PUBLIC DISCLOSURE COPY

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury

5

Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2023 calendar year, or tax year beginning and ending Check if applicable: C Name of organization D Employer identification number Address change Community Foundation of Northern Nevada Name change 88-0370179 Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ termin-ated 775-333-5499 50 Washington St Ste 300 86,272,583. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return 89503 Reno, NV H(a) Is this a group return Applica-tion pending F Name and address of principal officer: Eaton Dunkelberger for subordinates? Yes X No same as C above **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) (4947(a)(1) or (insert no.) If "No," attach a list. See instructions J Website: NevadaFund.org H(c) Group exemption number **K** Form of organization: **X** Corporation Trust Association Other L Year of formation: 1998 M State of legal domicile: NV Part I Summary Briefly describe the organization's mission or most significant activities: Inspire philanthropy by Activities & Governance facilitating grants, scholarships, education and advising. 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) Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 -176.7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, Part I, line 11 7h Prior Year **Current Year** 12,275,107. 27,682,746. Contributions and grants (Part VIII, line 1h) 8 808,866. 829,123. Program service revenue (Part VIII, line 2g) 7,909,929. 4.972.080. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 47,539. 75,787. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 18,103,592. 36,497,585**.** Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13,305,103. 12,161,232. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 1,073,059. 1,428,907. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 1,088,937. 1,557,918. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 15,467,099. 15,148,057. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 2,636,493. 21,349,528. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 127,930,219. 155,102,999 20 Total assets (Part X, line 16) 12,146,601. 10,951,346 21 Total liabilities (Part X, line 26) 三年 115,783,618. 144,151,653 22 Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Date Sign Eaton Dunkelberger, President and CEO Here Type or print name and title Date PTIN Preparer's signature Print/Type preparer's name Deb Nelson, CPA 11/08/24 P01264758 Deb Nelson, CPA Paid self-employed Eide Bailly LLP Firm's name Firm's EIN 45-0250958 Preparer Firm's address 800 Nicollet Mall, Ste. 1300 Use Only Phone no. 612-253-6500 Minneapolis, MN 55402-7033 X Yes May the IRS discuss this return with the preparer shown above? See instructions

	990 (2023) Community Foundation of Northern Nevada 88-0370179 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	To strengthen our community through philanthropy and leadership by
	connecting people who care with causes that matter.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 X 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 \$
	The Community Foundation of Northern Nevada was created as a permanent
	community resource of charitable funds, which are administered to
	foster positive change and enrich lives across the region.
	Tobeth positive change and childh lives delege the legion.
	To strengthen our community through philanthropy and leadership by
	connecting people who care with causes that matter.
	connecting people who care with causes that matter.
	The Community Foundation of Northern Nevada is dedicated to enhancing
	the greater good by nurturing philanthropy and serving as a steadfast
	charitable resource, convener, and hub for generous giving. We provide
	diverse charitable vehicles to support the philanthropic aspirations of
	individuals, families, and organizations, including donor-advised
4 b	
4b	(Code:) (Expenses \$) (Revenue \$)
4c	(Code:) (Expenses \$

) (Revenue \$

including grants of \$ 13,527,116.

4d Other program services (Describe on Schedule O.)

Total program service expenses

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
Ü	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	۳		
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		37	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	1
С	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	11c		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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
1	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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	14b	х	
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	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	<u></u>		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17		10		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		x
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	⊢'′		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		X
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		_^
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			\ v
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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? If "Yes." complete Schedule I, Parts I and II	21	X	

88-0370179 Page 4 Part IV | Checklist of Required Schedules (continued) Yes No 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? If "Yes," complete Schedule I, Parts I and III Х 22 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? If "Yes." complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х Schedule K. If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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? If "Yes," complete Schedule L, Part I 25a Х 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? If "Yes," complete Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Х 26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes." complete Schedule L, Part IV **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c Х 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes." complete Schedule M./...... 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete 32 Х Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х 34 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity X within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 Х If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Х and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 39 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Page 5

Form 990 (2023) Community Foundation of Northern Nevada

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No					
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2a 20								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	Х	Х					
За	a Did the organization have unrelated business gross income of \$1,000 or more during the year?									
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O									
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 a	ccount)?	4a		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?		5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X					
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit								
	any contributions that were not tax deductible as charitable contributions?		6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or gifts								
	were not tax deductible?		6b							
7	Organizations that may receive deductible contributions under section 170(c).			37						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a	X						
			7b	Х	-					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	·			,,					
_	to file Form 8282?	l I	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	7e		х					
e	3 7 7 7 124									
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control.		7f 7g		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 organizations are interior at a property of the depart of		7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year?	by trie	8		Х					
9	Sponsoring organizations maintaining donor advised funds.									
a	2011		9a		Х					
	Did the appropriate appropriation makes a distribution to a description of the control of the co		9b		X					
10	Section 501(c)(7) organizations. Enter:		0.0							
	Initiation fees and capital contributions included on Part VIII, line 12	10a								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b								
11	Section 501(c)(12) organizations. Enter:									
	Gross income from members or shareholders	11a								
	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)	11b								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?		13a							
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans	13b								
	Enter the amount of reserves on hand	13c								
			14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune									
	excess parachute payment(s) during the year?		15		X					
	If "Yes," see the instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		X					
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17							
	If "Yes." complete Form 6069.									

Form 990 (2023) Community Foundation of Northern Nevada 88-0370179 Page Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below to lines 2 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI				X
Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	21		
	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 on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	21		
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the				
		·	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 99				Х
5	Did the organization become aware during the year of a significant diversion of the organization's asset				Х
6	Did the organization have members or stockholders?				Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app				
	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto				
-	persons other than the governing body?	•	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				
а	The governing body?	, ,	8a	Х	
b	Each committee with authority to act on behalf of the governing body?		- 1	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reac		05		
•	organization's mailing address? <i>If</i> "Yes." <i>provide the names and addresses on Schedule O</i>		9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev		5		
	areas and a section B requests information about policies not required by the internal new	enue Code.)		Yes	No
102	Did the organization have local chapters, branches, or affiliates?		10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such cha	entore affiliatos	10a		
b	and branches to ensure their operations are consistent with the organization's exempt purposes?	apters, armates,	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body	hefore filing the form?		Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	before ming the form:	IIa		
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	х	
12a b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y(120	21	
С		,	12c	х	
12	on Schedule O how this was done Did the organization have a written whistleblower policy?			X	
13	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?			X	
14			14	25	
15	Did the process for determining compensation of the following persons include a review and approval	•			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		150	Х	
	The organization's CEO, Executive Director, or top management official			X	
D	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		15b	Λ	
40-					
Ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem		40-		х
	taxable entity during the year?		. 16a		Α_
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi		401		
800	exempt status with respect to such arrangements? tion C. Disclosure		16b		
17	List the states with which a copy of this Form 990 is required to be filed None	d 000 T (a a attaca 501 ()	(O) =!· \	a	L.I.
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	a 990-1 (section 501(c	(ദ)s only)	avallal	DIE
	for public inspection. Indicate how you made these available. Check all that apply.				
		on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, cor	iflict of interest policy,	and finan	cial	
	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 book	ks and records			
	Eaton Dunkelberger - 775-333-5499				
	50 Washington St, Ste 300, Reno, NV 89503				

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	Position (do not check more than one				nne	Reportable	Reportable	Estimated	
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		cer an	ia a a	recto	r/trus	tee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	l trus		ee/	m pen		1099-NEC)	1099-1120)	and related
	below	Individual trustee or director	Institutional trustee	-	Key employee	st co	er	1555 1.125,		organizations
	line)	Indivi	Instit	Officer	Key e	Highest compensated employee	Former			
(1) Eaton Dunkelberger	40.00									
President and CEO	0.00			X				241,551.	0.	17,183.
(2) Teri Miller	40.00				١.					
CFO (as of Feb)	0.00		L	X				159,927.	0.	16,126.
(3) Shari Netzel	40.00									١
VP of Donor Relations	0.00		_	X				135,211.	0.	9,510.
(4) Ross Kemper	40.00		1		١.			102 646		10 005
Interim CFO (thru Feb) (5) Kevin Melcher	2.00			Х				103,646.	0.	12,235.
(5) Kevin Melcher Board Chair (thru June)	0.00	Х		X				0.	0.	0.
(6) Beau Keenan -Board Vice	2.00	Δ	7	Δ				0.	0.	0.
Chair (thru June)/Chair (as of July)	0.00	Х		Х				0.	0.	0.
(7) Joel Muller-Trustee (thru June)	2.00	25		25				•	•	<u></u>
/Board Vice Chair (as of July	0.00	х		х				0.	0.	0.
(8) Julia Kingston	2.00							•		
Treasurer	1.00	Х		Х				0.	0.	0.
(9) Jason Morris	2.00									
Secretary	0.00	Х		Х				0.	0.	0.
(10) Steve Carrick	2.00							_	_	_
Trustee	0.00	Х						0.	0.	0.
(11) Leslie Daane	2.00							_		_
Trustee (thruJune)	0.00	Х						0.	0.	0.
(12) Tyson Cross	2.00	.,							,	0
Trustee	0.00	Х						0.	0.	0.
(13) Victor Bucher	2.00	٠,							0	0
Trustee (thru May) (14) Bonnie Drinkwater	0.00	Х						0.	0.	0.
, ,	2.00	v						_	_	0
Trustee	2.00	Х						0.	0.	0.
(15) Edward Estipona Trustee	0.00	Х						0.	0.	0
(16) Cheri Hill	2.00	Δ						J	U •	0.
Trustee	0.00	Х						0.	0.	0.
(17) Gail Humphreys	2.00	22	\vdash					0.	J •	<u> </u>
Trustee (thru June)	1.00	Х						0.	0.	0.
	• • •							<u> </u>	J•	5 000 (2222)

			res	NO
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		Х
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	4	Х	
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	5		Х
64	ation B. Indonesidant Contractors			

Section B. Independent Contractors

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) Name and business address	(B) Description of services	(C) Compensation
Cumming Management Group, 25220 Hancock Ave Suite 440, Murrieta, CA 92562	Project management	124,286.

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

Form 990 Community	7 Founda	ti	on	. 0	f	No	rt	hern Nevada	88-037	0179
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average	Position					Reportable	Reportable	Estimated	
	hours	(cl	(check all that apply)		compensation	compensation	amount of			
	per							from	from related	other
	week	7				loyee		the	organizations	compensation
	(list any hours for	lirecto				l em p		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	3e or (stee			ısateo		(***2/1099****100)		and related
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee				organizations
	below	vidual	tutior	.ec	Key employee	est c	ner			
	line)	Indi	Inst	Officer	Key	High	Former			
(27) Allison Gorelick	2.00									
Trustee	0.00	Х						0.	0.	0.
(28) Teela McCullar	2.00									
Trustee (as of July)	0.00	Х						0.	0.	0.
(29) Jonnie Pullman	2.00									
Trustee	0.00	Х						0.	0.	0.
(30) Ann Rosevear	2.00									
Trustee	0.00	Х						0.	0.	0.
(31) Mary Simmons	2.00									
Trustee (as of July)	0.00	Х						0.	0.	0.
					1		1			
										_
		\ \	-	4						
						. 1				
								2		
21811										
1)10										
Tatal to Doub VIII. Continue A. Pros. 4										
Total to Part VII, Section A, line 1c	otal to Part VII, Section A, line 1c									

		Check if Schedule O contains a response of	or note to any line	e 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
ifts, Grants ar Amounts	b	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f 1g \$	595,485. 27,087,261. 7,685,255.				
Š	_	Total. Add lines 1a-1f		27,682,746.			
<u> </u>		Totally lide in los Ta Ti	Business Code	<u> </u>			
	_	Nevada Dream Tags	900099	6E0 E1E	658,515.		
service Iue	b		300033	658,515.	636,513.		
Program Service Revenue	c d e						
Pro		All other program service revenue	900099	170,608.	170,608.		
				829,123.	2,0,000		
		Total. Add lines 2a-2f		025,125.			
	3	Investment income (including dividends, intere				4-6	
		other similar amounts)		3,757,779.		-176.	3757955.
	4	Income from investment of tax-exempt bond p	roceeds				
	5	Royalties		30,465.			30,465.
		(i) Real (ii) Real (iii) Real (ii	(ii) Personal) [DI
		Less: rental expenses 6b 66,897.					
	С	Rental income or (loss) 6c 45,322.					
	d	Net rental income or (loss)		45,322.			45,322.
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 53,860,251.					
une		Less: cost or other basis and sales expenses 7b 49,708,101.					
) ve	C						
Other Revenue	8 a	Gross income from fundraising events (not		4,152,150.			4152150.
ō		including \$ of contributions reported on line 1c). See					
		Part IV, line 188a					
		Less: direct expenses8b					
	С	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19					
	b	Less: direct expenses 9b					
	С	Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
		and allowances 10a					
\rightarrow	С	Net income or (loss) from sales of inventory					
S			Business Code				
no a	11 a						
ane Judi	b						
elk eve	С			·			
Miscellaneous Revenue	ď	All other revenue					
Σ	~	Total. Add lines 11a-11d					
		Total revenue See instructions		36 497 585.	829 123.	-176.	7985892.

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 (B)
Program service
expenses (**D**)
Fundraising (C) Management and general expenses (A) Total expenses Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 11,205,426. 11,205,426. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 827,180. 827,180. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 128,626. 128,626. Benefits paid to or for members Compensation of current officers, directors, 695,388. 278,155. 278,155. 139,078. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 519,630. 207,852. 207,852. 103,926. 7 Pension plan accruals and contributions (include 30,973. 12,389. 12,389. 6,195. section 401(k) and 403(b) employer contributions) 93,091. 37,237.37,236. 18,618. Other employee benefits 9 89,825. 35,930. 35,930. 17,965. 10 Payroll taxes 11 Fees for services (nonemployees): Management 6,072. 6,072. Legal 73,292. 73,292. Accounting Lobbying Professional fundraising services. See Part IV, line 17 465,391. Investment management fees 465,391 Other. (If line 11g amount exceeds 10% of line 25, 72,484. 72,484. column (A), amount, list line 11g expenses on Sch O.) 87,850. 87,850. Advertising and promotion 12 56,527. 35,329. 14,132. 7,066. Office expenses 13 104,301. 29,002. 50,200. 25,099. Information technology 14 Royalties 15 65,910. 26,364. 26,364. 13,182. 16 Occupancy _____ 4,652. 4,652. 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 28,812. 28,812. Conferences, conventions, and meetings 19 33,436. 33,436. 20 Payments to affiliates 21 2,856. 7,140. 2,856. 1,428. Depreciation, depletion, and amortization 22 16,083. 10,052. 4,021. 2,010. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 377,289. 377,289. Direct fund expenses fo 114,487. Initiative expenses 114,487. С d 44,192. 44,192. All other expenses 15,148,057. 13,527,116. 1,286,374. 334,567. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2023)
Part X Balance Sheet

Га	IL A	Dalance Sneet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1			
	2	Savings and temporary cash investments			12,806,452.	2	17,558,310.
	3	Pledges and grants receivable, net			10,124,684.	3	1,180,121.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes		5			
	6	Loans and other receivables from other disqualit	•	,			
		under section 4958(f)(1)), and persons described				6	
ţ	7	Notes and loans receivable, net				7	7,906,412.
Assets	8	Inventories for sale or use			64.606	8	50 610
⋖	9				64,626.	9	50,613.
	10a	Land, buildings, and equipment: cost or other		0 100 675			
		basis. Complete Part VI of Schedule D	10a	9,103,675.	4 720 006		7 006 047
		Less: accumulated depreciation		1,297,628.	4,738,006.	10c	7,806,047.
	11	Investments - publicly traded securities			88,304,110.		107,711,656.
	12	Investments - other securities. See Part IV, line 1	9,165,005.	12	9,806,804.		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets	2 727 226	14	2 002 026		
	15	Other assets. See Part IV, line 11			2,727,336. 127,930,219.	15	3,083,036.
	16	Total assets. Add lines 1 through 15 (must equa	-		154,811.	16	155,102,999. 115,329.
	17	Accounts payable and accrued expenses		4,817,233.	17 18	3,367,509.	
	18 19	Grants payable	±,017,233•	19	3,307,303.		
	20	Deferred revenue				20	
	21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete I		of Cohodulo D		21	
	22	Loans and other payables to any current or form				7	
Liabilities	~~	trustee, key employee, creator or founder, subst					
iii		controlled entity or family member of any of thes				22	
Ë	23	Secured mortgages and notes payable to unrela			1,543,775.	23	1,574,935.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines					
		of Schedule D	,	,	5,630,782.	25	5,893,573.
1	26	Total liabilities. Add lines 17 through 25			12,146,601.	26	10,951,346.
		Organizations that follow FASB ASC 958, che					
Ses		and complete lines 27, 28, 32, and 33.					
<u>a</u> u	27	Net assets without donor restrictions			38,703,682.	27	48,861,540.
Ba	28	Net assets with donor restrictions			77,079,936.	28	95,290,113.
u		Organizations that do not follow FASB ASC 9	58, che	eck here			
Ę		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or ed	uipmer	nt fund		30	
t As	31	Retained earnings, endowment, accumulated in				31	
Se.	32	Total net assets or fund balances			115,783,618.		144,151,653.
	33	Total liabilities and net assets/fund balances			127,930,219.	33	155,102,999.

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?

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

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

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

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

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

Yes

Х

X

2c

За

No

Х

Х

Page 12

X

SCHEDULE A

(Form 990)

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Community Foundation of Northern Nevada

Employer identification number

			dation of Nor					8-0370179			
Part I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	s.				
The organ	ization is not a private found										
1	A church, convention of ch	urches, or associatio	on of churches described	in sectio	n 170(b)(1)(A)(i).					
2	A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)							
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 go	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).					
7 X	An organization that norma	ılly receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	e general _l	public described in			
	section 170(b)(1)(A)(vi). (C	omplete Part II.)									
8 🗌	A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Part	t II.)							
9 🗌	An agricultural research org	ganization described	in section 170(b)(1)(A)(i	ix) operate	ed in conju	unction with a	land-grant	college			
	or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of	the college	e or			
	university:										
10	An organization that norma	Illy receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membershi	ip fees, an	d gross receipts from			
	activities related to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support f	rom gross investment			
	income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.			
	See section 509(a)(2). (Co	mplete Part III.)	1171								
11 🔲	An organization organized a	and operated exclusi	ively to test for public sat	ety. See	section 50	09(a)(4).		- 1			
12	An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to car	rry out the	purposes of one or			
	more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section :	509(a)(2).	See section 5	509(a)(3). (Check the box on			
	lines 12a through 12d that	describes the type of	f supporting organizatior	and com	plete lines	12e, 12f, and	12g.				
а	Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	orted org	anization(s), ty	pically by	giving			
	the supported organization	on(s) the power to rec	gularly appoint or elect a	majority o	of the direc	ctors or trustee	es of the su	upporting			
	organization. You must o	complete Part IV, Se	ections A and B.								
b	Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organizatior	n(s), by hav	ving			
	control or management of	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported			
	organization(s). You mus	t complete Part IV,	Sections A and C.								
c 🗀	Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionall	ly integrate	ed with,			
\	its supported organization	n(s) (see instructions)). You must complete F	Part IV, Se	ections A,	D, and E.					
d	Type III non-functionally	y integrated. A supp	oorting organization oper	ated in co	nnection v	vith its suppor	ted organi:	zation(s)			
	that is not functionally int	tegrated. The organiz	zation generally must sati	isfy a distr	ibution red	quirement and	an attentiv	veness			
	requirement (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.					
e	Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type I	I, Type III				
	functionally integrated, or	r Type III non-functior	nally integrated supportir	ng organiz	ation.						
	er the number of supported o	•									
	vide the following information			(iv) le the oraș	anization listed	I (-) A		(vi) Amazumt of other			
•	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of support (see in	•	(vi) Amount of other support (see instructions)			
	organization		above (see instructions))	Yes	No	Support (See III	- Istructions,	Support (See Instructions)			
Total						I		1			

332021 12-21-23

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

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

Sec	Section A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
	include any "unusual grants.")	11185007.	9563265.	16926824.	12275107.	27682746.	77632949.				
2	Tax revenues levied for the organ-										
	ization'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	11185007.	9563265.	16926824.	12275107.	27682746.	77632949.				
	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)						9380403.				
6	Public support. Subtract line 5 from line 4.						68252546.				
	tion B. Total Support			1							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total				
7	Amounts from line 4	11185007.	9563265.	16926824.	12275107.	27682746.	77632949.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties,						1				
	and income from similar sources	2455641.	2039269.	3443204.	3629565.	3869998.	15437677.				
9	Net income from unrelated business										
	activities, whether or not the										
	business is regularly carried on		12,280.	68,861.			81,141.				
10	Other income. Do not include gain										
	or loss from the sale of capital										
	assets (Explain in Part VI.)										
11	Total support. Add lines 7 through 10						93151767.				
12	Gross receipts from related activities,	etc. (see instruction	ns)			12 4	<u>,226,093.</u>				
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third,	fourth, or fifth tax y	ear as a section 5	01(c)(3)					
	organization, check this box and sto										
	tion C. Computation of Publ					Г					
	Public support percentage for 2023 (14	73.27 %				
	Public support percentage from 2022					15	69.86 %				
16a	33 1/3% support test - 2023. If the										
	stop here. The organization qualifies										
b	33 1/3% support test - 2022. If the										
47.	and stop here. The organization qua										
1/a	10% -facts-and-circumstances test	-									
	and if the organization meets the fact				•	_					
L	meets the facts-and-circumstances to	-			-	Za and line 15 is					
a	10% -facts-and-circumstances test	-					1070 UI				
	more, and if the organization meets the				-						
19	organization meets the facts-and-circ										
10	Private foundation. If the organization	m did fiot check a l		a, 100, 17a, 01 17b	, oneck this box a	ia see instructions	·				

(Complete only if you checked the box on line 10 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.)

Secti	on A. Public Support		•						
Calend	ar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(е	2023	(f) Total	
1 G	ifts, grants, contributions, and								_
n	nembership fees received. (Do not								
ir	nclude any "unusual grants.")								
	Gross receipts from admissions,								
	nerchandise sold or services per- ormed, or facilities furnished in								
а	ny activity that is related to the								
	rganization's tax-exempt purpose								
	iross receipts from activities that								
	re not an unrelated trade or bus-								
	ness under section 513								
	ax revenues levied for the organ- cation's benefit and either paid to								
	r expended on its behalf								
	he value of services or facilities								
	urnished by a governmental unit to								
	ne organization without charge								
	otal. Add lines 1 through 5								
	mounts included on lines 1, 2, and								
	received from disqualified persons								
	mounts included on lines 2 and 3 received				_				
	om other than disqualified persons that sceed the greater of \$5,000 or 1% of the							_ 1	
	mount on line 13 for the year								
c A	dd lines 7a and 7b								
8 P	ublic support. (Subtract line 7c from line 6.)								
	ion B. Total Support		Г						
	ar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e	2023	(f) Total	
	mounts from line 6								
	iross income from interest, ividends, payments received on)					
S	ecurities loans, rents, royalties,								
	nd income from similar sources								
	nrelated business taxable income ess section 511 taxes) from businesses								
•	ess section 311 taxes) from businesses								
	dd lines 10a and 10b								
	let income from unrelated business								
а	ctivities not included on line 10b,								
	hether or not the business is egularly carried on								
	other income. Do not include gain								
	r loss from the sale of capital ssets (Explain in Part VI.)								
	otal support. (Add lines 9, 10c, 11, and 12.)								
14 F	irst 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3)	organizatic	on,	
	heck this box and stop here								
Secti	ion C. Computation of Publi	c Support Per	centage						
15 P	ublic support percentage for 2023 (I	ine 8, column (f), d	ivided by line 13, o	column (f))		15			%
	ublic support percentage from 2022					16			%
	on D. Computation of Inves								
	vestment income percentage for 20					17			<u>%</u>
	vestment income percentage from					18			<u>%</u>
	3 1/3% support tests - 2023. If the							Г	
	nore than 33 1/3%, check this box ar							L	
	3 1/3% support tests - 2022. If the	•			•		•	-	
	ne 18 is not more than 33 1/3%, che								_
20 P	rivate foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	truction	IS		

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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.
- 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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?
- 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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on 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 on line 9a) 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 on line 9a) 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 section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b 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
4		
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3b		
3с		
4a		
4b		
4c		
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5a		
5b		
5c		
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9a		
9b		
9с		
10a		
401		
10b		

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	dule A (Form 990) 2023 Community Foundation of			8-0370179 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	n Nov. 20, 1970 (<i>explain in</i> l	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must c	omplet	e Sections A through E.	
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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		I

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2023

instructions).

Schedule A (Form 990) 2023

Part VI. See instructions.

and 4c.

8 Breakdown of line 7:

a Excess from 2019

b Excess from 2020

c Excess from 2021

d Excess from 2022

e Excess from 2023

7 Excess distributions carryover to 2024. Add lines 3j

Schedule B

(Form 990)

Attach to Form 990, 990-EZ, or 990-PF. Department of the Treasury Internal Revenue Service

OMB No. 1545-0047

Name of the organization

Go to www.irs.gov/Form990 for the latest information.

Schedule of Contributors

Employer identification number

C	ommunity Foundation of Northern Nevada	88-0370179
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Charle if your argonization	is solvered by the Consul Rule or a Special Rule	
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling y one contributor. Complete Parts I and II. See instructions for determining a contributor's	
Special Rules	aciikl.	
sections 509(a)(1) contributor, durin or (ii) Form 990-E. For an organization contributor, durin literary, or education	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and 19 the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Fig. 1. Complete Parts I and II. On described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any the year, total contributions of more than \$1,000 exclusively for religious, charitable, so the prevention of cruelty to children or animals. Complete Parts I (end) instead of the contributor name and address), II, and III.	I that received from any one form 990, Part VIII, line 1h; any one entific,
year, contribution is checked, enter purpose. Don't co	on described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from a sexclusively for religious, charitable, etc., purposes, but no such contributions totaled may be the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it role, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., eceived <i>nonexclusively</i>
answer "No" on Part IV, lin	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fore 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF,	• •

Name of organization Employer identification number

Community Foundation of Northern Nevada

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 769,325.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$2,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	PUBL	\$1,426,525.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, address, and Zir + 4	\$ 2,684,623.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 7,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$3,158,435.	Person Payroll Noncash X (Complete Part II for noncash contributions.)

Name of organization Employer identification number

Community Foundation of Northern Nevada

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
7		\$ <u>1,124,813.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
8		\$ <u>848,250.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
9	PUBL	\$ 800,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
D	S	\$	Person Payroll Occash Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Name of organization Employer identification number

Community Foundation of Northern Nevada

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	IRA	\$	06/01/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	Stock	\$ <u>1,426,525</u> .	02/23/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	IRA	\$_1,278,389.	12/31/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	Stock	\$ <u>3,158,435</u> .	04/30/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	Cabadala D (Farm 000) (0000)

Name of organization **Employer identification number** Community Foundation of Northern Nevada 88-0370179

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. `from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP Relationship of transferor to transferee (a) No. (c) Use of gift from (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

Community Foundation of Northern Nevada

Employer identification number 88-0370179

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	120	
2	Aggregate value of contributions to (during year)	11,307,309.	
3	Aggregate value of grants from (during year)	6,602,560.	
4	Aggregate value at end of year	58,485,463.	
5	Did the organization inform all donors and donor advisors in v		
	are the organization's property, subject to the organization's $% \left(1\right) =\left(1\right) \left(1$	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose	•
_			
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (for example, recrea	tion or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation of	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last Held at the End of the Tax Year
	day of the tax year.		
	Total number of conservation easements		
C	Number of conservation easements on a certified historic stru		2c
a	Number of conservation easements included on line 2c acqu		
2	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	e organization during the tax
4	year Number of states where property subject to conservation eas	rement is located	
5	Does the organization have a written policy regarding the per		
Ū	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year
	3, 1 3,	3	3 ,
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170(h	ı)(4)(B)(i)
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the footn	note to the organization's financial stateme	ents that describes the
	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement a	and balance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in fu	urtherance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these item	ns.
b	If the organization elected, as permitted under FASB ASC 95	•	
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	nerance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical trea		ll gain, provide
	the following amounts required to be reported under FASB A	3	
а	Revenue included on Form 990, Part VIII, line 1		\$
h	Assets included in Form 900 Part V		C

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Continued	Sche	dule D		ty Foundat:						70179		ge 2
a	Pai									(continu	ıed)	
a Public exhibition d	3	-	•	on, and other record	s, check any of the	following that	make si	gnificant ı	use of its			
b Scholarly research e Other Preservation for future generations 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 assests to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on 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? 1b If Yes Open Art X? C Beginning balance C Beginning during the year I did C Distributions during the year Finding balance C Bistributions during the year Finding balance C Beginning of year balance C Bistributions be standarded and amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No												
c Preservation for future generations 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 answered "Yes" on Form 1900, Part IV, line 9, or reported an amount on Form 1900, Part X, line 21. 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 1900, Part X, line 21. 1b is the organization and part, include an amount on Form 1900, Part X, line 21. 1c c		=					ım					
Purify to perform a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year , did the organization solider for necesive donations of art. historical inseaures, or other similar asserts To be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. To be organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. To be organization and part the arrangement in Part XIII and complete the following table:			•	е	Other							
5 During the year, did the organization solicit or receive donations of art, historical breasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Second and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Italian Italian				llestions and synlair	bout thou further th		n'a avan	ant numa	aa in Dart	VIII		
To be sold for raise funds rather than to be maintained as part of the organization is collection? Yes No									se in Pari	AIII.		
Section and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustae, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Seginning balance	3				•	•				Vec		No
Teleported an amount on Form 990, Part X, line 21. Teleported an angent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Teleported an angent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X; line 21. Teleported and a set of the organization in Part XIII and complete the following table: Complete Teleported	Par											110
1				•	to ii tilo organization	T di lowered	100 0111	01111 000	, , a, c, , , ,	110 0, 01		
on Form 990, Part X? Ves	1a	Is the			diary for contribution	ns or other as:	sets not i	included				
b If "Yes," explain the arrangement in Part XIII and complete the following table: Complete Fire Fi										Yes		No
C Beginning balance 1c C C C C C C C C	b											
d Additions during the year 10 15 15 15 15 15 15 15										Amount		
Example Distributions during the year Example Ex	С	Begin	ning balance					1c				
f Ending balance	d	Addit	ions during the year					1d				
2a bit the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability	е	Distril	butions during the year					1e				
Describe in Part XIII Check here if the explanation has been provided in Part XIII Check here if the explanation has been provided in Part XIII Part Y Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part Y Endowment Funds Complete if the organization Complete Co										7	$\overline{}$	
Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.			-					ty?	L	」Yes	Щ	No
Table Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years												
1a Beginning of year balance 30,592,546 32,944,341 22,952,859 20,228,522 17,340,234 b Contributions 3,552,854 4,155,128 8,063,524 2,254,974 904,423 c Net investment earnings, gains, and losses 4,289,450 -4,773,855 3,302,472 1,605,845 2,654,589 d Grants or scholarships 1,621,490 1,419,378 1,128,394 749,013 340,297 e Other expenditures for facilities and programs 320,231 313,690 246,120 176,584 161,402 1 Administrative expenses 320,231 313,690 246,120 176,584 169,025 g End of year balance 36,493,129 30,592,546 32,944,341 22,952,859 20,228,522 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 3,900 % a Board designated or quasi-endowment 3,900 % Yes 85 32,944,341 22,952,859 20,228,522 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 340,000 340 340,000 340,000 340,000 340,000 340,000 <th>ı aı</th> <th></th> <th>Lindowinient i dinds Complete if</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>veare hack</th> <th>(a) Four v</th> <th>are h</th> <th>ack</th>	ı aı		Lindowinient i dinds Complete if						veare hack	(a) Four v	are h	ack
b Contributions	10	Pogin	uning of year balance	• • •								
to Net investment earnings, gains, and losses of the corporation of grants or scholarships												
d Grants or scholarships											<u> </u>	
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 320,231. 313,690. 246,120. 176,584. 169,025. g End of year balance 36,493,129. 30,592,546. 32,944,341. 22,952,859. 20,228,522. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 3.9000 % b Permanent endowment 96.1000 % Term endowment 1.0000 % The percentages on 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? b If "Yes" on line 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" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) (b) Cost or other depreciation 1a Land Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 1 Land 1 Land 1 Land 1 Land 2 Land 3 Land 4 Land 4 Land 5 Land 5 Lasehold improvements 1 1 2 6, 2 43 1. 71, 10 6, 181 1. 723, 115 2. 2, 589 4. 6 1 1 1 1 1 7, 842 2. 2, 589 4. 6 1 1 1 1 7, 842 2. 2, 589 4. 6 1 1 1 1 7, 842 2. 2, 589 4. 6 1 1 1 1 7, 842 2. 2, 589 4. 6 1 1 1 1 7, 842 2. 2, 589 4. 6 1 1 1 1 7, 842 2. 2, 589 4. 6 1 1 1 7, 842 2. 2, 589 4. 6 1 1 1 7, 842 2. 2, 589 4. 6 1 1 1 7, 842 2. 2, 589 4. 6 1 1 1 7, 842 2. 2, 589 4. 6 1 1 7, 58 7, 51 2. 6 2, 638 3. 6 2, 60 1 1 1 1 7, 842 2. 2, 589 4. 6 2, 60 1 1 1 7, 842 2. 2, 589 4. 6 2, 60 1 1 1 7, 842 2. 2, 589 4. 6 2, 60 1 1 1 7, 842 2. 2, 589 4. 6 2, 60 1 1 1 7, 842 2. 2, 589 4. 6 2, 60 1 1 1 7, 842 2. 2, 589 4. 6 2, 60 1 1 1 7, 842 2. 2, 589 4. 6 2, 60 1 1 1 7, 842 2. 2, 589 4. 6 2, 60 1 1 1 7, 842 2. 2, 589 4. 6 2, 60 1 1 1 7, 842 2. 2, 589 4. 6 2, 6	_											
and programs 320,231, 313,690, 246,120, 176,584, 169,025, g End of year balance 36,493,129, 30,592,546, 32,944,341, 22,952,859, 20,228,522, 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 3,9000 % b Permanent endowment 96,1000 % The percentages on 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? 3a(i) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3a(ii) X 4 Describe in Part XIII the intended uses of the organization's endowment funds.				<i>7</i> 1 1 1			_				1	
f b component of the current seasons of the current year end balance 320,231. 313,690. 246,120. 176,584. 169,025. 2 c Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Pervaluated percentage of the current year end balance (line 1g, column (a)) held as: Pervaluated percentage of the current year end balance (line 1g, column (a)) held as: 3 c Permanent endowment								2	210,885.		61,4	02.
Permanent endowment 96.1000 % the permanent endowment 96.1000 % The percentages on lines 2a, 2b, and 2c should equal 100%.	f	Admii	nistrative expenses	· · · · · · · · · · · · · · · · · · ·	313,690.	246	,120.	1	.76,584.	/ 1	169,0	25.
a Board designated or quasi-endowment 3.9000 % b Permanent endowment 96.1000 % The percentages on 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? (iii) Related organizations (g	End o	of year balance	36,493,129.	30,592,546.	32,944	,341.	22,9	52,859.	20,2	28,5	22.
b Permanent endowment 96.1000 % c Term endowment 00000 % The percentages on 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? (iii) Related organizations? (iii) Related organizations? (iv) 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" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation 1a Land (e) Accumulated depreciation					e (line 1g, column (a)) held as:						
c Term endowment .0000 % The percentages on 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:					_%							
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3a	С	1										
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(ii) Unrelated organizations? 3a(i) X (iii) Related organizations? 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other depreciation (d) Book value 1a Land 6, 151, 954. 6, 151, 954. 6, 151, 954. b Buildings 1,829, 296. 1,106, 181. 723, 115. c Leasehold improvements 120, 431. 117, 842. 2,589. d Equipment 126, 243. 73, 605. 52, 638. e Other 875, 751. 875, 751.	За			ssion of the organiza	ition that are held a	na aaminister	ea for the	Э		[·	/as	No
(ii) Related organizations? 3a(ii) X b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 3 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" on 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 6, 151, 954. 6, 151, 954. 6, 151, 954. 6, 151, 954. b Buildings 1,829, 296. 1,106, 181. 723, 115. c Leasehold improvements 120, 431. 117, 842. 2,589. d Equipment 126, 243. 73, 605. 52, 638. e Other 875, 751. 875, 751.		_									-	
b If "Yes" on line 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" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 6, 151, 954. 6, 151, 954. b Buildings 1,829,296. 1,106,181. 723,115. c Leasehold improvements 4 Equipment 6 Other 875,751.												
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" on 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 6,151,954. 6,151,954. 6,151,954. b Buildings 1,829,296. 1,106,181. 723,115. c Leasehold improvements 120,431. 117,842. 2,589. d Equipment 126,243. 73,605. 52,638. e Other 875,751. 875,751.	b										\neg	
Complete if the organization answered "Yes" on 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 1a Land 6,151,954. 6,151,954. b Buildings 1,829,296. 1,106,181. 723,115. c Leasehold improvements 120,431. 117,842. 2,589. d Equipment 126,243. 73,605. 52,638. e Other 875,751. 875,751. 875,751.												
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 6,151,954. 6,151,954. b Buildings 1,829,296. 1,106,181. 723,115. c Leasehold improvements 120,431. 117,842. 2,589. d Equipment 126,243. 73,605. 52,638. e Other 875,751. 875,751.	Par											
basis (investment) basis (other) depreciation 1a Land 6,151,954. 6,151,954. b Buildings 1,829,296. 1,106,181. 723,115. c Leasehold improvements 120,431. 117,842. 2,589. d Equipment 126,243. 73,605. 52,638. e Other 875,751. 875,751.			Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	See Form 990	, Part X, I	line 10.				
1a Land 6,151,954. 6,151,954. b Buildings 1,829,296. 1,106,181. 723,115. c Leasehold improvements 120,431. 117,842. 2,589. d Equipment 126,243. 73,605. 52,638. e Other 875,751. 875,751.			Description of property	(a) Cost or o	ther (b) Cos	t or other				(d) Book	value	
b Buildings 1,829,296. 1,106,181. 723,115. c Leasehold improvements 120,431. 117,842. 2,589. d Equipment 126,243. 73,605. 52,638. e Other 875,751. 875,751.				basis (investn		` ′	dep	preciation				
c Leasehold improvements 120,431. 117,842. 2,589. d Equipment 126,243. 73,605. 52,638. e Other 875,751. 875,751.								0.5.5				
d Equipment 126,243. 73,605. 52,638. e Other 875,751. 875,751.												
e Other 875,751. 875,751.							1					
								13,6	U D •			
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	rn	Nevada	88-0370179	Page 3
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Schedule D (Form 990) 2023 Community Fe	oundation of N	Northern Nevada	88-0370179 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	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			
(3) Other			
(A) Non Publicly Traded Stock	7,856,500.	End-of-Year Marke	
(B) LLCs	276,898.	End-of-Year Marke	
(C) Whippoorwill Offshore	258,317.	End-of-Year Marke	t Value
(D) Private Equity Partners			
(E) VIII Offshore	1,415,089.	End-of-Year Marke	t Value
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	9,806,804.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(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)	1121		
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 000 Dort IV line 1	11d Coo Form 000 Part V line 15	
	Description	Tid. See Form 990, Part X, line 15.	(b) Book value
	Description		(b) Book value
(1)			
(2)			
(3)			
(4) (5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col	(R))		
Part X Other Liabilities	. (D))		·
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	I1e or 11f. See Form 990, Part X, line	25.
1. (a) Description of liability	*		(b) Book value
(1) Federal income taxes			<u> </u>
(2) Split Interest Agreements			5,711,101.
(3) Funds Held for Others			35,410.
(4) Lease Liabilities			147,062.
(5)			,
(5)			

(3) Funds Held for Others (4) Lease Liabilities (5) (6) (7) (8) (9)	1. (a) Description of hability	(b) Dook value
(3) Funds Held for Others 35,410 (4) Lease Liabilities 147,062 (5) (6) (7) (8) (9) (5)		
(4) Lease Liabilities 147,062 (5) (6) (7) (8) (9)	(2) Split Interest Agreements	5,711,101.
(5) (6) (7) (8) (9)	(3) Funds Held for Others	35,410.
(6) (7) (8) (9)	(4) Lease Liabilities	147,062.
(7) (8) (9)	(5)	
(9)	(6)	
(9)	(7)	
F 002 FF2	(8)	
Tetal (0.4 4) 45 200 P-4 V (5- 25 4 (6))	(9)	
Total: (Column (b) must equal Form 990, Part X, line 25, col. (B))	Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	5,893,573.

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

Part X, Line 2:

Management believes that each entity has appropriate support for any tax

positions taken affecting its annual filing requirements, and as such,

does not have any uncertain tax positions that are material to the

consolidated financial statements. The Foundation would recognize future

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

Name of the organization **Employer identification number** Community Foundation of Northern Nevada 88-0370179 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (e) If activity listed in (d) (c) Number of (d) Activities conducted in the region (f) Total employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region Central America and the Caribbean -Antigua & Barbuda, Aruba, Bahamas 0 Investments 1,673,000. 0 0 1,673,000. 3 a Subtotal **b** Total from continuation 0 sheets to Part I Totals (add lines 3a

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

Schedule F (Form 990) 2023

1,673,000.

and 3b)

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South Asia	Grace Home	45,000.	Wire Transfer	0.		
		Sub-Saharan						
		Africa	New Girls Dormitory	74,000.	Wire Transfer	0.		
		Sub-Saharan		1 1 (
		Africa	WWF South Africa	9,626.	Wire Transfer	0.		7
		I					DY	
		_	- 01	IR	E			
		- 1	051					
٢	115	CL	000					
/								
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax								

3 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (d) Amount of (c) Number of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash assistance noncash assistance

Schedule F (Form 990) 2023 Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"	
	the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	X Yes No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may	
	be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and	
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a	
	U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"	
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to	
	Certain Foreign Corporations (see the Instructions for Form 5471)	X Yes No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a	
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,	
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing	
	Fund (see the Instructions for Form 8621)	X Yes No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"	
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain	
	Foreign Partnerships (see the Instructions for Form 8865)	X Yes No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If	
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see	
	the Instructions for Form 5713; don't file with Form 990)	Yes X No
		Schedule F (Form 990) 202
	119(1)	
	11707	

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part I, Line 2:

The organization requires reporting back from the grantee to support the funds were used for the intended charitable purpose.

Schedule F, Part IV:

The Foundation reviews its direct and indirect investments during the tax period for determining required foreign filings.

The Foundation makes direct and indirect transfers to foreign corporations and foreign partnerships. The Foundation would file Form 926 or Form 8865 if the transfers met the requirements for filing. The Foundation's transfers to foreign corporations did not require filing Form 926. The Foundation's transfers to foreign partnerships did not require filing Form 8865.

The Foundation has ownership interests in foreign corporations and foreign partnerships. The Foundation would file Form 5471 or Form 8865 if the ownership met the requirements for filing. The Foundation's ownership in foreign corporations did not require filing Form 5471. The Foundation's ownership in foreign partnerships did not require filing Form 8865.

The Foundation invests in partnerships that hold direct or indirect interests in passive foreign investment companies (PFICs). The Foundation would file Form 8621s for underlying investments that generate unrelated business income. The Foundation would not file Form 8621s where the investment partnerships have properly filed Form 8621s,

332075 11-29-23 Schedule F (Form 990) 2023

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	Employer identification number 88-0370179						
Part I General Information on Grants a		on of North	ern Nevaua	1.			88-0370179
Does the organization maintain records to criteria used to award the grants or assis Describe in Part IV the organization's pro	to substantiate the						
Part II Grants and Other Assistance to recipient that received more than S	Domestic Organiz	zations and Domestic	Governments. C	Complete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Advocates to End Domestic Violence P.O. Box 2529	94-2665387	E01/a)/2)	8.949.	10	,		General support
Carson City, NV 89702 Air Force Association 1501 Lee Highway Suite 400 Arlington, VA 22209	52-6043929	PL	50,000.	0.	= C	OF	Mitchell Institute
Alzheimer's Association 225 N. Michigan Ave. Floor 17 Chicago, IL 60601	13-3039601	501(c)(3)	322,264.	0.			general support
American Cancer Society, Inc. P.O. Box 22478 Oklahoma City, OK 73123	13-1788491		20,000.	0.			the Denver office
American Cancer Society - Nevada PO Box 231359 Las Vegas, NV 89105	13-1788491	501(c)(3)	8,949.	0.			Programs in Carson City area
American Heart Association PO Box 840692 Dallas, TX 75284	13-5613797	501(c)(3)	9,949.	0.			Programs in Carson City area
2 Enter total number of section 501(c)(3) a3 Enter total number of other organizations	•						169. 0.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Media Council, Inc,							
PO Box 75545							
Phoenix, AZ 85087	82-3235497	501(c)(3)	40,000.	0.			general operating
American University							
4400 Massachusetts Avenue, NW							
Washington, DC 20016	53-0196549	501(c)(3)	22,650.	0.			Student Support Fund
Animal Ark							
P.O. Box 60057							
Reno, NV 89506	94-2991026	501(c)(3)	9,626.	0.			General support
	71 2772020				-		conclui support
Artown			1121				
528 West 1st Street							
Reno, NV 89503	88-0412311	501(c)(3)	47,194.	0.			General support
·							
Awaken Inc							
PO Box 40635							supplemental banquet
Reno, NV 89504	38-3843380	501(c)(3)	37,500.	0.			support
Boosted Diplomas							
725 Belgrave Ave							
Reno, NV 89502	83-3151044	501(c)(3)	23,250.	0.			general operating supp
Boys and Girls Club of Truckee							
Meadows - 2680 E. Ninth Street -				_			
Reno, NV 89512	88-0142068	501(c)(3)	160,300.	0.			general support
Pour Caputa of Amorica Novada A							purchase of a Digital
Boy Scouts of America Nevada Area							purchase of a Digital
Council - 500 Double Eagle Court	88-0059912	F01/a\/2\	70 545	^			Duplicator and one-yea
- Reno, NV 89511	00-0059912	DOT(G)(2)	79,545.	0.			service
Boys & Girls Club of the Peninsula							
401 Pierce Road							
Menlo Park, CA 94025	94-1552134	501(c)(3)	10,000.	0.			Shark tank event

Schedule I (Form 990) Community	Foundati	on of North	ern Nevada	ı		8	8-0370179 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	t II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Canine Rehabilitation Center and							
Sanctuary - 555 US Highway 395				_			
North - Washoe Valley, NV 89704	90-0687180	501(c)(3)	7,250.	0.			vet bills and animal care
CARE (Cooperative for Assistance							
and Relief Everywhere) - Gift Center P.O. Box 1870 - Merrifield,							Turkey/Syria Earthquake
VA 22116	13-1685039	501(a)(3)	12,000.	0.			Fund
VA 22110	13-1003039	501(0)(3)	12,000.	0.			r unu
Carlthorp School							
438 San Vicente Boulevard							the Annual Fund on behalf
Santa Monica, CA 90402	95-3512203	501(c)(3)	37,638.	0.			of the Lurie family
			-				
Carson Tahoe Regional Healthcare			1121				represents the total
PO Box 2168							donations from the 2023
Carson City, NV 89702	88-0502320	501(c)(3)	56,797.	0.			cornhole tournament
Carson Valley Community Food							
Closet - PO Box 2911 1255 Waterloo							
Ln., Suite B - Gardnerville, NV							
89410	88-0258742	501(c)(3)	10,000.	0.			the 2023 costume patch
Castilleja School Foundation							
1310 Bryant Street	94-0373222	E01/-1/2)	12 500	0			Cindy Miller Conference
Palo Alto, CA 94301	94-03/3222	501(C)(3)	12,500.	0.			Room
Catholic Charities of Northern							
Nevada - PO Box 5099 - Reno, NV							
89503	88-0339754	501(c)(3)	64,600.	0.			general support
	00 00007,01		01,000.	•			gonorar sapporo
Catholic Charities of the							
Archdiocese of Chicago - P.O.Box							
7154 - Carol Stream, IL 60197	36-2170821	501(c)(3)	20,000.	0.			migrant needs in Chicago
Center for Disaster Philanthropy							
One Thomas Circle, NW Suite 700							
Washington, DC 20005	45-5257937	501(c)(3)	10,500.	0.			Ukraine support

Schedule I (Form 990) Community		8-0370179 Page					
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Child Assault Prevention (CAP)							
Project of Washoe County - 122							
Ridge Street, Suite B - Reno, NV							
89501	88-0208611	501(c)(3)	34,026.	0.			CAP Ambassador Program
City of Reno Charitable Fund							
P.O. Box 1900	00 600001	E01 () (2)	40.631				TRF #281- Lake Park
Reno, NV 89505	88-6000201	501(c)(3)	42,631.	0.			Watershed Project
Reno Police Department Ceremonial							
Fund - 455 East Second Street -							K9 training class in
Reno, NV 89505	81-5397381	501(c)(3)	85,448.	0.			coordination with SWAT
CoachArt 445 S. Figueroa St, Ste 3100 Los Angeles, CA 90071	94-3389547	501(c)(3)	50,000.	0.	/	OF	2023 awards gala
Communities In Schools of Nevada 2080 E. Flamingo Rd., Ste. 225				DF		,01	
Las Vegas, NV 89119	88-0292094	501(c)(3)	65,000.	0.			Sparks High School
Compassion and Choices PO Box 485			5				
Etna, NH 03750	84-1328829	501(c)(3)	320,264.	0.			general support
Desert Research Institute Foundation - Northern Nevada Science Center 2215 Raggio Parkway							
- Reno, NV 89512	94-2879252	501(c)(3)	10,000.	0.			General Support
,		, ,	,	•			
Doctors Without Borders USA, Inc. PO Box 5022							
Hagerstown, MD 21741	13-3433452	501(c)(3)	6,600.	0.			general support
·		,	1,220.				
Domestic Violence Resource Center							
1735 Vassar Street							General Support / Purple
Reno, NV 89502	94-2605396	501(c)(3)	42,550.	0.			Gala

Schedule I (Form 990) Community		8-0370179 Page					
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
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David a Country Chariff Advisory							
Douglas County Sheriffs Advisory							
Council - P.O. Box 1002 - Minden,	20 1200010	E01/~\/2\	10.000	,			
NV 89423	20-1308918	501(6)(3)	10,000.	0.			general support
Earthjustice							
50 California Street Suite 500							
San Francisco, CA 94111	94-1730465	501(c)(3)	84,014.	0.			 General support
Economic Development Foundation Of			·				
Greater Reno-Tahoe - 50 West							
Liberty Street Suite 108 - Reno,							
NV 89501	88-0509413	501(c)(3)	163,401.	0.			Inv. #11293
Eddy House			1121				
888 Willow Street							
Reno, NV 89502	45-3023511	501(c)(3)	100,106.	0.			general support
Excel Christian School							
850 Baring Blvd							
Sparks, NV 89434	47-0926478	501(c)(3)	30,500.	0.			classroom supplies
Family Respite Care of Nevada							
P.O. Box 2072	/						
Sparks, NV 89432	94-3236921	501(c)(3)	33,306.	0.			general support
1 11							
FINCA International, Inc.							
1201 15th Street NW, 8th Floor							
Washington, DC 20005	13-3240109	501(c)(3)	320,264.	0.			general support
FIGU Enionds in Commiss Walnis							
FISH-Friends in Service Helping							
138 E. Long Street	04 2500004	F01/~\/2\	0.040	_			Gamanal aumusst
Carson City, NV 89706	94-2590904	DU1(C)(3)	8,949.	0.			General support
Food Bank of Northern Nevada							
550 Italy Drive							
McCarran, NV 89434	94-2924979	501(c)(3)	56,800.	0.			General support

Schedule I (Form 990) Community		8-0370179 Page					
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pai I	rt II.) T	T
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Day Wide Day debies							
For Kids Foundation PO Box 5153							
	75-3093964	E01/a)/2)	20 500	0.			Conoral gurnont
Reno, NV 89513	75-3093964	501(6)(3)	20,500.	0.			General support
Friends of Nevada Wilderness							
P.O. Box 9754							#276 Noxious Weed
Reno, NV 89507	88-0211763	501(c)(3)	26,343.	0.			Monitoring 2023
india, in obser			20,010.	•			lionicoling lold
Fun Camp Inc.							
PO Box 40505							
Reno, NV 89504	94-3152378	501(c)(3)	50,000.	0.			 General support
					-		
Glenbrook Underground, Inc.			1121				
3470 G S Richards Blvd.							Undergrounding power
Carson City, NV 89703	86-1791497	501(c)(3)	25,000.	0.			lines
Global Fund for Women, Inc.							
Attn. Donations 800 Market Street							
Suite 700 - San Francisco, CA							South African programs
94102	77-0155782	501(c)(3)	9,626.	0			for Women & Children
Global War on Terrorism Memorial			,	-			
Foundation - Ronald Reagan							
Building 1300 Pennsylvania Ave. NW							
- Washington, DC 20004	47-3700489	501(c)(3)	10,000.	0.			General support
			20,000.	•			
Great Basin Outdoor School							
1000 Bible Way, #53							
Reno, NV 89502	88-0396516	501(c)(3)	11,111.	0.			General support
Reno, NV 05502	00 0330310	301(0)(3)	11,111.	٠.			Seneral Support
Hawaii Community Foundation							
827 Fort Street Mall							
Honolulu, HI 96813	99-0261283	501(c)(3)	13,500.	0.			The Maui Strong Fund
	22 2202200		13,300.	<u> </u>			
Heifer International							
1 World Ave.							
Little Rock, AR 72202	35-1019477	501(c)(3)	10,626.	0.			Livestock donations

Schedule I (Form 990) Community		8-0370179 Page					
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pai	t II.)	
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Hela Bima World							
PO Box 3390							
Stateline, NV 89449	46-3987940	501(c)(3)	300,000.	0.			general support
Holy Cross Catholic Church							
5950 Vista Blvd.							
Sparks, NV 89436	27-4337740	501(c)(3)	11,000.	0.			general support
·			·				
Holy Virgin Mary Church							
3060 Jefferson Blvd							
West Sacramento, CA 95691		501(c)(3)	22,500.	0.			general support
		_			,		
Horizon Christian Church							
1995 East Prater Way	20 0212004	E01(-)(2)	10,000	0.			\$15k HVAC units/\$5
Sparks, NV 89434	30-0313994	501(6)(3)	40,000.	0.			general
Immunize Nevada							
PO Box 9090							
Reno, NV 89507	46-2266350	501(c)(3)	20,000.	0.			General support
Indigenous Peoples Council On							
Biocolonialism - Healing Waters							
Institute PO Box 76 - Nixon, NV							#275 Healing Waters
89424	88-0425570	501(c)(3)	89,916.	0.			Institute's River Justice
Jack Kent Cooke Foundation							
44325 Woodridge Pkwy							
Leesburg, VA 20176	54-1896244	501(c)(3)	75,000.	0.			General Support
Jewish Communal Fund							
575 Madison Avenue Suite 703	02 5154102	501()(2)		_			GGGD 7. 3 #4240
New York, NY 10022	23-7174183	DUT(C)(2)	228,000.	0.			GGCP Fund #4349
Jewish Federation of Las Vegas dba							
Jewish Nevada - Sigesmund Center 8861 W Sahara Ave, #120 - Las							
Vegas, NV 89117	88-0098500	501(c)(3)	17,500.	0.			Israel Emergency Campaign
vegas, IVV OJII/	1 00 0030300	501(0)(3)	1,300.	υ.		1	Forder Buerdency Campaign

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Junior Achievement of Northern									
Nevada - 1575 Delucchi Lane, Suite									
207A - Reno, NV 89502	88-6005167	501(c)(3)	6,000.	0.			Hall of Fame Gala		
Keep Memory Alive									
888 West Bonneville Avenue							2023 Summer Social &		
Las Vegas, NV 89106	88-0515534	501(c)(3)	75,000.	0.			Rođeo		
Keep Truckee Meadows Beautiful							TRF #282 2024 Great		
P.O. Box 7412							Community Cleanup & add'l		
Reno, NV 89510	88-0254957	501(c)(3)	91,360.	0.			programs		
,			1				an endowment for a		
Kenny Guinn Center for Policy			1141				director position (or		
Priorities - 1664 N Virginia St.							positions) at the Guinn		
Mail Stop 0289 - Reno, NV 89557	46-4075622	501(c)(3)	530,250.	0.			Center (\$250,000), and		
KUNR FM 88.7									
University of Nevada-Reno Mail Stop							Annual Membership		
Reno, NV 89557	94-2781749	501(c)(3)	6,100.	0.			Contribution		
,									
LEAD With Horses									
PO Box 18045									
Reno, NV 89511	36-4818132	501(c)(3)	31,306.	0.			General support		
League to Save Lake Tahoe									
2608 Lake Tahoe Blvd.									
South Lake Tahoe, CA 96150	94-6128680	501(c)(3)	15,500.	0.			general support		
,			, ,						
Legacy Christian Academy									
1894 E William St Suite 4, #305									
Carson City, NV 89701	86-4006342	501(c)(3)	10,000.	0.			General support		
Lexington Institute									
1600 Wilson Blvd. Suite 203									
Arlington, VA 22209	54-1880642	501(c)(3)	40,000.	0.			General support		

		on of North					8-0370179 Pag
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Life Pointe Church							
1616 West Street							
Woodland, CA 95695	94-2166313	501(c)(3)	50,000.	0.			New office fund
woodiana, en 55055	34 2100313	301(0)(3)	30,000.	<u> </u>			New Office Tana
Limitless Horizons Ixil, Inc.							
P.O. Box 3120							
Santa Cruz, CA 95063	26-4296182	501(c)(3)	6,000.	0.			general support
Lucile Packard Foundation for			,				
Children's Health - 400 Hamilton							
Avenue Suite 340 - Palo Alto, CA							
94301	77-0440090	501(c)(3)	8,000.	0.			the Children's Fund
Lutheran Church of the Good			141				
Shepherd - 357 Clay Street -							
Reno, NV 89501	88-0069965	501(c)(3)	30,213.	0.			general operations
Make a Wish Foundation							
2800 Club Center Drive							
Sacramento, CA 95835	68-0027351	501(c)(3)	9,749.	0.			Carson City area Wishes
Maui Food Bank							
760 Kolu Street	99-0315110	F01/-1/2)	11 000	0			g
Wailuku, HI 96793	99-0315110	501(C)(3)	11,000.	0.			General Support
Monterey Bay Aquarium Foundation							
886 Cannery Row							the Center for Ocean
Monterey, CA 93940	94-2487469	501(a)(3)	25,000.	0.			Education and Leadershi
Mount Saint Mary's University	74 240/409	501(0)(3)	23,000.	0.			Page 2011 and Deadershi
Doheny Campus IA Division 10							the John David & Nancy
Chester Place - Los Angeles, CA							Sullivan Taylor
90007	45-1641455	501(c)(3)	5,500.	0.			Scholarship Fund
	10 1041400		3,300.	· · · · · ·			ponorarbinip rana
National Foundation for Cancer							
Research - 5515 Security Lane							
Suite 1105 - Rockville, MD 20852	04-2531031	501(c)(3)	160,132.	0.			general support

Schedule I (Form 990) Community		8-0370179 Page					
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	rt II.) 	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
National World War II Museum							
945 Magazine Street							2023 Road To Victory
New Orleans, LA 70130	72-1200790	501(c)(3)	110,000.	0.			Celebration
Naval Submarine League							
405 N. Henry Street				_			Capital Campaign/Reserve
Alexandria, VA 22314	52-1270467	501(c)(3)	10,000.	0.			Fund
Nevada Humane Society Inc.							
2825 Longley Lane, Suite B							
Reno, NV 89502	88-0072720	501(c)(3)	318,530.	0.			General support
Neilo, NV 05302	00 0072720	501(0/(5/	310,330.	٠.	_		General support
Nevada Humanities							
P.O. Box 8029							
Reno, NV 89507	23-7358959	501(c)(3)	10,100.	0.			general support
neno, ni osso,	23 /330333	301(0)(3)	10,100.	٠.			general support
Nevada Land Trust							
P.O. Box 20288				1 ノド			
Reno, NV 89515	88-0287591	501(c)(3)	7,443.	0.			General support
•							
Nevada Museum of Art							
160 W. Liberty Street							
Reno, NV 89501	88-6003042	501(c)(3)	79,000.	0.			the Sierra Circle
Nevada Policy Research Institute							
7130 Placid Street							
Las Vegas, NV 89119	88-0276314	501(c)(3)	25,000.	0.			general support
Nevada State College Foundation							
1125 Nevada State Drive							
Henderson, NV 89002	88-0464591	501(c)(3)	20,000.	0.			General support
Nevada Veterans Memorial Plaza							
PO Box 50967							 World War II Education
	01 2000660	E01/a)/2)	15 000	^			
Sparks, NV 89435	81-2009660	DOT(C)(2)	15,000.	0.			kiosk in Sparks

		on of North					8-0370179 Page 1
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T
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Nevada Women's Fund 770 Smithridge Drive, Suite 300 Reno, NV 89502	94-2860375	501(c)(3)	52,450.	0.			Scholarships (Women of Achievement Luncheon)
Nevada Youth Empowerment Project 1369 Faland Way	26 1110504	E01/a)/2)	15 600	0.			Canaral gupport
Reno, NV 89503	26-1118584	501(0)(3)	15,600.	0.			General support general operating support
Northern Nevada Children's Cancer Foundation - 3550 Barron Way, #9A - Reno, NV 89511	20-8623503	501(c)(3)	5,500.	0.			and is being made in memory of Ruthlee Caloiaro
Northern Nevada H.O.P.E.S. 580 W. Fifth Street Reno, NV 89503	86-0865357	501(c)(3)	50,000.	0.	,	OF	general support
Ovarian Cancer Research Alliance 14 Pennsylvania Plaza Suite 2110 New York, NY 10122	13-3806788	501(c)(3)	160,132.	R		,01	general support
PBS Reno 1670 N. Virginia Street Reno, NV 89503	88-0172215	501(c)(3)	23,100.	0.			General support
Pets of the Homeless 710 W Washington St							2023 Endowment
Carson City, NV 89703	26-3010540	501(c)(3)	88,129.	0.			Distribution
Planned Parenthood Federation of America - Attn: Online Services PO Box 97166 - Washington, DC 20090	13-1644147	501(c)(3)	10,000.	0.			Birth Control and Abortion Services
Planned Parenthood Mar Monte 1691 The Alameda San Jose, CA 95126	94-1583439	501(c)(3)	9,000.	0.			General support
2011 2000, 011 20110	71 1000407		1 2,000.	ı	1	1	DOTTOL DUPPOLO

Schedule I (Form 990) Community	Foundati	on of North	ern Nevada	L		8	88-0370179 Page 1
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Project 150 Reno 947 Mount Rose Street Reno, NV 89509	45-6645161	501(c)(3)	23,000.	0.			clothing, shoes, school supplies, toiletries, and packaged foods for disadvantage high school
Purr Project USA Inc 113 Mountain Laurel Drive Milton, DE 19968	45-5349146	501(c)(3)	5,300.	0.			General support
Quest Counseling and Consulting, Inc 6110 Plumas Street, Suite B - Reno, NV 89519	71-0930980	501(c)(3)	58,000.	0.			Youth Mental Health Program
Reach Up Reach Out Ministries Inc. 24307 Magic Mountain Pkwy #1056 Santa Clarita, CA 91355	47-4179363	501(c)(3)	25,000.	0.	,	OF	General Support
Reno Chamber Orchestra 925 Riverside Drive, Suite 5 Reno, NV 89503	88-0134278	501(c)(3)	20,934.	R.		, Or	Evangeline Grant Memorial Endowment
Reno Initiative for Shelter and Equality - PO Box 5254 - Reno, NV 89513	45-5617917	501(e)(3)	7,608.	0.			2022 Distribution
Reno Sparks Gospel Mission P.O. Box 5956							the support of Holiday
Reno, NV 89513	88-6005643	501(c)(3)	13,400.	0.			Food Programs
Renown Health Foundation 245 E. Liberty Street, Suite 400 Reno, NV 89501	94-2972749	501(c)(3)	20,000.	0.			the Renown Childrens Hospital
ReSurge International 756 N Pastoria Ave							
Sunnyvale, CA 94085	23-7297770	501(c)(3)	320,264.	0.			general support

Schedule I (Form 990) Community Part II Continuation of Grants and Other		on of North			adula I (Farm 900) Da		8-0370179 Page
							(1) D
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Rocket City New Music Inc							support of daring
1105 Hermitage Ave Se							contemporary classical
Huntsville, AL 35801	87-1888578	501(c)(3)	20,000.	0.			music
Sacramento Region Community							
Foundation - 740 University Avenue							Bucher Family Charitable
Suite 110 - Sacramento, CA 95825	94-2891517	501(c)(3)	25,000.	0.			Fund
24200 110 24014moneo, 011 20015	71 2032027		25,000.	· ·			
Sage Ridge School							
2515 Crossbow Court							support of the Annual
Reno, NV 89511	86-0852480	501(c)(3)	20,000.	0.			Fund
		-			J		
Samaritan's Purse			11				
PO Box 3000	E0 1427002	E01(-)(2)	10,000				
Boone, NC 28607	58-1437002	501(6)(3)	10,000.	0.			general support
Scholarship America Inc							marketing and set-up for
PO Box 772514				1) +			the SNC Women in STEM
Detroit, MI 48277	04-2296967	501(c)(3)	46,050.	0.			Scholarship
·							-
Second Harvest of Silicon Valley							
4001 N. First Street							
San Jose, CA 95134	94-2614101	501(c)(3)	10,000.	0.			For the Kids
							\$1441.50 for the final
Sierra Arts Foundation							payment for John Elliott
17 S. Virginia Street Suite 120							Show; \$14.42 for Sierra
Reno, NV 89501	88-0113398	501(c)(3)	9,210.	0.			Arts Foundation.
Sierra Club Foundation							
2101 Webster Street, Suite 1250							
Oakland, CA 94612	94-6069890	501(c)(3)	8,000.	0.			general support
Giorna Navada Tarranara							
Sierra Nevada Journeys PO Box 1631							TRF #280 Watershed
	01 0001507	E01/a)/2)	00 007	0.			
Reno, NV 89505	01-0881587	DOT(G)(2)	88,907.	U.			Education Initiatives

		on of North			(5		8-0370179 Page
Part II Continuation of Grants and Other	Assistance to Doi	nestic Organizations	and Domestic Go	overnments (Scho	edule I (Form 990), Pa I	rt II.) T	Ī
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
gistana of gaint Tanah of							
Sisters of Saint Joseph of							
Carondelet - 11999 Chalon Rd	04 1605666	F01/->/2>	0.000	_			
Los Angeles, CA 90049	94-1605666	501(c)(3)	9,000.	0.			general support
a1							to cover costs of the
Sky Tavern							purchase of a 2015 Volvo
18124 Wedge Pkwy #995				_			EC22el Excavator and
Reno, NV 89511	88-0275590	501(c)(3)	130,403.	0.			costs of installation of
Smithsonian Institution							
NASM Capital Gallery, Office of							
Advancement MRC 522 PO Box 37012 -							
Washingto	53-0206027	501(c)(3)	45,000.	0.	-		NASM Collins Trophy Award
Soroptimist International of Truckee Meadows - P.O. Box 20125 - Reno, NV 89515	94-2342761	501(c)(3)	40,800.	0.	,	OF	2023 Spring Scholarships
Soulful Seeds 316 California Ave #700			-11	DF		101	
Reno, NV 89509	83-2274868	501(c)(3)	7,000.	0.			General support
SPCA of Northern Nevada 4950 Spectrum Blvd.	. (1		50				
Reno, NV 89512	88-0386601	501(c)(3)	9,850.	0.			Todd's Medical Fund
Special Assistance Fund for Energy P.O. Box 10100							
Reno, NV 89520	88-0341058	501(c)(3)	701,586.	0.			 General support
			, ,				
Sports Aviation Foundation							
1146 Airport Road							
Minden, NV 89423	45-5078808	501(c)(3)	10,000.	0.			general support
St. Albert the Great Catholic Church - 1259 St. Albert's Drive							
- Reno, NV 89503	27-4337925	501(c)(3)	11,000.	0.			general support

		on of North					88-0370179 Pag
Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa I	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Shanfand Iminancibu							
Stanford University P.O. Box 20466							
	04 1156265	E01/a)/2)	6 000	0			The D School
Stanford, CA 94309	94-1156365	501(6)(3)	6,000.	0.			DT #86 FY24 Wildcat Fir
Otata of Nameda Danautmant of							
State of Nevada Department of Wildlife - 6980 Sierra Center							Mule Deer Migration Corridor Bitterbrush
	00 600000	E01/-\/2\	450.012	0			
Pkwy., #120 - Reno, NV 89511	88-6000022	501(6)(3)	459,912.	0.			Planting
Stephen Siller Tunnel to Towers							
Foundation - 2361 Hylan Boulevard							
-	02-0554654	E01/-\/2\	26,000	0.			G1
- Staten Island, NY 10306	02-0554654	501(6)(3)	26,000.	0.			General support
St. Peter Canisius Catholic Church		-					
225 E. Fifth Street							
Sun Valley, NV 89433		501(c)(3)	50,000.	0.			general support
Sun valley, NV 69433		501(6)(3)	50,000.	0.			general support
St. Teresa of Avila Catholic							Student
School - 567 South Richmond Avenue							
	27-4337666	E01/a)/3)	43,000.				scholarships/Capital
- Carson City, NV 89703	27-4337666	501(6)(3)	43,000.	0.			Improvements
Susanne and Gloria Young							
Foundation - 2588 Edgerock Road -							
	26-3617880	E01/a)/3)	110 667	0.			gonoval guppont
Reno, NV 89519	20-3017000	501(6)(3)	118,667.	0.			general support
Tahoe Fund							
P.O. Box 7124	01 0074630	E01/-\/2\	46 200	0			
Tahoe City, CA 96145	01-0974628	501(6)(3)	46,200.	0.			general support
Tahoe-Pyramid Trail							
4790 Caughlin Parkway Suite 138							
	55-0895667	501/a)/3)	38 000	0.			Conoral Cupport
Reno, NV 89519	33-003366/	DOT(C)(2)	38,900.	0.			General Support
Temple Sinai							
3405 Gulling Rd							
Reno, NV 89503	88-0203508	501(a)(3)	30,600.	0.			general support

		on of North					8-0370179 Page
Part II Continuation of Grants and Other	Assistance to Doi	nestic Organizations	and Domestic Go	vernments (Sch	eaule I (Form 990), Pa 	π II.) 	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Books Arts Press Inc							
2023 Ivy Rd							Bound for the Future
Charlottesvle, VA 22903-1713	54-1667557	501(c)(3)	20,000.	0.			Endowment
Charles de Byle, vii 22303 1713	31 100/33/	301(0)(3)	20,000.	•			LITAG WINGITG
The Bridge Church							
1330 Foster Drive							
Reno, NV 89509	88-0089157	501(c)(3)	10,500.	0.			Foster the City
			·				
The Children's Cabinet Inc.							
1090 South Rock Blvd. Main Office							
Reno, NV 89502	77-0097156	501(c)(3)	218,500.	0.			general support
					,,		
The Commonwealth Club of			1141				support of the 2023
California - PO Box 194210 - San		1) 1					Distinguished Citizen
Francisco, CA 94119	94-0399260	501(c)(3)	15,000.	0.			Award Gala
The Discovery Museum			_ 1				
490 S. Center Street							
Reno, NV 89501	61-1474845	501(c)(3)	28,250.	0.			general support
mb - Hannah Antonobila Danadakian							
The Harrah Automobile Foundation 1 Museum Drive							
	94-2777978	F01/a\/3\	E01 000	0.			 Renovations
Reno, NV 89501	34-2777378	501(6)(3)	501,000.	0.			Renovacions
The Nature Conservancy of Nevada							the Whit Hall Learning
639 Isbell Road, Suite 330							Center at River Fork
Reno, NV 89509	53-0242652	501(c)(3)	12,600.	0.			Ranch
	33 0212032		12,300.	••			
The Salvation Army - Reno NV							
1931 Sutro Street							
Reno, NV 89512	94-1156347	501(c)(3)	18,100.	0.			gneral support
Thunderbird Lodge Preservation							
Society - 316 California Avenue							
#36 - Reno, NV 89509	88-0434866	501(c)(3)	20,000.	0.			General support

		on or Morcin					10-03/01/9 Pag
Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Par	t II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ipping Point Community							
220 Montgomery St. Suite 850							
San Francisco, CA 94104	20-2121739	501(a)(3)	21,000.	0.			General support
San Francisco, CA 54104	20 2121733	301(0)(3)	21,000.	0.			General support
Truckee Meadows Community College							
Foundation - 7000 Dandini Blvd.							
RDMT 200J - Reno, NV 89512	88-0185319	501(c)(3)	16,913.	0.			the 1971 Society
·							
Truckee Meadows Habitat for							
Humanity - 530 Greenbrae Drive -							
Sparks, NV 89431	88-0280462	501(c)(3)	5,100.	0.			general support
					,,		
Truckee River Foundation dba One			1141				
Truckee River - PO Box 18153 -							TRF #283 Watershed
Reno, NV 89511	20-3378838	501(c)(3)	135,138.	0.			Coalition Building
Truckee River Watershed Council							
P.O. Box 8568							
Fruckee, CA 96162	91-1818748	501(c)(3)	121,900.	0.			#272 Coldstream Canyon
The Man Manufair Minting County							
Two Top Mountain Adaptive Sports							
Foundation - 10914 Claylick Road	26-0466490	F01/5)/3)	10.000	0.			Barrianana / Land Barrahana
Mercersburg, PA 17236	26-0466490	501(6)(3)	10,000.	0.			Equipment/Land purchase
UNICEF USA							
125 Maiden Lane, Floor 10							Earthquake refief Turke
New York, NY 10038	13-1760110	501(c)(3)	10,000.	0.			& Syria
lew lork, NI 10050	13 1700110	301(0/(3/	10,000.	0.			& Sylla
Jnited States Diving Foundation							
Inc - P.O. Box 4352 - Carmel, IN							
46082	31-1153995	501(c)(3)	457,920.	0.			2023 proposed priorities
	32 223333		137,320.	· .			Proposed priorition
Jnited Way of Northern Nevada &							
the Sierra - 639 Isbell Road Suite							Northern Nevada Reading
460 - Reno, NV 89509	88-0059327	501(c)(3)	6,500.	0.			Coalition
·	1	l .	· · · · · · · · · · · · · · · · · · ·	1	1	l	1

						8-0370179 Page
ssistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pai	rt II.)	T
(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
94-2790134	501(c)(3)	20,000.	0.			General support
74-6001118	501(c)(3)	20,000.	0.			 Cancer research equipment
		·				
94-2781749	501(c)(3)	277,627.	0.			College of Liberal Arts
				-		
		1121				
01-0944615	501(c)(3)	8.150.	0.			Camp Scholarships
						-
						2023 World Aquatics High
			1) 1			Diving World Cup- 2nd
31-0986868	501(c)(3)	100,000.	0.			half
						 #279 Water Temperature
	501(c)(3)	14.315.	0.			- Monitoring
		,				
94-3160109	501(c)(3)	5 300.	0.			general support
	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	501(c)(3)	10 000.	0.			
		10,000	•			
94-2991444	501(c)(3)	8 700.	0.			general support
	94-2790134 74-6001118 94-2781749 01-0944615 31-0986868		if applicable cash grant 94-2790134 501(c)(3) 20,000. 74-6001118 501(c)(3) 277,627. 01-0944615 501(c)(3) 8,150. 31-0986868 501(c)(3) 100,000. 501(c)(3) 5,300.	94-2790134 501(c)(3) 20,000. 0. 74-6001118 501(c)(3) 20,000. 0. 94-2781749 501(c)(3) 277,627. 0. 01-0944615 501(c)(3) 100,000. 0. 31-0986868 501(c)(3) 100,000. 0. 94-3160109 501(c)(3) 5,300. 0. 501(c)(3) 10,000. 0.	If applicable cash grant noncash assistance valuation (book, FMV, appraisal, other)	If applicable Cash grant noncash valuation hook, FMV, appraisal, other) non-cash assistance

Part II Continuation of Grants and Other		on of North			edule I (Form 990). Pa		8-0370179 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Washoe County Honorary Deputy Sheriff's Association - 911 Parr Blvd Reno, NV 89512	88-0451723	501(c)(3)	9,000.	0.			2023 Christmas in July - Back-to-School Event
Washoe County Search and Rescue Inc PO Box 20012 - Reno, NV 89515	23-7007538	501(c)(3)	7,000.	0.			general operations of Washoe County Search and Rescue Inc
Western Folklife Center 501 Railroad Street Elko, NV 89801	87-0447025	501(c)(3)	10,250.	0.			Silver Level Membership
Western Nevada College Foundation Bristlecone Building 145 2201 West College Parkway - Carson City, NV 89703	88-0283783	501(c)(3)	15,088.	0.	,	OF	Veterans Resource Center
Whittier Trust Company, California (Partner with Greater Horizons) - c/o Trust Operations 1600 Huntington Drive - South Pasadena,	20-0849590	501(c)(3)	313,262.	R		,UI	Final disbursement to Whittier Trust Company t close G. Blake Smith Family Foundation Fund
Women and Children's Center of the Sierra - 3905 Neil Road, #2 - Reno, NV 89502	80-0159352		68,026.	0.			support a Marketing
Women in Military Service for America Memorial Foundation, Inc 200 N. Glebe Road, Suite #400 - Arlington, VA 22203	52-1513535		10,000.	0.			the "Bringing HERstory t
World Space Week Association 957 Nasa Pkwy, Ste 350							
Houston, TX 77058 Yolo Crisis Nursery, Inc. 1107 Kennedy Place Davis, CA 95616	76-0013720 47-1006055		50,000.	0.			General support Building FUnd

		on or north			adula I (Farm 000) Da		0-03/01/3 P
art II Continuation of Grants and Other							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
nta Foundation for Women							
tn: Contributions 4837 Paysphere							
icago, IL 60674	36-3396932	501(c)(3)	25,473.	0.			Endowment Fund
			- 01				
		DI	BI			OD	
				RF		,U1	
010	:C		56				
		l	1		l .		<u> </u>

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on 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 noncash assistance
	<u> </u>				
Education	205	827,180.	0.		
	-1	1121			
		-11	DF		
Part IV Supplemental Information. Provide the information red	quired in Part I, lir	ne 2; Part III, column	(b); and any other ac	dditional information.	
Part I, Line 2:		7			
	11.5	1.61			
Grants over \$5,000 that are design	ated for	a specific	c use requi	re grantees	
to report on the use of the funds.	Organiz	zations are	e requested	to send a	
thank-you letter to the donor advi	sors, and	d these tha	ank-you let	ters	
gonorally include information from	the exec	nization t	-hat the an	ant was used	
generally include information from	the orga	iii Zacioli (liac che gr	ant was useu	
as specified in the accompanying g	rant corr	respondence	.		

The scholarships are paid directly to the schools. The student is required to return the acceptance letter along with an attendance record to complete

Schedule (Form 990) Community Foundation of Northern Nevada 88-0370179 Page 2 Part IV Supplemental Information
the scholarship process.
Part II, line 1, Column (h):
Name of Organization or Government:
Kenny Guinn Center for Policy Priorities
(h) Purpose of Grant or Assistance: an endowment for a director position
(or positions) at the Guinn Center (\$250,000), and for operations, or
alternatively, endowment (\$250,000)
Name of Organization or Government: Project 150 Reno
(h) Purpose of Grant or Assistance: clothing, shoes, school supplies,
Name of Organization or Government: Sky Tavern
(h) Purpose of Grant or Assistance: to cover costs of the purchase of a
2015 Volvo EC22el Excavator and costs of installation of the snow making system.
DISUE

SCHEDULE J (Form 990)

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.

ZUZ3

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

	Community Foundation of Northern Nevada	88-03701	79	
Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 9	90,		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for person	al use		
	Travel for companions Payments for business use of personal resi	idence		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as 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	1b	,	
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 on line 1a?	2		
	additions, and officers, morading the CES, Exceditive Brooker, regularing the feather officers of the feather factors.			
3	Indicate which, if any, of the following the 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	n to		
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation co	mmittee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:	- () I		
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	,	X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c	:	Х
	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				
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b	,	Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1		
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?			Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III			X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
		8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			

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

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	I-2 and/or 1099-MISo compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Eaton Dunkelberger	(i)	218,551.	23,000.	0.	16,434.	749.	258,734.	0.
President and CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Teri Miller	(i)	159,927.	0.	0.	10,241.	5,885.	176,053.	0.
CFO (as of Feb)	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							1
	(i)							
	(ii)							
	(i)							
	(ii)						_	
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
1	(ii)							

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.
-11210
DUDE, VODA
-01(150)
018(1)

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Employer identification number

	Community Fo	undati	on of Nort	thern Nevada	88-	0370	179	
Pa	rt 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	Method of c noncash contrib	determin	•	s
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	Х	22	5,593,541.	FMV			
10	Securities - Closely held stock							
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					11		
18	Collectibles					71		
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24								
	Archeological artifacts Other (IRAs)	Х	6	2,091,714.	EM77			
25	,		0	2,031,114.	r m v			
26	Other ()							
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organization which the provided in the control of the contr	-					0	
	for which the organization completed Form 826	83, Part V, L	onee Acknowledg	ement 29				
	B						Yes	No
30a	During the year, did the organization receive by			· · · · · · · · · · · · · · · · · · ·				
	must hold for at least 3 years from the date of			•				37
	exempt purposes for the entire holding period?	?				30a		X
	If "Yes," describe the arrangement in Part II.						7.7	
31	Does the organization have a gift acceptance p	•	•	•	tions?	31	Х	
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	for which column (a) is che	cked,			

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

Schedule M (Form 990) 2023

describe in Part II.

SCHEDULE O (Form 990)

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 Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Community Foundation of Northern Nevada

Employer identification number 88-0370179

Form 990, Part III, Line 4a, Program Service Accomplishments:

funds, scholarships, endowed and designated funds, and charitable

bequests. Our core work focuses on philanthropic advising, grantmaking,

charitable asset investment management, and community engagement, all

aimed at enriching the communities of Northern Nevada.

Form 990, Part VI, Section A, line 1a:

The Foundation Executive Committee consists of the Board Officers, the Past
Chair, and the President & CEO. The Executive Committee has broad
authority on behalf of the board of directors.

Form 990, Part VI, Section B, line 11b:

Upon receipt of the Form 990 from the auditing firm, the Foundation's CEO and CFO review the document. The CEO provides a copy to the Foundation

Board of Trustees. Once the Form 990 is filed, the Board of Trustees additionally reviews and approves the Form 990 at the next scheduled meeting.

Form 990, Part VI, Section B, Line 12c:

In accordance with the Foundation's conflict of interest policy, each board member annually completes a conflict of interest form where they list any and all real, possible, or perceived conflicts of interest. These forms are reviewed by staff for completeness and maintained in the board record book with board minutes and committee minutes for the remainder of the year. At each board meeting, when grants are considered for approval, board members are recused from voting for grants to organizations they have listed as

Schedule O (Form 990) 2023 Page **2**

Name of the organization
Community Foundation of Northern Nevada

Employer identification number 88-0370179

being a possible conflict of interest.

Form 990, Part VI, Section B, Line 15:

Once annually, the board considers compensation for the CEO. A performance review is performed with all board members. Additionally, the CEO reports on achievements of annual goals and objectives from the prior year. This information is reviewed by the Executive Committee. The Executive Committee also reviews information compiled by the Council on Foundations that tabulates compensation for CEO's of community foundations nationwide.

Compensation and/or salary increases are then determined in accordance with acceptable compensation for the CEO per national and regional pay ranges and annual performance of the CEO in meeting Foundation goals and objectives.

The CEO performs an annual evaluation of each staff person at the

Foundation. The CEO uses annual objectives and performance standards to

determine individual job performance, and utilizes the Council on

Foundation's annual compensation study for similar positions at community

foundations nationwide. Although the CEO has sole discretion in hiring,

training, managing, and evaluating staff, the Executive Committee receives

personnel reports on all staff regarding performance and compensation.

Form 990, Part VI, Section C, Line 19:

The Foundation maintains copies of all governing documents, policies, tax returns, and financial audits in the office and makes copies available to any person who requests a copy. Additionally, all policies as well as the tax return are posted on the Foundation's website as well as Guidestar's website.

Name of the organization Community Foundation of Northern Nevada	Employer identification number 88-0370179
Form 990, Part XI, line 9, Changes in Net Assets:	
Change in Value of Split Interest Arrangement	571,986.
Change in Discount on Notes Receivable	28,006.
Cotal to Form 990, Part XI, Line 9	599,992.
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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Community Foundation of Northern Nevada

Employer identification number 88-0370179

Part I	Identification of Disregarded Entities.	Complete if the organization answered	"Yes"	on Form 990, Part IV, line 33.	
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(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
CFX. LLC					
50 Washington Street, Suite 300					Community Foundation of
Reno, NV 89503	Hold property	Nevada	103,250.	1,266,395.	Northern Nevada
CFCP, LLC - 20-0310840					
50 Washington Street, Suite 300					Community Foundation of
Reno, NV 89503	Hold property	Nevada	566,077.	583,030.	Northern Nevada
CFRSO, LLC					
50 Washington Street, Suite 300					Community Foundation of
Reno, NV 89503	Hold property	Nevada	60,528.	283,066.	Northern Nevada
Community Housing Land Trust, LLC					
50 Washington Street, Suite 300					Community Foundation of
Reno, NV 89503	Hold property	Nevada	1,243,995.	9,124,986.	Northern Nevada

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 5 contr enti	olled
				501(c)(3))		Yes	No
Raymond C. Rude Supporting Foundation -	Supporting organization				Community		
80-0676831, 50 Washington St, Reno, NV	for the Community				Foundation of		
89503	Foundation of Northern	Nevada	501(c)(3)	Line 12a, I	Northern Nevada	Х	

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

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

	1		T	1					T	_	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	Genera	or Percentage
of related organization		(state or	entity	(related, unrelated, excluded from tax under sections 512-514)	income	end-of-year assets	alloca	tions?	amount in box	partne	or Percentage ownership
		foreign country)		sections 512-514)		assets	Yes	No	amount in box 20 of Schedule K-1 (Form 1065)	Yes I	lo
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled tity?
Duraflex International Corporation		country)						Yes	No
160 Wunotoo Road									
Sparks, NV 89437	Manufacturing	NV	N/A	C CORP	1,077,903.	13,856,458.	100%	X	

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1a

Yes No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)				1c		<u>X</u>
d Loans or loan guarantees to or for related organization(s)				1d		X
e Loans or loan guarantees by related organization(s)				1e		X
f Dividends from related organization(s)				1f	Х	
g Sale of assets to related organization(s)				1g		X
h Purchase of assets from related organization(s)				1h		X
i Exchange of assets with related organization(s)				1i		X
j Lease of facilities, equipment, or other assets to related organization(s)				1j		X
k Lease of facilities, equipment, or other assets from related organization(s)				1k		X
I Performance of services or membership or fundraising solicitations for related organ				11	Х	
m Performance of services or membership or fundraising solicitations by related organ				1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization				1n		X
Sharing of paid employees with related organization(s)				10		X
p Reimbursement paid to related organization(s) for expenses				1p		X
q Reimbursement paid by related organization(s) for expenses				1q	Х	
r Other transfer of cash or property to related organization(s)				1r		<u>X</u>
				1s		X
2 If the answer to any of the above is "Yes," see the instructions for information on wh						
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount inv	rolved		
	_	050 146		-		
(1) Duraflex International Corporation	F	250,146.	Direct Ownership Dividen	as_		
(2) Duraflex International Corporation	F	250,146.	Indirect Ownership Divid	ends	.	
(3)						
(4)						
(5)						
(e)						

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)		(a)	(f)	(g)	(h)		(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Drodominant income	(e) Are all partners se 501(c)(3) orgs.?	Share of	Share of		nor-	(i) Codo V IIDI	(J) General ((K)
of entity	Filliary activity	(state or foreign	(related, unrelated,	501(c)(3)	total	end-of-year	Disprop tiona	te	amount in box 20	managin	ownership
or entity		country)					allocatio	ns?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partner's	- Cwileisilip
		Country)	Sections 5 (2-5 (4)	Yes No	i i i come	833013	Yes I	No	(FOIII 1065)	Yes No	
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CARRYOVER DATA TO 2024

Name Community Foundation of Northern Nevada	Employer Identification Number 88-0370179
Based on the information provided with this return, the following are possible carryover amounts to next year.	
Federal Post-2017 Net Operating Loss - Pass-Through In	1 decome f 4,172.
PUPLOSURE	COP