 7309 INDIAN SCHOOL ROAD, NE - ALBUQUERQUE, NM 87110	46-0769633	501(C)(3)	77,800.	0.			CHARITABLE GRANT
THE MEADOWS SCHOOL 8601 SCHOLAR LANE LAS VEGAS, NV 89128-7302	94-2795420	501(C)(3)	75,000.	0.			CHARITABLE GRANT
EQUIPO ACADEMY 649 LUCKY PINE STREET HENDERSON, NV 89002	47-3706052	501(C)(3)	58,000.	0.			CHARITABLE GRANT
MANHATTAN SCHOOL OF MUSIC 120 CLAREMONT AVENUE NEW YORK, NY 10027	13-1656667	501(C)(3)	57,000.	0.			CHARITABLE GRANT
JDRF 811 WILSHIRE BLVD, SUITE 1600 LOS ANGELES, CA 90017	23-1907729	501(C)(3)	50,000.	0.			CHARITABLE GRANT
UNITED CEREBRAL PALSY OF NEW YORK CITY INC - 80 MAIDEN LN FL 8 - NEW YORK, NY 10038	13-5654532	501(C)(3)	50,000.	0.			CHARITABLE GRANT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEVADA AUTOMOBILE MUSEUM 3250 N. TENAYA WAY, SUITE 104 LAS VEGAS, NV 89129	20-0862300	501(C)(3)	50,000.	0.			CHARITABLE GRANT
PEDIATRIC THERAPY NETWORK 1815 W 213TH STREET, SUITE 100 TORRANCE, CA 90501	33-0706273	501(C)(3)	50,000.	0.			CHARITABLE GRANT
WORLD FEDERATION OF BALLROOM DANCERS, INC. - 1077 PONCE DE LEON BLVD - CORAL GABLES, FL 33134	59-2701031	501(C)(3)	46,600.	0.			CHARITABLE GRANT
CRESTWOOD ELEMENTARY SCHOOL 1300 PAULINE WAY LAS VEGAS, NV 89104	88-6000030	501(C)(3)	40,860.	0.			CHARITABLE GRANT
FUTURE SMILES 3074 ARVILLE STREET LAS VEGAS, NV 89102	27-3160598	501(C)(3)	35,000.	0.			CHARITABLE GRANT
UNLV FOUNDATION 4505 MARYLAND PKWY, PO BOX 451006 LAS VEGAS, NV 89154-1006	94-2790134	501(C)(3)	32,200.	0.			CHARITABLE GRANT
TOURO UNIVERSITY NEVADA 874 AMERICAN PACIFIC DRIVE HENDERSON, NV 89014	20-0363127	501(C)(3)	30,000.	0.			CHARITABLE GRANT
CHARLES SILVESTRI JUNIOR HIGH SCHOOL - 1055 SILVERADO RANCH BOULEVARD - LAS VEGAS, NV 89183	88-6000030	501(C)(3)	25,268.	0.			CHARITABLE GRANT
NEVADA MEDICAL CENTER INC. 325 S MARYLAND PKWY LAS VEGAS, NV 89101	46-3480316	501(C)(3)	22,282.	0.			CHARITABLE GRANT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIVING SPIRIT (THE) 11908 MONTANA AVENUE, 205 LOS ANGELES, CA 90049	61-1405121	501(C)(3)	20,000.	0.			CHARITABLE GRANT
CHOC FOUNDATION 1201 W LA VETA AVENUE ORANGE, CA 92868-3874	95-6097416	501(C)(3)	20,000.	0.			CHARITABLE GRANT
OPPORTUNITY VILLAGE 6300 WEST OAKY BOULEVARD LAS VEGAS, NV 89146	88-0272831	501(C)(3)	19,708.	0.			CHARITABLE GRANT
NATHAN ADELSON HOSPICE FOUNDATION 4131 SWENSON STREET LAS VEGAS, NV 89119	88-0161009	501(C)(3)	18,708.	0.			CHARITABLE GRANT
HELP OF SOUTHERN NEVADA 1640 EAST FLAMINGO, SUITE 100 LAS VEGAS, NV 89119-5280	88-0108496	501(C)(3)	15,614.	0.			CHARITABLE GRANT
SPREAD THE WORD NEVADA 1065 AMERICAN PACIFIC DRIVE, SUITE HENDERSON, NV 89074	22-3829041	501(C)(3)	15,000.	0.			CHARITABLE GRANT
THE SMITH CENTER 361 SYMPHONY PARK AVENUE LAS VEGAS, NV 89106	88-0361875	501(C)(3)	12,750.	0.			CHARITABLE GRANT
WILDEARTH GUARDIANS 516 ALTO STREET SANTA FE, NM 87501	85-0406306	501(C)(3)	12,500.	0.			CHARITABLE GRANT
FIRST TEE OF SOUTHERN NEVADA, THE 1680 VILLAGE CENTER CIRCLE, SUITE 1 LAS VEGAS, NV 89134	94-2621058	501(C)(3)	12,000.	0.			CHARITABLE GRANT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS AND GIRLS CLUB OF SOUTHERN NEVADA - 2850 LINDELL ROAD - LAS VEGAS, NV 89146	88-0093150	501(C)(3)	11,171.	0.			CHARITABLE GRANT
ROBERT MCQUEEN HIGH SCHOOL 6055 LANCER STREET RENO, NV 89523	88-6000919	501(C)(3)	10,000.	0.			CHARITABLE GRANT
U.S.C. ATHLETIC DEPARTMENT 3501 WATT WAY, HERITAGE HALL 203B LOS ANGELES, CA 90089-0602	95-1642394	501(C)(3)	10,000.	0.			CHARITABLE GRANT
KNPR NEVADA PUBLIC RADIO 1289 SOUTH TORREY PINES DRIVE LAS VEGAS, NV 89146	23-7441306	501(C)(3)	10,000.	0.			CHARITABLE GRANT
UCLA FOUNDATION 10920 WILSHIRE BLVD, SUITE 1400 LOS ANGELES, CA 90024	95-2250801	501(C)(3)	10,000.	0.			CHARITABLE GRANT
VALLEY HIGH SCHOOL 2839 S BURNHAM AVENUE LAS VEGAS, NV 89109	88-0275767	501(C)(3)	9,742.	0.			CHARITABLE GRANT
MOJAVE HIGH SCHOOL 5302 GOLDFIELD STREET N. LAS VEGAS, NV 89031	88-0275767	501(C)(3)	9,694.	0.			CHARITABLE GRANT
SWOPE MIDDLE SCHOOL 901 KEELE DRIVE RENO, NV 89509	88-6000919	501(C)(3)	8,103.	0.			CHARITABLE GRANT
CONGREGATION NER TAMID 55 NORTH VALLE VERDE DRIVE HENDERSON, NV 89074	88-0124799	501(C)(3)	8,000.	0.			CHARITABLE GRANT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLARK COUNTY PUBLIC EDUCATION FOUNDATION, INC. - 3360 W SAHARA AVENUE, SUITE 160 - LAS VEGAS, NV 89102	88-0275767	501(C)(3)	7,250.	0.			CHARITABLE GRANT
B D BILLINGHURST MIDDLE SCHOOL 6685 CHESTERFIELD LANE RENO, NV 89523	88-6000919	501(C)(3)	7,098.	0.			CHARITABLE GRANT
LIED DISCOVERY CHILDREN'S MUSEUM 360 PROMENADE PLACE LAS VEGAS, NV 89106	94-2943891	501(C)(3)	7,000.	0.			CHARITABLE GRANT
PAHRUMP VALLEY HIGH SCHOOL 501 E CALVADA BOULEVARD PAHRUMP, NV 89048	88-6001054	501(C)(3)	6,991.	0.			CHARITABLE GRANT
GEORGE WASHINGTON UNIVERSITY 2100 M STREET NW, STE 310 WASHINGTON, DC 20052	53-0196584	501(C)(3)	6,000.	0.			CHARITABLE GRANT
WOOD RIVER COMMUNITY YMCA, INC. 101 SADDLE ROAD KETCHUM, ID 83340	82-0481436	501(C)(3)	5,600.	0.			CHARITABLE GRANT
CALIFORNIA HOSPITAL MEDICAL CENTER FOUNDATION - 1401 S GRAND AVENUE - LEAVEY HALL - LOS ANGELES, CA 90015	95-4000909	501(C)(3)	5,500.	0.			CHARITABLE GRANT
CHAPARRAL HIGH SCHOOL 3850 ANNIE OAKLEY LAS VEGAS, NV 89121	88-0275767	501(C)(3)	5,000.	0.			CHARITABLE GRANT
DURANGO HIGH SCHOOL 7100 W DEWEY DRIVE LAS VEGAS, NV 89113	88-0275767	501(C)(3)	5,000.	0.			CHARITABLE GRANT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSISTANCE LEAGUE OF LAS VEGAS 6446 W. CHARLESTON BLVD LAS VEGAS, NV 89146	88-0137831	501(c)(3)	5,000.	0.			CHARITABLE GRANT
CATHOLIC CHARITIES OF SO. NEVADA 1501 LAS VEGAS BOULEVARD NORTH LAS VEGAS, NV 89101	88-0059425	501(c)(3)	5,000.	0.			CHARITABLE GRANT
SPECIAL OLYMPICS NEVADA 5670 WYNN ROAD, SUITE H LAS VEGAS, NV 89118	52-0889518	501(c)(3)	5,000.	0.			CHARITABLE GRANT
DIABETES ACTION RESEARCH AND EDUCATION FOUNDATION, INC. - PO BOX 34635 - BETHESDA, MD 20827	52-1714027	501(c)(3)	5,000.	0.			CHARITABLE GRANT
SERVING OUR KIDS FOUNDATION 360 E HORIZON DRIVE HENDERSON, NV 89015	30-0747568	501(c)(3)	5,000.	0.			CHARITABLE GRANT
HUMAN RIGHTS CAMPAIGN FOUNDATION 1640 RHODE ISLAND AVENUE, NW WASHINGTON, DC 20036	52-1481896	501(c)(3)	5,000.	0.			CHARITABLE GRANT
MALIVAI WASHINGTON KIDS FOUNDATION INC. - 1096 W 6TH STREET - JACKSONVILLE, FL 32209	59-3559150	501(c)(3)	5,000.	0.			CHARITABLE GRANT
TONOPAH ELEMENTARY/MIDDLE SCHOOL 1220 IDAHO CIRCLE TONAPAH, NV 89049	88-6001054	501(c)(3)	5,000.	0.			CHARITABLE GRANT
ROSEMARY CLARKE MIDDLE SCHOOL 4201 N BLAGG ROAD PAHRUMP, NV 89060	88-6001054	501(c)(3)	5,000.	0.			CHARITABLE GRANT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROUND MOUNTAIN HIGH SCHOOL 61 HADLEY CIRCLE ROUND MOUNTAIN, NV 89045	88-6001054	501(C)(3)	5,000.	0.			CHARITABLE GRANT
BATTLE MOUNTAIN HIGH SCHOOL 425 WEAVER AVENUE BATTLE MOUNTAIN, NV 89820	88-0113117	501(C)(3)	5,000.	0.			CHARITABLE GRANT
BEATTY HIGH SCHOOL 1 HORNET AVENUE BEATTY, NV 89003	88-6001054	501(C)(3)	5,000.	0.			CHARITABLE GRANT
GEORGE WHITTELL HIGH SCHOOL 240 WARRIOR WAY ZEPHYR COVE, NV 89448	88-6000034	501(C)(3)	5,000.	0.			CHARITABLE GRANT
GOODIE TWO SHOES FOUNDATION 10620 SOUTHERN HIGHLANDS PKWY., SUITE 110-474 - LAS VEGAS, NV 89141	20-8862386	501(C)(3)	5,000.	0.			CHARITABLE GRANT
LINCOLN COUNTY HIGH SCHOOL 1111 EDWARDS STREET PANACA, NV 89042	88-0097614	501(C)(3)	5,000.	0.			CHARITABLE GRANT
ALBERT LOWRY HIGH SCHOOL 310 EAST 4TH STREET WINNEMUCCA, NV 89445	88-6000991	501(C)(3)	5,000.	0.			CHARITABLE GRANT
FERNLEY HIGH SCHOOL 1300 US-95 ALT FERNLEY, NV 89408	88-6000999	501(C)(3)	5,000.	0.			CHARITABLE GRANT
STEP BY STEP FOUNDATION 20898 SAN SIMON WAY MIAMI, FL 33179	20-1711047	501(C)(3)	5,000.	0.			CHARITABLE GRANT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
CENTER FOR BIOLOGICAL DIVERSITY, INC. - PO BOX 710 - TUCSON, AZ 85702	27-3943866	501(C)(3)	5,000.	0.			CHARITABLE GRANT	
WISH UPON A HERO FOUNDATION, INC. 1640 NIXON DRIVE, SUITE 336 MOORESTOWN, NJ 08057	22-3976768	501(C)(3)	5,000.	0.			CHARITABLE GRANT	
TALLADEGA COLLEGE 672 BATTLE STREET WEST TALLADEGA, AL 35160	63-0288870	501(C)(3)	5,000.	0.			CHARITABLE GRANT	
PLEASANT GROVE MISSIONARY BAPTIST CHURCH - 2411 BELLE GLADE AVENUE - ST. LOUIS, MO 63113	43-1044503	501(C)(3)	5,000.	0.			CHARITABLE GRANT	
LUMINOUS PARK 1112 S CASINO CENTER BLVD LAS VEGAS, NV 89104	27-2825100	501(C)(3)	5,000.	0.			CHARITABLE GRANT	
VAUGHN MIDDLE SCHOOL 1200 BRESSON AVENUE RENO, NV 89502	88-6000919	501(C)(3)	5,000.	0.			CHARITABLE GRANT	
MENDIVE MIDDLE SCHOOL 1900 WHITEWOOD DRIVE SPARKS, NV 89434	88-6000919	501(C)(3)	5,000.	0.			CHARITABLE GRANT	
EDWARD C REED HIGH SCHOOL 1350 BAKING BLVD. SPARKS, NV 89434	88-6000919	501(C)(3)	5,000.	0.			CHARITABLE GRANT	
POWDER RIVER BASIN RESOURCE COUNCIL - 934 NORTH MAIN STREET - SHERIDAN, WY 82801	74-2183158	501(C)(3)	5,000.	0.			CHARITABLE GRANT	

Schedule I (Form 990)

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

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

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

PART I, LINE 2:

GRANTS OF \$100,000 USUALLY REQUIRE AN AGREEMENT AND PERIODIC REPORTS. FOR

GRANTS OF LESS THAN \$100,000 THE FOUNDATION OBTAINS INFORMATION AVAILABLE

TO THE GENERAL PUBLIC AND CONTACT WITH THE GRANTEE TO DETERMINE IF THE

GRANTEE IS FULFILLING ITS NON PROFIT MISSION.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ **Attach to Form 990.**

▶ **Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

Part I Questions Regarding Compensation

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

☐ First-class or charter travel

☐ Travel for companions

☐ Tax indemnification and gross-up payments

☐ Discretionary spending account

☐ Housing allowance or residence for personal use

☐ Payments for business use of personal residence

☐ Health or social club dues or initiation fees

☐ Personal services (e.g., maid, chauffeur, chef)

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

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

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

☒ Compensation committee

☒ Independent compensation consultant

☐ Form 990 of other organizations

☐ Written employment contract

☒ Compensation survey or study

☒ Approval by the board or compensation committee

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

a Receive a severance payment or change-of-control payment?

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

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

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

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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

a The organization?

b Any related organization?

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

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

a The organization?

b Any related organization?

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

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

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

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

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

Schedule J (Form 990) 2014

Part III	Supplemental Information
----------	--------------------------

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

[illegible]

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2014

**Open To Public
Inspection**

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

Part I **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	12	788,731.	FAIR MARKET VALUE
10 Securities - Closely held stock	X	1	1,782,000.	FAIR MARKET VALUE
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

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

29

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

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

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

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

b If "Yes," describe in Part II.

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

	Yes	No
30a		X
31	X	
32a	X	
33		

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

Schedule M (Form 990) (2014)

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE VALUES REPORTED IN THIS COLUMN ARE THE NUMBER OF CONTRIBUTIONS.

SCHEDULE M, LINE 32B:

32A DONATIONS OF STOCKS, BONDS AND MUTUAL FUNDS ARE TRANSFERRED TO
NATIONAL FINANCIAL BY THE DONOR'S FINANCIAL INSTITUTION. THE DONATION
RECEIVED IS VALUED AT THE AVERAGE OF THE HIGH AND LOW FOR THE DAY THE
DONATION IS RECEIVED. NATIONAL IS INSTRUCTED TO SELL THE DONATED
STOCKS, BONDS OR MUTUAL FUNDS AND REMIT THE PROCEEDS TO THE NEVADA
COMMUNITY FOUNDATION'S ACCOUNT AT GREATER HORIZONS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number
88-0241420

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

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

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

OF THE COMMUNITY.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAM SERVICES INCLUDE- DESIGNATED PROGRAMS, FISCAL AGENCIES
PROGRAMS, DEFERRED CRT AND UNRESTRICTED PROGRAMS. THE DESIGNATED
PROGRAM FUNDS SPECIFIC CHARITIES. THE FISCAL AGENCIES PROGRAM PROVIDES
ACCOUNTING AND BACK OFFICE ASSISTANCE TO ORGANIZATIONS TO ASSIST THE
ORGANIZATIONS IN ACHIEVING THEIR CHARITABLE GOALS. UNRESTRICTED PROGRAM
EXPENSES ARE THE PROGRAM AREA'S SHARE OF GENERAL OPERATING EXPENSES.
EXPENSES \$ 1,040,825. INCL GRANTS OF \$ 395,218. REVENUE \$ 2,319,573.

FORM 990, PART VI, SECTION A, LINE 1:

ITEM 1A - EXECUTIVE COMMITTEE - HAS THE AUTHORITY TO ACT ON ALL MATTERS FOR
THE COMMUNITY FOUNDATION BETWEEN BOARD OF DIRECTORS MEETINGS. THE
COMMITTEE IS COMPOSED OF THE OFFICERS OF THE COMMUNITY FOUNDATION INCLUDING
THE CHAIRPERSON, VICE CHAIRPERSON, TREASURER, AND SECRETARY.

FORM 990, PART VI, SECTION B, LINE 11:

ORGANIZATION'S PROCESS TO REVIEW FORM 990 - THE FORM 990 IS LISTED AS A

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

SEPARATE ITEM ON THE BOARD AGENDA. A COPY OF THE FORM 990 IS GIVEN TO EACH MEMBER OF THE BOARD EITHER IN PAPER FORM OR ELECTRONICALLY BEFORE THE BOARD MEETING. A STAFF MEMBER PROVIDES A BRIEF OVERVIEW AND WILL GIVE A PAGE BY PAGE REVIEW OF THE FORM 990 IF REQUESTED BY THE BOARD. THE FORM 990 IS APPROVED BY THE BOARD BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 15A:

ITEM 15A- ORGANIZATION'S PROCESS FOR TOP OFFICIALS - THE BOARD WILL HIRE AN INDEPENDENT CONTRACTOR TO COORDINATE AND FACILITATE THE EXECUTIVE SEARCH PROCESS AND HELP DEVELOP THE COMPENSATION PACKAGE. AS PART OF THE CONTRACT, THE CONSULTANT WILL RESEARCH AND REVIEW NATIONAL AND LOCAL INDUSTRY STANDARDS FOR PRESIDENTS/CEOS OF COMPARABLE SIZE ORGANIZATIONS. SPECIFIC ATTENTION WILL BE PLACED ON COMMUNITY FOUNDATIONS OF COMPARABLE SIZE AND SOUTHERN NEVADA NONPROFITS OF COMPARABLE SIZE. THE FINDINGS OF THE CONSULTANT ARE PRESENTED TO THE EXECUTIVE SEARCH COMMITTEE. THE SEARCH COMMITTEE WILL SELECT THE THREE BEST QUALIFIED CANDIDATES AND ARRANGE FOR IN PERSON INTERVIEWS CONDUCTED BY THE COMMITTEE, BOARD MEMBERS AND STAFF. THE COMMITTEE WILL MAKE A RECOMMENDATION TO THE BOARD. THE BOARD WILL DISCUSS AND DELIBERATE THE ENTIRE COMPENSATION PACKAGE INCLUDING BASE SALARY, PERFORMANCE INCENTIVES AND BENEFITS AND THE QUALIFICATIONS OF THE RECOMMENDED CANDIDATE.

ITEM 15B- COMPENSATION FOR OTHER EMPLOYEES- THE COMPENSATION ESTABLISHED FOR OTHER EMPLOYEES IS BASED ON AVAILABLE DATA FROM OTHER ORGANIZATIONS SIMILAR SIZE. THE PRESIDENT WITH ADVICE FROM THE BOARD OF DIRECTORS IS RESPONSIBLE FOR SETTING THE COMPENSATION FOR ALL OTHER EMPLOYEES.

FORM 990, PART VI, SECTION C, LINE 19:

Name of the organization

NEVADA COMMUNITY FOUNDATION, INC.

Employer identification number

88-0241420

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FORM 990 AND
FINANCIAL STATEMENTS ARE AVAILABLE FOR INSPECTION AT THE OFFICE OF THE
COMMUNITY FOUNDATION. COPIES ARE AVAILABLE ON REQUEST. THE FINANCIAL
STATEMENTS AND FORM 990 ARE POSTED ON THE COMMUNITY FOUNDATION'S WEBSITE,
WWW.NEVADACF.ORG.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

PREPAID INCOME TAXES

-1,496,339.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT OR SELECTION PROCESS FOR
AN INDEPENDENT ACCOUNTANT.

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) RITTER CHARITABLE TRUST	C	19,500.ACTUAL	
(2) RITTER CHARITABLE TRUST	S	12,216.ACTUAL	
(3) SCHETTLE FAMILY FOUNDATION	S	500.ACTUAL	
(4)			
(5)			
(6)			

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

Provide additional information for responses to questions on Schedule R (see instructions).

Provide additional information for responses to questions on Schedule R (see instructions).