City of Las Vegas
2012 - CDBG Public Service
11/21/2011 deadline

Catholic Charities of Southern Nevada

Public Restrooms

Catholic Charities of Southern Nevada
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Las Vegas, NV 89101

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Project Contact
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CEO
Msgr. Patrick Leary
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$47,457 Requested

Submitted: 11/21/2011 5:27:23 PM (Pacific)

Pre-Application Questions

1 Brief Program Description and Specific Purpose for Requested Funds: ex: Funds will be used for 2 counselors to case manage 100 clients. No more than 4 sentences for this question.
The purpose of this project is to provide two (one male and one female) public restroom facilities for the homeless community. Funds will be used to provide salaries and fringe for housekeeping, maintenance and security staff; bathroom and sanitation supplies; and administrative costs.

2 Program must serve one of the following client types, check one box per application.

- [x] Homeless Prevention & Outreach
- [ ] Persons with Special Needs
- [ ] Seniors
- [ ] Youth Programs Focusing on Academics or Early Childhood

3 Date of Incorporation and Date of Program Implementation: use a slash with a space / to separate answers. example: 12-1-1990 / 6-20-99
11-7-1945 / 7-1-1997

4 Program Budget Amount and Request Amount: use a slash / to separate answers. example: $150,000 / $20,000
$192,605 / $47,457

5 Is Agency and/or Program Budget $60,000 or more, which may include up to 25% In-kind to reach this minimum threshold. This is mandatory.

- [x] Yes
- [ ] No

6 If multiple applications are submitted, please state priority of this application numerically with #1 being the most important. If you only intend on submitting one, please mark #1

- [ ] #1
- [ ] #2
- [x] #3
- [ ] #4

7 Applicant understands they must have at least 25% of the difference betwen total budget and amount requested leveraged with cash or committed funds for FY 12/13. This is mandatory.

- [x] Yes
- [ ] No

8 Is agency an IRS 501 C3 or C4? This is mandatory.

- [x] Yes
- [ ] No

9 DUNS Number - This is mandatory.
01-099-8631

10 Is agency current with the Nevada Secretary of State's Office, and does agency have a CLV Business License for the address where the services will be provided. This is mandatory (will be verified by PRNS Staff).

☑ Yes

☐ No

Proposal Questions

1 PART I - PROGRAM NARRATIVE (7 questions) All questions including this one, must have an answer, or a box checked in order to submit. Please use a zero or n/a per instructions.

☑ Section Complete (all questions answered)

2 Is this a new or continuing program?

☐ New

☑ Continuing

3 Describe the problem or need and the population the proposed activity(ies) intend(s) to address.
Homeless individuals have very few alternatives when they need to use public restrooms. This program will provide a clean, safe environment and enable them to manage their personal hygiene and attend to their basic needs.

4 Describe the work to be performed, activities to be undertaken or the services to be provided.
A male and female public restroom will provide a lavatory, sink and a mirror; toilet paper, paper towels and hand soap. Our services are available 24 hours a day, seven days a week to the general public. In addition, security staff will be present to ensure the security and safety of the individuals utilizing these facilities. Housekeeping staff in conjunction with the maintenance staff will provide sufficient supplies for the restrooms and ensure their proper sanitation and operation.

5 List and describe any studies and/or census data and/or market data used to determine that the problem requires action now. Programs that effectively show supporting data will receive more points.
N/A

6 What indicators, verifiable information or data will you use to measure an outcome to see if it was actually attained? What follow-up/tracking will be provided to ensure outcomes are met? How will the programs's impact on participants be evaluated?
A Catholic Charities representative will document program participation, surveying a cross-section of the Public Restroom participants in order to formulate an accurate representation of the clientele utilizing this 24-hour program.

7 On average, how many low income CLV residents does your organization serve annually? How many are unduplicated? If you provide housing, count households - not all family members.

455250 Number CLV Residents

113813 Number of Unduplicated CLV clients

424900 Number of Households

8 Describe what efforts have been made to collaborate with other organizations in order to avoid duplication of services and to maximize available resources. Attach letters of intent for funds or In-Kind only.
N/A

9 How successful has your organization been in conducting similar programs to the proposed project? Describe recent similar programs and discuss the organization's capacity to develop, implement, and administer the proposed program.
Catholic Charities of Southern Nevada has successfully provided 24-hour restroom facilities to the public for the last four years. All of the 24-hour Public Restroom objectives were easily met and there were no difficulties in achieving the program objectives. Over the last four years well over 600,000 men, women and children have been given the opportunity, free of charge, to attend to their personal hygiene and basic needs in a clean, safe environment.

Catholic Charities of Southern Nevada has been providing services to provide help and hope to our community for more than 70 years.

Social Services provided over 13,520 USDA and 33,040 other-source bags of food, more than 3,080 Baby Food packages and over 21,000 diapers; $51,863 rent/utility and shopping card assistance for the year, and 1,566 bus passes serving more than 26,758 client families (a 25% increase over last year!). We provided an additional 25,750 client referrals to other community providers (a 50% increase).

The Residential Services Division sheltered 87,689 men overnight during the year, served another 25,914 persons in our daytime summer shelter, and averaged 275 men monthly in our Resident Empowerment Work Program. Marian Residence provided transitional housing, daily meals and individualized support to senior women 60 and older currently in crisis. Crossroads Transitional Living for Senior Men, serving men 55 and over, aided over 80 men monthly with housing meals and support, helping them on their path to independent permanent housing.

St. Vincent Plaza Lied Dining Facility served more than 1,000 meals each day to men, women and children, including 319,820 meals at no cost to the client, partnered with area parishes to provide more than 10,000 sack lunches to men in our resident program, provided a low-cost meal service to the community, and ran more than six Holiday celebration feasts during the year, serving more than 9,000 clients. In addition, Dining Services partnered with our Resident Empowerment Program to establish a Food Services (Prep, Sanitation, Serving, etc.) training internship program.

10 How many employees will administer the program, of those, how many are current, how many are proposed?

4	Number of Employees
4	Current
0	Proposed

11 List by employee name, each of the organization's existing staff positions, including qualifications and years of experience with agency as it relates to the program.

Director of Facilities and Property Management, (David Little)
David has been in charge of Facilities and Property Management for Catholic Charities for 2 yrs 9 months. David has been with Catholic Charities for 11 years and has 17 years in business management. David oversees the Maintenance and Housekeeping Departments including improvements and renovations for all of Catholic Charities properties.

Maintenance Department, (Robert Robinson)
The maintenance staff performs many various tasks throughout the Donald W. Reynolds Plaza and all of Catholic Charities many properties. These tasks consist of monthly preventative maintenance routines, daily maintenance requests and improvements to all of Catholic Charities properties. Robert has been with Catholic Charities maintnenance department for 4 years.

Housekeeping Department, (Terrance Fisher, Jorge Ramirez)
The housekeeping department performs different tasks throughout the Donald W. Reynolds Plaza. These tasks consist of dusting, mopping, and vacuuming, waxing, moving furniture, operating the commercial laundry and maintaining the cleanliness of the Donald W. Reynolds Plaza. Terrance and Jorge have been with Catholic Charities housekeeping departments for 5 years.

12 Financial Narrative - CDBG funds are intended for direct client services, administrative costs should be kept to a minimum.

☑ Section Complete (all questions answered)

13 Identify and describe any audit findings, investigations, or probation by any funding organizations in the past three years. Include the name of auditing agency and/or CPA.

The agency has an annual audit each year by an independent company. This audit, which was performed by Kafoury, Armstrong & Co., is in accordance with generally accepted auditing standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States. During the past 10 years, the auditor's opinion has supported that the financial position of the agency complies and has complied with generally accepted accounting procedures. In addition, the agency is periodically audited by others; for example funding providers, U.S. Department of Human Services, the City of Las Vegas, the State of Nevada-workers compensation etc.

For Fiscal Years 2008, 2009, and 2010, the overall audit result was unqualified, and the agency was identified as low risk.

For details, please see our most recent audit that is attached as Exhibit C.

14 Describe the organization's fiscal management, including financial reporting, record keeping, accounting systems, payment procedures and audit requirements. Include contact information for your accountant or bookkeeping service.

Financial statements are prepared and distributed monthly by the Controller and reviewed with the Board of Trustees. The statements reflect actual revenues and expenditures to budgeted amounts and the variances by month and year to date. Anomalies are analyzed and corrective actions are instituted when necessary. The Board makes recommendations and approves the financial statements at each meeting. The budget is prepared by cost centers and their administrators and directors. The Board of Trustees approves the annual agency budget at its June meeting.

The Finance Division operates with a staff of eleven. Policies and procedures for accountability in the areas of cash receipts, fixed assets, purchasing and cash disbursements are in writing and given to each department head.

15 Please list the sources of cash match. Use the dollar amount. Enter amount, 0 or n/a in boxes.

145148	Agency Cash (fundraising)
0	Foundation Endowment
0	Other
0	Commited Funds (attach letters)

16 Has your proposed budget changed (increased or decreased) by more than 25% compared to last year? Provide an explanation. If not, state N/A.

N/A

17 Describe your In-Kind contributions. Agencies with more than 25% to reach the minimum $60,000 budget will not be accepted.

N/A

18 What is the average cost per client for all clients and CLV CDBG clients?

275.15	All Clients (total budget/by # of clients)
550.30	CLV CDBG Clients (total budget/by CLV Clients)

19 If fees are charged, describe the fee structure and certification that fees do not exceed the cost of delivery of service. If fees are charged upload fee schedule (Exhibit 6)

There is no fee; these services are completely free of charge.

20 Discuss the organization's leveraged funds. Leveraging may include cash match, other federal dollars, donated, or in-kind physical match, (such as free space, equipment, etc) or in-kind match provided by volunteers. Per IRS $19 per volunteer.

The organization's leveraged funds for the cash match are generated through donations and fundraising activities.

21 Describe fundraising activities for this program; include how many fundraising activities will be held during the year?
Catholic Charities holds two fundraising events per year. In September, the Spiedini event is held on our behalf. Our Heart of Hope Award Luncheon will always be held the Thursday before Valentine's Day.

Catholic Charities also solicits donations throughout the year using direct mail appeals. They include a Thanksgiving appeal, which is done by sending out our annual calendar in late November, our annual Thanksgiving in April, and the Keeping in Touch newsletter. The fundraising efforts are used to fund all programs that suffer from deficient funding.

22 How many clients/households will be provided services if the agency receives 100%, 75%, 50% or 25% of the current request?

700	100% funded
525	75% funded
350	50% funded
175	25% funded

23 Please list your top five (5) Priorities using the categories below. Indicate dollar amount for each. Note: A scholarship can only be offered if other participants pay a fee to attend the program. Use 0 or n/a.

30465	Direct Staff Salaries/Fringe Benefits
4992	Administrative Salaries/Fringe Benefits
0	Direct Program Delivery Costs
0	Scholarships
12000	Program Supplies/Equipment
0	Operating

24 Please number each category in the boxes below as to their importance to the agency.

1	Direct Staff Salaries/Fringe Benefits
4	Administrative Salaries/Fringe Benefits
5	Direct Program Delivery Costs
0	Scholarships
2	Program Supplies/Equipment
3	Operating

25 Does agency plan on applying for any FY 12/13 CDBG/Clark County OAG/ESG or state funds for this program from the following entities? Please list the amount below or enter 0 if n/a in each box.

0	Clark County
0	City of Henderson
0	City of North Las Vegas
0	State of Nevada

26 Applicant understands the importance of bringing the CEO/Executive Director, CFO/Controller, Program Manager, and/or clients to the Application Presentation Meeting.

- [x] Yes
- [ ] No

27 Attachments (Documents Tab) Must be submitted in the format presented - Excel or Word, unless noted otherwise.

- [x] #1 Certification Form (PDF)
- [x] #2 Program Budget Form
- [x] #3 In-Kind Explanation Form
- [x] #4 Three Year Funding History
- [x] #5 Performance Measures Form

28 EXHIBITS (Documents Tab) All agencies must submit their 990 if they did not have an A-133 Audit. Even if you do not have a Fee Schedule, please check the box. (this is just a reminder)

- [x] #A Proof of 501 C(c)(3) or (4) Status - letter must be 10 years old or less
- [x] #B Copy of Current Operating Budget
- [x] #C Copy of audit as explained in instructions
- [x] #D Copy of IRS 990 (check even if n/a)
- [x] #E Board of Directors
- [x] #F Articles of Incorporation
- [x] #G Fee Schedule (check even if n/a)

Budget

Funding Sources/Revenues	Program Budget	Committed Funds	Uncommitted Funds
Federal Funds			
Local Funds/Foundations	$47,457		$47,457
Fundraising			
Agency Cash	$145,148	$145,148	
Donations			
In-Kind			
Total	**$192,605**	**$145,148**	**$47,457**

Funding Uses/Expenses	Program Budget	Committed Funds	Uncommitted Funds
Personnel Salaries (Direct Client)	$143,645	$113,180	$30,465
Personnel Salaries (Admin)	$24,960	$19,968	$4,992
Direct Client Services/Scholarships	$24,000	$12,000	$12,000
Supplies			
Operating/Administration			
Equipment			
Total	**$192,605**	**$145,148**	**$47,457**

Budget Narrative

The uncommitted funds are comprised of the $47,457 request from the CLV CDBG grant. The $145,148 is agency funding.
Personnel Salaries (Direct Client) are based on the salaries of two housekeepers, one maintenance person, and two client safety personnel.
Personnel Salaries (Admin) is configured as 25% of direct salaries, non-inclusive of fringe benefits.
Direct Client Services consists of supplies for the public restroom. The supplies are: 175 cases of 2 ply toilet paper @ $34.89 per ($6,106), 130 cases of Enmotion towels @ $49.96 per ($6,495), 50 cases of trash bags @ $21.30 per ($1,065), 20 cases of cotton mop heads @ $45 per ($900), 30 cases of toilet seat covers @ $42.03 per ($1,260), 2 drums (55 gal) liquid hand soap @ $257 per ($514), 2 drums (55 gal) disinfectant @ $645 per ($1,290), and maintenance supplies (plumbing parts, paint, etc.) $6,370.

Documents

Instructions for Documents Requested

These documents must be downloaded from this site - illegible documents are not acceptable. You may link large document files, as the system will not accept any files that are larger than 10 megabytes.

Please check to be sure of their content. Please submit Exhibits and Attachments as directed (PDF, Excel or Word) Do Not Change formats – Keep 1 page forms to 1 page. For Attachments, click on download template and follow directions.

To upload your documents, click upload template, write the name and then click browse, find the document on your computer and click open, then upload. You will have to close the window each time. This process is similar to attaching a document to an email.

ATTACHMENTS
Certifications: Compliance Document & Certification Of Application (Attachment 1): Download, complete, and sign the Certification Document (2 pages), then scan it and upload it with the other documents.

Budget Form Spreadsheet (Attachment 2) - You must use the provided Excel form.

Three Year Funding History (Attachment 3) - You must use the provided Excel form.

In-Kind Explanation Form (Attachment 4) - You must use the provided Excel form.

Performance Measures Form (Attachment 5) - You must use the provided Word form. Create one form with multiple measures on one Word Document, and upload.

EXHIBITS
Documentation Of Non-Profit Status (Exhibit A)
Copy of IRS letter showing current 501 C (3) or (4) status. PENDING STATUS WILL NOT BE ACCEPTED. Letter must be less than 10 years old.

Copy Of Current Operating Budget (Exhibit B)
Must have Revenue and Expenditures.

Audit/Financial Statement (Exhibit C)
All applicants must submit an A-133 Audit, audited financials or annual certified financial statements. ***See Instructions in the Application Manual as to applicable Audit information. Audits may not be older than FY 2009.

IRS 990 (Exhibit D) Must not be older than 2009.

Board Of Directors (Exhibit E)
Include a list of all persons serving on the Board of Directors, and any company affiliation. ex, Board President Jane Smith, Vice President Bank of USA.

Articles Of Incorporation (Exhibit F) Submit a copy of the Articles of Incorporation to document the mission objectives.

Fee Schedule (Exhibit G)
Reasonable fees may be charged for program services. If fees are charged, applicants must provide a copy of their current fee schedule.

Documents Requested *	Required?	**Attached Documents** *
Attachment #1 Application Certification Form (upload as PDF) - signatures required download template	☐	Attachment #1 Application Certification Form
Attachment #2 Budget Form (Excel Document Only) download template	☐	Attachment #2 Budget Form
Attachment #3 Three Year Funding History (Excel Document only) download template	☐	Attachment #3 Three Year Funding History
Attachment #4 In-Kind Explanation Form (Excel Document only) download template	☐	Attachment #4 In-Kind Explanation Form
Attachment #5 Performance Measures Form (Word Only) If more than one, copy and submit multiple measures on one Word Document. download template	☐	Attachment #5 Performance Measures
Exhibit A - Documentation of Non Profit Status (PDF)	☐	Exhibit A Documentation of Non Profit Status
Exhibit B - Copy of Current Operating Budget (Excel, PDF or Word)	☐	Exhibit B Copy of Current Operating Budget
Exhibit C - Copy of Audit - See Application Manual for the type you are required to submit	☐	Exhibit C Copy of Audit
Exhibit D - Copy of IRS 990 See Application Manual for direction	☐	Exhibit D Copy of IRS 990
Exhibit E - Board of Directors PDF on Letterhead	☐	Exhibit E Board of Directors
Exhibit F - Articles of Incorporation (PDF)	☐	Exhibit F Articles of Incorporation
Exhibit G - Fee Schedule (PDF)	☐	Exhibit G Fee Schedule
Exhibit H - Letters of Monetary Support 0r Committed Funds	☐	Exhibit H Letters of Monitory Support

** ZoomGrants™ is not responsible for the content of uploaded documents.*

ATTACHMENT #1 – CERTIFICATIONS

Incomplete applications will not be accepted.
Complete, sign and download this two page form by PDF for each application submitted

As a condition of applying for Community Development Block Grant Public Service (CDBG PS) and/or Housing Opportunities For Persons With AIDS (HOPWA) funds, agencies acknowledge the following:

Catholic Charities of Southern Nevada

(name of organization requesting federal funds)

CERTIFICATION AND COMPLIANCE WITH CIVIL RIGHTS ACT OF 1964 AND AMERICANS WITH DISABILITIES ACT OF 1990

Certifies that it prohibits discrimination in accordance with Title VI of the Civil Rights Act of 1964. Written documents outlining this organization's non-discrimination policy are posted at organization, on file and available for review. It is further certified that this organization has reviewed its programs, programs and services for compliance with all applicable regulations contained in the Americans with Disabilities Act of 1990. Written documentation concerning this review and corrective actions taken (if any) are on file and available for review.

CERTIFICATION OF NON-DEBARRED STATUS

The undersigned acknowledges and certifies that they are in compliance with 24 CFR Part 5 and 24 CFR Part 570.609 & 574 - Use of debarred, suspended or ineligible contractors or subrecipients. Assistance under this Part shall not be used directly or indirectly to employ, award contracts to, or otherwise engage the services of, or fund any contractor or subrecipient during any period of debarment or placement in ineligibility status under the provisions of 24 CFR Part 24.

Further, in the case of construction programs, the prime contractor certifies same for self and all subcontractors on any federally funded program.

CERTIFICATION OF CITY OF LAS VEGAS AFFILIATION

List the names and positions of members of the Board of Directors, officers, workers or members of the organization who are on the City Council, appointed by a member of the City Council or a City employee. **If none, check the box below that states NONE.**

[X] **NONE IN ORGANIZATION**

NAME	POSITION IN ORGANIZATION	AFFILIATION WITH CITY

THRESHOLD CERTIFICATION

Agency understands it must comply with the minimum thresholds set forth by PRNS for each funding source, as stated in the Application Manual. In addition, all attachments must be submitted in either PDF, or the original format of the documents as provided on the City of Las Vegas Website, and the Zoom Grants website. Failure to submit the required documents would deem the application unacceptable.

CERTIFICATION OF APPLICATION

The Board of Directors of Catholic Charities of Southern Nevada

does hereby resolve that on November 21, 2011,

the Board reviewed the Application for City of Las Vegas Federal Grant Funds (CDBG and/or HOPWA) to be submitted to the City of Las Vegas Office of Parks, Recreation & Neighborhood Services for funding consideration for the fiscal year 2012/2013 and in a proper motion and vote approved this application for submission. The Board further certifies that the organization making this application has complied with all applicable laws and regulations pertaining to the application and is a non-profit organization, tax-exempt and incorporated in the State of Nevada.

The Board proposes to provide the services or program identified in the Program Narrative in accordance with this application for Community Development Block Grant Funds and/or Housing Opportunities for Persons With AIDS. If this application is approved and this organization receives federal funding from the City of Las Vegas, this organization agrees to adhere to all relevant Federal, State and local regulations and other assurances as required by the City. Furthermore, as the duly authorized representative of the organization, I certify that the organization is fully capable of fulfilling its obligation under this application as stated herein.

I further certify that this application and the information contained herein are true, correct and complete. I acknowledge and accept the terms and conditions of the Threshold Certification, and understand that omission of any required documents shall render the application as non-acceptable.

I also authorize the following person(s) to have signatory authority regarding this grant:

Msgr. Patrick R. Leary	Chief Executive Officer
Name	Title
Name	Title
Patricia Trent Morrissey	11/21/2011
President/Board of Directors (Or other authorized person)	Date

Failure to respond to any of the information requested in the application package may be reason to deny the application. Additional financial information may be requested upon review of the application.

PENALTY FOR FALSE OR FRAUDULENT STATEMENT

U.S. Code Title 18, Section 1001, provides that a fine of up to $10,000 or imprisonment for a period not to exceed five years, or both, shall be the penalty for willful misrepresentation and the making of false, fictitious statements, knowing same to be false.

ATTACHMENT 2 – PROGRAM BUDGET

This section *outlines your organization's plan on how resources, especially time or money will be allocated or spent during the 2012/2013 fiscal year.* Please round to the nearest hundred. ***Incomplete applications will not be accepted. Do not enter zeros in every column, just list figures in the columns that apply.***

NOTE: USE ONE COLUMN (D, E, F and G) FOR EACH NON-CITY OF LAS VEGAS FUNDING SOURCE TO INDICATE THE RESOURCE TO EXPENSE CATEGORY.

To minimize backup documentation, please limit your line item requests to five (5)

Total Program Budget Column automatically totals from B-G

This is a one page form

Expense Category	Total Program Budget	CLV CDBG Portion	Resources other than CLV			
(A)	(B)	(C)	(D)	(E)	(F)	(G)
FUNDING SOURCE	**Automatic Total**	**CDBG**	**Agency funds & In-Kind*** **	**Other Federal Funds**	**State & Local Funds**	**Foundations & Other Funds**
Direct Client Services	Automatic totals					
Salaries & Fringes	$143,645	$30,465	$113,180	$0	$0	$0
Administration						
Salaries & Fringes	$24,960	$4,992	$19,968			
DIRECT PROGRAM DELIVERY COSTS						
Program Supplies	$24,000	$12,000	$12,000			
Client equipment/materials	$0					
Other:*	$0					
SUPPLIES						
Office Supplies	$0					
Postage	$0					
Other:*	$0					
OPERATING						
Rent (Building/Offices)	$0					
Rent (Facility Use)	$0					
Utilities	$0					
Telephone	$0					
Bookkeeping	$0					
Consultants	$0					
Audit/CPA	$0					
Payroll Services	$0					
Printing	$0					
Fidelity Bond	$0					
Liability Insurance**	$0					
Legal	$0					
Travel	$0					
Conferences & Seminars	$0					
Staff Training	$0					
Other:*	$0					
Other:*	$0					
Other:*	$0		$0			
EQUIPMENT PURCHASE						
Computers/Software	$0					
Office Equipment	$0					
Other (Specify)*	$0					
TOTALS	**$192,605**	$47,457	$145,148	$0	$0	$0

Column B must equal columns C-G

** ***Liability insurance is required of all subrecipients and may be partially paid from grant funds.***

*** Agency Cash	$145,148	Please separate the total of Column D in these 2 boxes - if no
*** In-Kind Value	$0	In-Kind is counted place 0 in that box

ATTACHMENT 3 – PROGRAM FUNDING HISTORY

Use this section to provide an account of the revenue and expenses of your organization for the past three years and a current year projected budget. Incomplete applications will not be accepted. Do not include In-Kind in this document, use the explanation at the bottom.

The columns will total automatically

This is a one page form

Funding Cycle	09/10	10/11	11/12	**Projected 12/13**
REVENUE				
CITY	$ 37,512	$ 29,084	$ 12,540	$ 47,457
COUNTY	$ 22,400	$ 20,160		
STATE				
FEDERAL				
FEES CHARGED				
FUNDRAISING				
DONATIONS				
AGENCY FUNDS	$ 91,171	$ 135,098	$ 157,653	$ 145,148
OTHER *(explain)*				
PRIOR YEAR CARRYOVER				
TOTAL REVENUE	**$151,083**	**$184,342**	**$170,193**	**$192,605**
EXPENSES				
SALARIES	$ 135,993	$ 164,527	$ 146,563	$ 168,605
BENEFITS				
INSURANCE				
AUDIT/BOOKKEEPING				
RENT				
UTILITIES				
CONSULTANTS				
TRAVEL				
PROGRAM SUPPLIES	$ 15,090	$ 19,815	$ 23,630	$ 24,000
EQUIPMENT				
PRINTING				
DIRECT CLIENT SERVICES				
OTHER *(explain)*				
OTHER *(explain)*				
OTHER *(explain)*				
OTHER *(explain)*				
TOTAL EXPENSES	**$151,083**	**$184,342**	**$170,193**	**$192,605**
REVENUE LESS EXPENSES	**$0**	**$0**	**$0**	**$0**

NOTES:

ATTACHMENT #5 – CDBG PERFORMANCE MEASURES

Anticipated Program Outcomes: Complete the chart below to describe in detail the most significant outcome(s) this program is expected to accomplish involving its CLV CDBG participants. Provide the number of households (housing programs) and/or individuals that will benefit from each outcome. Also, explain how each outcome will be measured. Copy multiple Outcomes Tables on the same document.

Performance Measures are to document the benefit of the clients, not the agency. Their purpose is to describe the steps the client needs to take and the benchmarks to determine their progress in the funded program.

For multiple Performance Measures, copy the Outcome tables and paste them underneath with spaces in between. You do not have to copy the instructions.

Outcomes: Outcomes are not the products for the agency, but the benefits for the participants. What will be the benefits for the client? Why is this program being done? Examples of outcomes include: increase the percentage of individuals and their families that are living in stable housing, increase housing affordability for clients and their families, increase accessibility to affordable housing for clients and their families, etc. Include only the major program outcomes supported by the requested City funds.

Major Tasks: Outline the major tasks/activities to be conducted by this program (e.g. client outreach/assessment; housing referrals, information/referral, counseling/care coordinator, etc.

Outputs: Quantifiable products of tasks, e.g. number of clients and their families receiving rental housing assistance, number of clients and their families assisted to prevent from becoming homeless, number of clients and their families that received a housing referral or information, number of clients and their families receiving supportive services, etc.

Outcome Measurements: How will outcomes be measured? What follow-up/tracking will be provided to ensure outcomes are met? How will the program's impact on participants be evaluated?

State the Outcome and the number of CLV CDBG clients that will benefit for each major program component. Please be specific. The boxes will expand as you type.

Outcome #1:

A daily minimum of 20 to 45 unduplicated clients within the City of Las Vegas and surrounding areas will benefit by utilizing these public restrooms to manage their personal hygiene and attend to their basic needs. Catholic Charities will provide safe and sanitary restrooms to the homeless population 7 days a week, 24 hours a day

Major Tasks Necessary to Realize Outcomes	Outputs Resulting from Tasks
Cleaning and maintenance supplies	Maintain a clean and functioning restroom
Housekeeping and Maintenance staff	Keeping the restrooms to health standards
Security Staff	Provide clients with safe environment

Outcome Measurements: Describe evaluation tools, methods and benchmarks used to measure this outcome.
A Catholic Charities representative will periodically document program participation, surveying a cross-section of the Public Restroom participants in order to formulate an accurate representation of the clientele utilizing this 24-hour program.

CATHOLIC CHARITIES OF SOUTHERN NEVADA
2012 AGENCY BUDGET
For the months of July and 12 Months Ended 06/30/2012

0% Inc for All
2012 Approved Budget

Department	Cost Ctr	Revenue	Expense	Net
Plaza Services				
Residential Services	Cost Ctr			
Residential Services	05-110	13,000.00	98,083.65	(85,083.65)
Sub-Total Residential Services		**13,000.00**	**98,083.65**	(85,083.65)
Shelters	Cost Ctr			
CLV Emergency Shelter Winter	05-400	0.00	0.00	0.00
CLV Emergency Shelter Summer	05-410	526,980.60	526,136.11	844.49
Year Round Shelter	05-430	920,193.75	902,118.44	18,075.31
Sub-Total Shelters		**1,447,174.35**	**1,428,254.55**	**18,919.80**
Work Program	Cost Ctr			
Case Management	05-120	105,489.38	105,489.38	0.00
Phase 2/3	05-130	103,572.32	103,572.32	0.00
Crossroads	05-140	32,669.99	32,669.99	0.00
Sub-Total Work Program		**241,731.69**	**241,731.69**	**0.00**
Employment Service Center	Cost Ctr			
SCSEP Title V	11-910	127,438.00	127,438.00	0.00
SCSEP State Title V	11-911	10,000.00	10,000.00	0.00
SCSEP-CDBG Title V	11-912			0.00
Community Serv Employ Title V	11-915	50,511.90	50,511.90	0.00
SCSEP Title V	11-914	509,517.00	509,517.00	0.00
ORR-Employment	11-557			0.00
Employment Center	11-200			0.00
Resident Work Program	11-210			0.00
Residential Work Pgrm County Funds	11-220			0.00
SNWIB Grant	11-234			0.00
SNWIB Grant	11-235			0.00
Sub-Total Employment Service Center		**697,466.90**	**697,466.90**	**0.00**
St. Vincent	Cost Ctr			
StVincent/Help-HUD	05-500	256,449.48	256,449.48	0.00
St. Vincent/Help-HUD match	05-510	29,829.99	29,829.99	0.00
StVincent/HELP Property Managemer	05-520	17,010.33	17,010.33	0.00
St Vincent /HELP - COC 06	05-540			0.00
StVincent CDBG 07	05-550	29,260.00	29,260.00	0.00
St Vincent COC 07	05-560			0.00
Marian Residence	05-590			0.00
Marian Match	05-591			0.00
Sub-Total St. Vincent		**332,549.80**	**332,549.80**	**0.00**
Total Plaza Services		**2,731,922.74**	**2,798,086.59**	(66,163.85)
Migration & Immigration				
Migration & Refugee Services (MRS	Cost Ctr			
R&P	08-551	398,414.39	398,414.39	0.00
Targeted Assist. Prog.	08-552	436,399.91	436,399.91	0.00
USCCB-Cuban Haitian	08-553	170,061.48	170,061.48	0.00
Wilson Fish	08-555	4,138,228.43	4,138,228.43	0.00
ORR-Social Services	08-557	653,827.31	653,827.31	0.00
ESL	08-558	396,513.52	396,513.52	0.00
RAP Discretionary	08-559	166,334.24	166,334.24	0.00
CHFR Emergency Assistance	08-560	17,541.64	17,541.64	0.00
USCCB- Match Grant fy 2005	08-568			0.00
ABE-Incentive	08-588			0.00
Imigrants Unaccompanied Minors	08-591			0.00
MRS-Non Billable MGM Grant	08-593			0.00
In-kind Vouchers	08-595			0.00
United Way Basic Needs	08-596	1,297.95	1,297.95	0.00

CATHOLIC CHARITIES OF SOUTHERN NEVADA
2012 AGENCY BUDGET
For the months of July and 12 Months Ended 06/30/2012

0% Inc for All
2012 Approved Budget

Department	Cost Ctr	Revenue	Expense	Net
United Way Employment	08-597	1,633.26	1,633.26	0.00
Clark County School Dist	08-598	30,170.78	30,170.78	0.00
RAP NON BILL	08-599	400.00	400.00	0.00
Sub-Total Migration & Refugee Services		**6,410,822.91**	**6,410,822.91**	**0.00**
Immigration	Cost Ctr			
Immigration	08-527	164,000.00	164,000.00	0.00
Sub-Total Immigration		**164,000.00**	**164,000.00**	**0.00**
Total Migration & Immigration		**6,574,822.91**	**6,574,822.91**	**0.00**
Food Services				
United Way Immediate Needs	03-267	30,000.00	29,531.45	468.55
Sub-Total Social Services Food		**30,000.00**	**29,531.45**	**468.55**
Lied Dining	Cost Ctr			
Lied Dining Room	05-300	1,391,175.00	1,688,018.80	(296,843.80)
Off Site Meals	05-305	0.00	0.00	0.00
Electronic Benefits Program	05-310	312,000.00	311,437.88	562.12
Dining Room Meal Sales	05-311	0.00	0.00	0.00
Dining Room OAG Grant	05-330	0.00	0.00	0.00
United Way Immediate Needs	05-367	42,500.00	42,021.62	478.38
Sub-Total Lied Dining		**1,745,675.00**	**2,041,478.30**	(296,281.68)
Meals On Wheels (MOW)	Cost Ctr			
Laughlin/Sandy Valley	04-651	21,372.00	21,372.00	0.00
EFSP Grant	04-653	0.00	0.00	0.00
Medicaid	04-654	0.00	0.00	0.00
Kosher Meals	04-655	3,000.00	3,000.00	0.00
Humana Meals	04-656	0.00		0.00
ARRA MOW	04-657			0.00
ARRA Indian Springs	04-658			0.00
MOW Management	04-660	5,000.00	0.00	5,000.00
MOW Waiting List	04-661	21,000.00	21,000.00	0.00
MOW-Kitchen	04-662	1,138,201.00	895,550.89	242,650.11
DAS -Indian Springs	04-663	14,516.00	14,516.00	0.00
SNP - Nutrition Therapy	04-664	133,882.00	133,822.21	59.79
SNP - 111B	04-665	261,887.00	264,769.01	(2,882.01)
MOW Special needs	04-666			0.00
Quality Assurance	04-667	121,000.00	121,092.80	(92.80)
Elgibility	04-668		53,721.91	(53,721.91)
Delivery	04-669		188,951.85	(188,951.85)
Sub-Total Meals On Wheels (MOW)		**1,719,858.00**	**1,717,796.67**	**2,061.33**
Meal Delivery Programs	Cost Ctr			
Sunrise Children's Fund	04-673	86,000.00	85,516.36	483.64
Sub-Total Meal Delivery Programs		**86,000.00**	**85,516.36**	**483.64**
Total Food Services		**3,581,533.00**	**3,874,322.78**	(293,736.71)
Family Services				
Social Services	Cost Ctr			
Homeless to Home	03-270	241,100.00	241,100.00	0.00
Social Services Commodities	03-280			0.00
Social Services Las Vegas	03-290	171,610.05	171,610.05	0.00
Imm. Needs Bus Passes	03-291			0.00
Housing Corp	03-300			0.00
EFSP (formerly FEMA)	03-310			0.00
Shelf Stable Meals	03-313			0.00
Sub-Total Social Services		**412,710.05**	**412,710.05**	**0.00**
Women, Infants & Children (WIC)	Cost Ctr			

CATHOLIC CHARITIES OF SOUTHERN NEVADA
2012 AGENCY BUDGET
For the months of July and 12 Months Ended 06/30/2012

Department	Cost Ctr	0% Inc for All 2012 Approved Budget Revenue	Expense	Net
WIC-Henderson	09-240	301,755.92	301,755.92	0.00
WIC-Owens	09-250	278,673.32	278,673.32	0.00
WIC-Nellis	09-260	97,355.68	97,355.68	0.00
WIC	09-270			0.00
WIC	09-999			0.00
Sub-Total Women, Infants & Children (WIC)		**677,784.92**	**677,784.92**	**0.00**
Adoptions	Cost Ctr			
Adoption	06-600	439,150.00	389,753.44	49,396.56
Case Management	06-601			0.00
Sub-Total Adoptions		**439,150.00**	**389,753.44**	**49,396.56**
Senior Programs	Cost Ctr			
Respite				
Respite	04-433	13,500.00	13,500.00	0.00
Independent Living Grant	04-435	125,621.60	125,621.60	0.00
Respite Care-Program Fees	04-436			0.00
Clark County	04-437			0.00
Respite Care-UWAY	04-438			0.00
Sub-Total Resprite		**139,121.60**	**139,121.60**	**0.00**
Foster Grandparent				
FGP CNCS ends 3-31-07	04-551	395,477.00	395,477.00	0.00
FGP DAS 38 (no award letter as of 7-3	04-552		0.00	0.00
FGP MATCH	04-553	21,200.00	21,146.94	53.06
FGP CCSD	04-554	21,320.00	21,320.00	0.00
Sub-Total Foster Grandparent		**437,997.00**	**437,943.94**	**53.06**
Senior Companion				
CNCS	04-771	335,850.00	335,850.00	0.00
SCP-Community Support CLV	04-773	21,509.00	20,694.00	815.00
SCP United Way	04-774	220.00	100.93	119.07
LCB grant	04-775	142,760.00	142,760.00	0.00
Chip fees	04-776	25,000.00	24,262.93	737.07
Clark County OAG	04-778			0.00
MGM Mirage	04-779	10,000.00	10,000.00	0.00
3B	04-780			0.00
Sub-Total Senior Companion		**535,339.00**	**533,667.86**	**1,671.14**
Senior RSVP				
Telephone Reassurance-CLVHA	04-880			0.00
CNCS	04-881	58,310.00	58,310.00	0.00
Community Support Non Federal	04-882			0.00
Excess non Federal	04-883	700.00	700.00	0.00
LCB Grant	04-885	48,320.00	48,320.00	0.00
Sub-Total RSVP		**107,330.00**	**107,330.00**	**0.00**
Sub-Total Senior Programs		**1,219,787.60**	**1,218,063.40**	**1,724.20**
Total Family Services		**2,749,432.57**	**2,698,311.81**	**51,120.76**
Human Resources				
Human Resources	Cost Ctr			
Human Resources	01-300	0.00	134,181.27	(134,181.27)
Sub-Total Human Resources		**0.00**	**134,181.27**	(134,181.27)
Total Human Resources		**0.00**	**134,181.27**	(134,181.27)
Endowment Fundraising				
Endowment Fundraising	Cost Ctr			
Endowment Fundraising	12-100	6,200.00	0.00	6,200.00
Sub-Total Endowment Fundraising		**6,200.00**	**0.00**	**6,200.00**

CATHOLIC CHARITIES OF SOUTHERN NEVADA
2012 AGENCY BUDGET
For the months of July and 12 Months Ended 06/30/2012

0% Inc for All
2012 Approved Budget

Department	Cost Ctr	Revenue	Expense	Net
Total Endowment Fundraising		**6,200.00**	**0.00**	**6,200.00**
Administration				
Management and General	Cost Ctr			
General Management	01-100	160,466.94	524,250.96	(363,784.02)
Accounting -Finance	01-200	146,535.20	558,199.32	(411,664.12)
Information Technology	01-400	0.00	458,270.55	(458,270.55)
Facilities Management	01-600	0.00	0.00	0.00
Indirect Allocated to Programs		0.00	(733,590.61)	733,590.61
Sub-Total Management and General		**307,002.14**	**807,130.22**	(500,128.08)
Community Relations	Cost Ctr			
Development & CR	02-700	916,000.00	259,734.47	656,265.53
Parish Appeal (Social Ministry)	02-710			0.00
Direct Appeal	02-730			0.00
Publications	02-740	20,000.00	5,000.00	15,000.00
Heart of Hope	02-750	150,000.00	25,000.00	125,000.00
Board Development	02-790			0.00
Sub-Total Community Relations		**1,086,000.00**	**289,734.47**	**796,265.53**
Facilities	Cost Ctr			
Property Management	05-600	338,316.00	425,089.43	(86,773.43)
Bridgewater-4plex	05-610	25,920.00	11,500.00	14,420.00
Blanchard Arms Apt	05-620	60,846.00	53,250.00	7,596.00
Public Restrooms	05-630	12,540.00	12,540.00	0.00
Sub-Total Facilities		**437,622.00**	**502,379.43**	(64,757.43)
Retail Operations	Cost Ctr			
Production	10-140	172,000.00	536,271.80	(364,271.80)
Temp Store	10-150	297,500.00	190,057.34	107,442.66
Rancho Store	10-170	515,000.00	385,012.01	129,987.99
Tropicana	10-180	1,003,750.00	857,372.62	146,377.38
E-Bay	10-190	12,000.00	100.00	11,900.00
Car Sales	10-200	121,000.00	37,386.06	83,613.94
Sub-Total Retail Operations		**2,121,250.00**	**2,006,199.83**	**115,050.17**
Security	Cost Ctr			
Security	05-160	0.00	303,278.72	(303,278.72)
Sub-Total Security		**0.00**	**303,278.72**	(303,278.72)
Fertitta	Cost Ctr			
Fertitta Emergency Shelter	05-420	182,004.00	90,691.92	91,312.08
Sub-Total Fertitta		**182,004.00**	**90,691.92**	**91,312.08**
Total Administration		**4,133,878.14**	**3,999,414.59**	**134,463.55**
Total Agency Operating		**19,777,789.36**	**20,079,139.95**	(302,297.52)
Investments				
Reynolds Investments	000	0.00		0.00
Land, Bldg & Equipment	999	0.00		0.00
Total Agency		**19,777,789.36**	**20,079,139.95**	(302,297.52)

CATHOLIC CHARITIES OF SOUTHERN NEVADA

JUNE 30, 2010 AND 2009

CATHOLIC CHARITIES OF SOUTHERN NEVADA
JUNE 30, 2010 AND 2009

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KAFOURY, ARMSTRONG & CO.
A PROFESSIONAL CORPORATION
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of
Catholic Charities of Southern Nevada

We have audited the accompanying statements of financial position of Catholic Charities of Southern Nevada (a nonprofit organization) as of June 30, 2010 and 2009, and the related statements of activities, functional expenses and cash flows for the years then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and the significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Catholic Charities of Southern Nevada as of June 30, 2010 and 2009, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with *Government Auditing Standards*, we have also issued our report dated November 10, 2010, on our consideration of Catholic Charities of Southern Nevada's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audit.

Our audit was conducted for the purpose of forming opinions on the financial statements of Catholic Charities of Southern Nevada taken as a whole. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by U.S. Office of Management and Budget Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, and is not a required part of the financial statements. Such information has been subjected to the auditing procedures applied in the audit of the financial statements and, in our opinion, is fairly stated, in all material respects, in relation to the financial statements taken as a whole.

Kafoury, Armstrong & Co.

Las Vegas, Nevada
November 10, 2010

FINANCIAL SECTION

CATHOLIC CHARITIES OF SOUTHERN NEVADA
STATEMENTS OF FINANCIAL POSITION
JUNE 30, 2010 AND 2009

	2010	2009
ASSETS		
CURRENT ASSETS		
Cash unrestricted	$ 1,158,887	$ 2,129,264
Investments	-	55,956
Accounts receivable	1,316,129	1,369,507
Due from St. Vincent/HELP Inc.		
(net of allowance of $117,334 in 2010 and $0 in 2009)	48,706	68,091
Contributions receivable	859,266	-
Inventory	44,762	44,754
Prepaid expenses	88,578	18,590
Total current assets	3,516,328	3,686,162
RESTRICTED AND DESIGNATED ASSETS		
Investments restricted to capital maintenance	209,022	73,589
Investments designated for endowment corpus	134,553	99,301
Cash restricted to capital maintenance	8,798	9,238
Cash in endowment	399,249	399,249
Investments in endowment	2,080,000	2,080,000
Total restricted and designated assets	2,831,622	2,661,377
OTHER INVESTMENTS	568,472	568,143
PROPERTY AND EQUIPMENT, NET	15,896,385	16,482,281
Total assets	$ 22,812,807	$ 23,397,963
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES		
Accounts payable	$ 218,289	$ 211,830
Accrued expenses	763,009	578,712
Deferred revenues	187,086	452,203
Current portion of annuity payable	11,427	10,996
Current portion of notes payable	34,981	32,646
Total current liabilities	1,214,792	1,286,387
LONG-TERM LIABILITIES		
Annuity payable, net of current portion	227,696	239,977
Notes payable, net of current portion	619,390	652,866
Total long-term liabilities	847,086	892,843
Total liabilities	2,061,878	2,179,230
NET ASSETS		
Unrestricted	16,457,082	17,985,455
Temporarily restricted	955,332	754,029
Permanently restricted	3,338,515	2,479,249
Total net assets	20,750,929	21,218,733
Total liabilities and net assets	$ 22,812,807	$ 23,397,963

See accompanying notes.

CATHOLIC CHARITIES OF SOUTHERN NEVADA
STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2010

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
SUPPORT AND REVENUE				
Support				
Government grants and reimbursement	$ 14,422,288	$ -	859,266	$ 15,281,554
Contributions from the general public	1,934,205	96,968	-	2,031,173
Support from the United Way	583,767	-	-	583,767
Support from the Catholic Stewardship Appeal	152,482	-	-	152,482
Total support	17,092,742	96,968	859,266	18,048,976
Revenues and Gains				
Sale of merchandise	542,873	-	-	542,873
Program service fees	1,018,402	-	-	1,018,402
Rental income	252,203	-	-	252,203
Medicaid reimbursements	24,293	-	-	24,293
Interest and dividend income	5,926	84,749	-	90,675
Net realized and unrealized gains/(losses) on investments	(124,764)	135,684	-	10,920
Loss on sale of assets	(510)	-	-	(510)
Miscellaneous income	76,903	-	-	76,903
Total revenue	1,795,326	220,433	-	2,015,759
Net assets released from restrictions				
Restrictions satisfied by use	116,098	(116,098)	-	-
Total support and revenue	19,004,166	201,303	859,266	20,064,735
EXPENSES				
Program services				
Thrift stores	641,661	-	-	641,661
Social services	1,642,975	-	-	1,642,975
Employment service center	1,346,269	-	-	1,346,269
Adoptions	286,047	-	-	286,047
Residential services	4,886,205	-	-	4,886,205
Immigration and refugee services	5,400,016	-	-	5,400,016
Senior programs	4,289,097	-	-	4,289,097
	18,492,270	-	-	18,492,270
Support services				
Fundraising	194,562	-	-	194,562
Management and general	1,845,707	-	-	1,845,707
	2,040,269	-	-	2,040,269
Total expenses	20,532,539	-	-	20,532,539
CHANGE IN NET ASSETS	(1,528,373)	201,303	859,266	(467,804)
NET ASSETS, beginning of year	17,985,455	754,029	2,479,249	21,218,733
NET ASSETS, end of year	$ 16,457,082	$ 955,332	$ 3,338,515	$ 20,750,929

See accompanying notes.

CATHOLIC CHARITIES OF SOUTHERN NEVADA
STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED JUNE 30, 2009

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
SUPPORT AND REVENUE				
Support				
Government grants and reimbursement	$ 14,399,259	$ -	$ -	$ 14,399,259
Contributions from the general public	3,159,397	97,544	-	3,256,941
Support from the United Way	609,799	-	-	609,799
Support from the Catholic Stewardship Appeal	155,559	-	-	155,559
Total support	18,324,014	97,544	-	18,421,558
Revenues and Gains				
Sale of merchandise	889,535	-	-	889,535
Program service fees	1,174,562	-	-	1,174,562
Rental income	272,501	-	-	272,501
Medicaid reimbursement	29,383	-	-	29,383
Interest and dividend income	12,835	123,875	-	136,710
Net realized and unrealized loss on investments	(3,823)	(298,922)	-	(302,745)
Gain on sale of assets	24,003	-	-	24,003
Miscellaneous income	88,907	-	-	88,907
Total revenue	2,487,903	(175,047)	-	2,312,856
Net assets released from restrictions				
Restrictions satisfied by use	198,777	(198,777)	-	-
Total support and revenue	21,010,694	(276,280)	-	20,734,414
EXPENSES				
Program services				
Thrift stores	872,679	-	-	872,679
Social services	1,599,937	-	-	1,599,937
Employment service center	864,248	-	-	864,248
Adoptions	252,568	-	-	252,568
Residential services	4,548,305	-	-	4,548,305
Immigration and refugee services	5,607,977	-	-	5,607,977
Senior programs	4,348,095	-	-	4,348,095
	18,093,809	-	-	18,093,809
Support services				
Fundraising	160,522	-	-	160,522
Management and general	1,637,248	-		1,637,248
	1,797,770	-	-	1,797,770
Total expenses	19,891,579	-	-	19,891,579
CHANGE IN NET ASSETS	1,119,115	(276,280)	-	842,835
NET ASSETS, beginning of year	16,866,340	1,030,309	2,479,249	20,375,898
NET ASSETS, end of year	$ 17,985,455	$ 754,029	$ 2,479,249	$ 21,218,733

See accompanying notes.

CATHOLIC CHARITIES OF SOUTHERN NEVADA
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2010

	Program Services									
	Thrift Store	Social Services	Employment Service Center	Adoptions	Residential Services	Immigration and Refugee Services	Senior Programs	Fundraising	Management and General	Total
Salaries	$ 274,944	$ 703,290	$ 416,891	$ 170,433	$ 2,063,129	$ 1,157,195	$ 1,645,030	$ 106,573	$ 893,604	$ 7,431,089
Payroll taxes	28,545	69,728	51,250	15,677	226,046	120,634	164,831	9,882	235,459	922,052
Employee benefits	27,636	69,227	43,488	13,742	226,978	117,889	169,430	11,986	68,700	749,076
	331,125	842,245	511,629	199,852	2,516,153	1,395,718	1,979,291	128,441	1,197,763	9,102,217
Professional fees	1,555	1,277	1,280	28	252,464	17,362	26,629	6,742	228,464	535,801
Program grants	-	-	-	-	-	119,900	-	-	-	119,900
Supplies	-	365,073	8,671	8,022	657,038	30,867	971,169	2,237	46,449	2,089,526
Telephone	8,712	10,150	3,358	4,403	25,561	13,530	19,500	523	17,708	103,445
Postage	207	574	485	5,548	91	9,113	2,826	12,388	4,282	35,514
Occupancy	237,573	87,849	13,919	16,359	581,322	266,133	163,950	885	121,223	1,489,213
Repairs and maintenance	12,050	714	232	387	76,762	2,594	9,248	26	2,920	104,933
Printing and publications	10,561	4,411	2,254	11,085	2,104	3,521	4,397	31,237	3,870	73,440
Transportation	22,797	-	2,618	-	49,775	20,182	77,386	-	2,745	175,503
Local travel	57	881	894	4,846	114	1,530	23,466	450	1,686	33,924
Conferences and conventions	-	-	9,340	441	1,940	23,779	11,186	560	8,412	55,658
Client assistance	-	315,647	671,380	26,841	23,267	3,488,881	816,300	-	96,143	5,438,459
Bad debts	-	-	-	-	117,334	-	-	-	-	117,334
Training costs	-	-	100,265	-	-	-	-	-	-	100,265
Miscellaneous	5,458	7,624	1,606	8,235	5,560	4,638	14,288	11,073	61,398	119,880
Subtotal	298,970	794,200	816,302	86,195	1,793,332	4,002,030	2,140,345	66,121	595,300	10,592,795
Depreciation and amortization	11,566	6,530	18,338	-	576,720	2,268	169,461	-	52,644	837,527
Total expenses	$ 641,661	$ 1,642,975	$ 1,346,269	$ 286,047	$ 4,886,205	$ 5,400,016	$ 4,289,097	$ 194,562	$ 1,845,707	$ 20,532,539

See accompanying notes.

CATHOLIC CHARITIES OF SOUTHERN NEVADA
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED JUNE 30, 2009

	Program Services									
	Thrift Store	Social Services	Employment Service Center	Adoptions	Residential Services	Immigration and Refugee Services	Senior Programs	Fundraising	Management and General	Total
Salaries	$ 305,796	$ 659,592	$ 331,031	$ 153,207	$ 2,044,807	$ 1,186,190	$ 1,563,919	$ 84,641	$ 818,019	$ 7,147,202
Payroll taxes	30,152	81,559	34,361	14,661	204,482	131,707	149,074	7,766	118,858	772,620
Employee benefits	32,056	59,255	26,091	12,409	190,030	110,604	128,292	10,833	55,249	624,819
	368,004	800,406	391,483	180,277	2,439,319	1,428,501	1,841,285	103,240	992,126	8,544,641
Professional fees	4,375	11,024	4,213	108	333,412	18,559	30,279	11	241,707	643,688
Supplies	14,637	395,388	3,947	5,291	431,776	23,492	1,123,729	1,502	40,927	2,040,689
Telephone	14,656	9,477	1,018	4,252	16,074	13,455	16,178	45	18,703	93,858
Postage	318	534	363	5,568	169	9,121	16,127	8,152	4,729	45,081
Occupancy	400,762	97,265	13,419	17,167	579,638	257,982	141,674	895	113,883	1,622,685
Repairs and maintenance	266	2,216	-	84	47,936	3,134	3,537	-	575	57,748
Printing and publications	11,129	36,513	1,248	14,035	4,588	6,527	2,336	31,469	4,779	112,624
Transportation	23,532	1,851	3,609	-	39,688	24,240	60,963	-	2,877	156,760
Local travel	2,724	2,104	296	3,990	623	1,638	13,384	100	1,743	26,602
Conferences and conventions	-	10,142	-	-	770	14,740	13,452	167	2,085	41,356
Client assistance	-	219,344	442,748	21,020	56,791	3,797,353	891,678	3,102	86,295	5,518,331
Miscellaneous	14,263	4,518	1,904	776	5,294	4,699	14,766	11,839	72,246	130,305
Subtotal	486,662	790,376	472,765	72,291	1,516,759	4,174,940	2,328,103	57,282	590,549	10,489,727
Depreciation and amortization	18,013	9,155	-	-	592,227	4,536	178,707	-	54,573	857,211
Total expenses	$ 872,679	$ 1,599,937	$ 864,248	$ 252,568	$ 4,548,305	$ 5,607,977	$ 4,348,095	$ 160,522	$ 1,637,248	$ 19,891,579

See accompanying notes.

CATHOLIC CHARITIES OF SOUTHERN NEVADA
STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED JUNE 30, 2010 AND 2009

	2010	2009
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	$ (467,804)	$ 842,835
Adjustments to reconcile change in net assets to net cash provided (used) by operating activities:		
Depreciation and amortization	837,527	857,211
Donated property	(164,855)	-
Net realized and unreazlied (gain) loss on investments	(10,920)	302,745
Loss (gain) on sale of assets	510	(24,003)
(Increase) decrease in assets:		
Accounts receivable	72,763	(528,140)
Contributions receivable	(859,266)	-
Inventory	(8)	(798)
Prepaid expenses	(69,988)	(1,264)
Increase (decrease) in liabilities:		
Accounts payable	6,459	111,993
Accrued expenses	184,297	49,561
Deferred revenue	(265,117)	360,555
Income restricted for long-term purposes		
Interest and dividend income	(84,749)	(123,875)
Net cash provided (used) by operating activities	(821,151)	1,846,820
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchases of property and equipment	(251,631)	(556,783)
Purchase of investments, restricted to capital maintenance	(89,552)	(223,299)
Purchase of unrestricted investments	-	(59,779)
Proceeds from sale of investments	149,759	24,002
Advances to Pacheco Trust	(11,850)	(11,850)
Net cash used by investing activities	(203,274)	(827,709)
CASH FLOWS FROM FINANCING ACTIVITIES		
Interest and dividend income restricted for long-term purposes	84,749	123,875
Repayment of long-term debt	(31,141)	(28,900)
Net cash provided by financing activities	53,608	94,975
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	(970,817)	1,114,086
CASH AND CASH EQUIVALENTS, beginning of year	2,537,751	1,423,665
CASH AND CASH EQUIVALENTS, end of year	$ 1,566,934	$ 2,537,751
SUPPLEMENTAL DISCLOSURES OF CASH FLOW INFORMATION		
Interest paid	$ 84,168	$ 84,671

NONCASH INVESTING AND FINANCING ACTIVITIES

In fiscal year 2010, the Organization received a donation of real property valued at $164,855.

RECONCILIATION OF BALANCES INCLUDED IN CASH AND CASH EQUIVALENTS		
Cash unrestricted	$ 1,158,887	$ 2,129,264
Cash in endowment	399,249	399,249
Cash restricted to capital maintenance	8,798	9,238
	$ 1,566,934	$ 2,537,751

See accompanying notes.

NOTE 1 – Summary of Significant Accounting Policies

Organization

Catholic Charities of Southern Nevada (the Organization) is a nonprofit organization incorporated under the laws of Nevada in 1945. Central offices are located in Las Vegas and services are provided in the Las Vegas Diocese.

Business Activity

The purpose of the Organization is to establish programs and service centers which will ensure that the basic needs of the poor, homeless, and disadvantaged people in Southern Nevada will be met, as far as resources allow, in cooperation with other local social service agencies. The services provided include dining rooms and shelters for indigent transients, emergency assistance programs for the needy, immigration and migration assistance programs, an adoption service, and an employment service center. The Organization also provides services through a Senior Nutrition Program, Senior Companion Program, Retired Senior Volunteer Programs, and a Senior Citizens Employment Service.

Basis of Accounting

The financial statements of the Organization have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

Financial Statement Presentation

The Organization follows FASB Accounting Standards Codification Topic 958, *Not-for-Profit Entities 958.* Under Topic 958, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted, temporarily restricted and permanently restricted. In addition, the Organization is required to present a statement of cash flows.

Use of Estimates in Financial Statements

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires the use of estimates based on management's knowledge and experience. Due to their prospective nature, actual results could differ from those estimates.

NOTE 1 – Summary of significant Accounting Policies (continued)

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Organization considers all cash (both unrestricted and restricted) and all unrestricted highly liquid investments with an initial maturity of three months or less to be cash equivalents. However, restricted investments held in money market fund investments, which are further described in Note 4, are not included in cash for purposes of the statement of cash flows since these funds have been set aside by either the Organization's Board of Trustees or by agreements with donors for long-term investment purposes.

Investments

The Organization carries investments in marketable securities with readily determinable fair values and all investments in debt securities at their fair values in the Statement of Financial Position. Unrealized gains and losses are included in the change in net assets in the accompanying Statement of Activities. The Organization carries its real estate investments at the fair market value as of the dates the investments were donated to the Organization.

Accounts Receivable

The Organization determines its allowance for doubtful accounts based on prior years' experience and management's analysis of possible bad debts. Accounts receivable is stated net of an allowance for doubtful accounts in the amounts of $117,334 and $0 for the years ended June 30, 2010 and 2009, respectively.

Deferred Revenues

Deferred revenues represent amounts received from grants for which services have not yet been provided.

Inventory

Inventory consists of merchandise held for sale at the Organization's thrift stores. Purchased inventory is stated at the lower of cost (determined using the first-in, first-out method) or market. Donated inventory at the end of the year is estimated based on an average of monthly donated inventory sales.

Property and Equipment

Purchased assets are recorded at cost. Donated property and equipment are carried at the approximate fair value at the date of donation. It is the Organization's policy to capitalize only those assets with a cost of $2,500 or more. Depreciation of assets is computed on a straight-line basis over the estimated service lives of the assets, which are generally 3 to 39 years. Expenses for maintenance and repairs are charged to operation when incurred.

NOTE 1 – Summary of significant Accounting Policies (continued)

Donated Assets

Generally, donated assets, if significant in amount, are recorded at their fair market value, provided the Organization has a clearly measurable and objective basis for determining the value.

The Organization reports gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or the purpose of the restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. Donor restricted contributions, whose restrictions are met in the same reporting period, are reported as unrestricted support.

The Organization reports gifts of land, buildings and equipment as unrestricted support unless explicit donor stipulations specify how the donated asset must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long those long-lived assets must be maintained, the Organization reports expirations of donor restriction when the donated or acquired long-lived assets are placed in service.

Donated Services

A substantial number of unpaid volunteers have donated significant amounts of their time to the Organization's program services and fund raising events. However, due primarily to the nature of the services provided, the value of such services has not been reflected in the accompanying financial statements.

Designations of Unrestricted Net Assets

It is the policy of the Board of Trustees of the Organization to review its plans for future property improvements and acquisitions from time to time and to designate appropriate sums of unrestricted net assets to assure adequate financing of such improvements and acquisitions.

Promises to Give

Unconditional promises to give are recognized as revenues or gains in the period received and as assets, decreased of liabilities, or expenses depending on the form of the benefits received. Conditional promises to give are recognized only when the conditions on which they depend are substantially met and the promises become unconditional.

NOTE 1 – Summary of significant Accounting Policies (continued)

Concentration of Grant Contributions

For the year ended June 30, 2010, approximately 51% of the Organization's grant funding was provided from two sources. The Office of Refugee Resettlement provided 32% and Nevada Division for Aging Services provided 19%. For the year ended June 30, 2009, approximately 63% of the Organization's grant funding was provided from two sources. The Office of Refugee Resettlement provided 47% and Nevada Division for Aging Services provided 16%.

Advertising

Advertising costs incurred in the normal course of operations are expensed as they are incurred. Advertising expenses totaled $20,477 and $53,050 for the years ended June 30, 2010 and 2009, respectively. Donated advertising services are included in advertising expense totaling $6,731 and $0 at June 30, 2010 and 2009, respectively.

Expense Allocation

The costs of providing various programs and other activities have been summarized on a functional basis in the Statement of Activities and in the Statement of Functional Expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

Income Tax Status

The Organization is exempt from federal income taxes under Section 501 (c)(3) of the Internal Revenue Code and has been classified as other than a private foundation by the Internal Revenue Service. Accordingly, no income tax is reflected in the accompanying financial statements.

The Organization's Federal Exempt Organization Informational Returns, Form 990, for 2006, 2007 and 2008 are subject to examination by the Internal Revenue Service generally for three years after they are filed.

Subsequent Events

Management has evaluated subsequent events through November 10, 2010, which is the date these financial statements were available to be issued.

NOTE 2 – Promise to Give

Contributions receivable consist of a promise to give a piece of land from Clark County, Nevada in the amount of $859,266. The promise was given during the year ended June 30, 2010 and the land was received in August 2010, consequently an allowance for uncollectible promises has not been recorded.

NOTE 3 – Property and Equipment

Property and equipment activity for the year ended June 30, 2010 consisted of the following:

	Balance at June 30, 2009	Additions	Deletions	Balance at June 30, 2010
Land	$ 738,694	$ -	$ -	$ 738,694
Buildings	19,380,842	107,120	-	19,487,962
Property improvements	923,406	26,318	-	949,724
Furniture and equipment	2,588,553	75,420	-	2,663,973
Automobiles	703,121	42,775	16,995	728,901
	24,334,616	$ 251,633	$ 16,995	24,569,254
Less: accumulated depreciation	(7,852,335)			(8,650,662)
	$16,482,281			$ 15,918,595

Property purchased with federal funds may, in accordance with grantor agreement, be required to be returned to the federal government. However, as day-to-day control lies with the grantee, such assets have been included in the statement of financial position of Catholic Charities of Southern Nevada.

NOTE 4 – Investments

Investments at June 30, 2010 and 2009 were comprised of the following:

	Carrying Value	
	2010	2009
Common stock	$ -	$ 55,956
Mutual funds	2,423,575	2,252,890
Real estate	568,472	568,143
Total investments	$ 2,992,047	$ 2,876,989

NOTE 5– Fair Value Measurements

FASB Accounting Standards Codification Topic 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurement) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB Accounting Standards Codification Topic 820 are described below:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Organization has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for assets measured at fair value.

- Common Stock: Valued at closing price reported on the active market on which the individual securities are traded.

- Mutual Funds: Values at the net asset value ("NAV") of shares held by the Organization at year end.

- Real Estate: Valued at fair value, based on county's assessment of taxable value, at the date of donation or at the date it is determined that it can be reasonably expected the Organization will suffer a loss on the disposition of the real estate.

NOTE 5 – Fair Value Measurement (continued)

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Organization believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, the Organization's assets measured at fair value on a recurring basis as of June 30, 2010 and 2009.

	Assets at Fair Value as of June 30, 2010			
	Level 1	Level 2	Level 3	Total
Common stock	$ -	$ -	$ -	$ -
Mutual funds				
Bond funds	1,848,298	-	-	1,848,298
Large cap growth	68,507	-	-	68,507
Large cap value	56,888	-	-	56,888
Large cap core	186,968	-	-	186,968
Small mid cap	142,537	-	-	142,537
International	108,813	-	-	108,813
Other funds	11,564	-	-	11,564
Total mutual funds	$2,423,575	$ -	$ -	$ 2,423,575

	Assets at Fair Value as of June 30, 2009			
	Level 1	Level 2	Level 3	Total
Common stock	$ 55,956	$ -	$ -	$ 55,956
Mutual funds				
Bond funds	1,653,359	-	-	1,653,359
Large cap growth	66,154	-	-	66,154
Large cap value	55,469	-	-	55,469
Large cap core	183,526	-	-	183,526
Small mid cap	131,396	-	-	131,396
International	106,598	-	-	106,598
Other funds	56,388	-	-	56,388
Total common stock and mutual funds	$2,308,846	$ -	$ -	$ 2,308,846

NOTE 5 – Fair Value Measurement (continued)

The following table sets forth by level, within the fair value hierarchy, the Organization's assets measured at fair value on a non-recurring basis as of June 30, 2010.

	Assets at Fair Value as of June 30, 2010			
	Level 1	Level 2	Level 3	Total
Donated real estate	$ -	$ -	$ 568,472	$ 568,472

Donated real estate with a carrying amount of $300,000 was written down to the fair value of $135,474, resulting in an unrealized loss of $164,526, which was included in unrestricted net assets for the year.

Donated real estate with a fair value of $164,855 was received during the year, resulting in contribution revenue of $164,855, which was included in unrestricted net assets for the year.

There were no assets measured at fair value on a non-recurring basis at June 30, 2009.

NOTE 6– Related Party Transactions

St. Vincent H.E.L.P. Inc. and St. Vincent H.E.L.P. Associates Limited Partnership

In 1996, the Organization entered into a cooperative agreement with a New York based non-profit Organization called H.E.L.P. Inc. (HELP) to create St. Vincent H.E.L.P., Inc. (St. Vincent), a nonprofit organization. The primary mission of St. Vincent is to provide temporary housing and support services to single individuals and to assist them during their transition from being homeless to being employed and independent in a stable living environment. Control of St. Vincent is split equally between the Organization and HELP.

St. Vincent is the .01% general partner in an affordable housing limited partnership, St. Vincent H.E.L.P. Associates Limited Partnership (the Partnership), established under the guidance of Internal Revenue Code Section 42, low to moderate-income family housing tax credit projects. The Partnership is responsible for the collection of rents and management of the low-income housing units. Catholic Charities of Southern Nevada donated a parcel of land to the project.

During the years ended June 30, 2010 and 2009, Catholic Charities of Southern Nevada received $212,387 and $149,056, respectively, in revenue from St. Vincent, which was a reimbursement of these same amounts for expenses incurred on behalf of St. Vincent. As of June 30, 2010, and 2009, Catholic Charities had a receivable of $166,040 and $68,091, respectively, due from the Partnership. The entire allowance for doubtful accounts referenced in NOTE 1 pertains to these related third party transactions.

United States Conference of Catholic Bishops

USCCB acts as the pass-through agency for certain federal grants awarded to the Organization.

NOTE 7 – Annuity Payable

The Organization was named remainderman in a charitable remainder annuity trust, which states that it will receive all of the assets of the trust at the time of the donor's death. Included in long-term investments is $268,143, which represents land and buildings. The annuity payable is the present value of the amount due to the contributors, which was calculated using a discount rate of 8 percent and a life expectancy of eight years.

The future minimum annuity payments for each of the years ending June 30 are as follows:

2011	$	11,427
2012		11,875
2013		9,835
2014		12,727
2015		13,226
Thereafter		180,033
	$	239,123

NOTE 8 – Notes Payable

The notes payable reported are summarized as follows:

	2010	2009
Mortgage payable to a financial institution, payable in monthly installments of $3,762, including interest at 7.5% per annum. Due in December 2032. Secured by property	$ 482,123	$ 490,744
Mortgage payable to a financial institution, payable in monthly installments of $749, including interest at 6.625% per annum. Due in December 2012. Secured by property.	21,299	28,616
Mortgage payable to a financial institution, payable in monthly installments of $2,306, including interest at 7.738% per annum. Due in August 2017. Secured by property.	150,949	166,152
	654,371	685,512
Less: current portion	(34,981)	(32,646)
	$ 619,390	$ 652,866

NOTE 8 – Notes Payable (continued)

Principal maturities of long-term debt are as follows:

Year ending June 30,	
2011	$ 34,981
2012	37,484
2013	36,376
2014	33,512
2015	35,346
Thereafter	476,672
	$ 654,371

NOTE 9 – Line of Credit

On June 28, 2009, the Organization obtained a $500,000 unsecured bank line of credit expiring September 30, 2010. There were no borrowings outstanding against the line of credit at June 30, 2010 or 2009.

NOTE 10 – Operating Leases

The Organization lease office space, retail space and equipment as follows:

- 15-year retail lease calling for monthly payments of $9,365 with CPI increase each year, expiring in March 2011.
- 3-year retail lease calling for monthly payments of $8,000, expiring in November 2011.
- 5-year vehicle lease calling for monthly payments of $911, expiring in January 2011.
- 4-year vehicle lease calling for monthly payments of $537, expiring in December 2011.
- 4-year vehicle lease calling for monthly payments of $525, expiring in April 2012.

Future minimum rental payments for each of the years ending June 30 are as follows:

2011	$ 203,754
2012	$ 48,990

Rent expense for the years ended June 30, 2010 and 2009 was $301,193 and $451,445, respectively.

NOTE 11 – In-Kind Donations

During the years ended June 30, 2010 and 2009, the Organization received in-kind donations of $280,494 and $112,206, respectively. The estimated fair value of in-kinds received is reported as contributions from the general public and expenses in the financial statements.

NOTE 12 – Restrictions/Limitations on Net Assets

The Organization has chosen to place the following limitations on the unrestricted net assets: $134,553 and $99,301 have been designated to fund any future Reynolds Endowment Fund corpus deficits as of June 30, 2010 and 2009, respectively.

Temporarily restricted net assets are available for the following purposes:

	2010	2009
Marian residence	$ 162	$ 162
Senior nutrition program	22,922	23,468
Social Services	63,321	31,792
Adoption Services	5,840	125
Immigration and refugee services	4,997	12,711
Residence services	104,767	67,944
Pacheco Charitable Trust	535,000	535,000
WIC	503	-
Reynolds Maintenance Fund	217,820	82,827
Total	$ 955,332	$ 754,029

Permanently restricted net assets consist of contributions receivable and cash and investments to be held indefinitely while interest earning may be used in accordance with donor stipulations. A description of these permanent restrictions follows:

The D.W. Reynolds Foundation donated $10,400,000 in 1999 for the construction of the Organization's central facility. As a stipulation of this donation, the Organization was required to raise $2,080,000 and set this aside in an endowment fund for capital maintenance of the facility. The earnings from this endowment may only be used for the maintenance of the facility.

During fiscal year 2006, the Organization received a donation in the amount of $399,249 to be held in perpetuity. The earnings from this donation are unrestricted and may be used towards any purpose that helps the Organization accomplish its mission.

During fiscal year 2010, The Organization received a promise to give of land with a fair value of $859,266. The property is to be used solely to provide food services to the citizens of the City of Las Vegas.

NOTE 13 – Donor-Designated Endowments

The Organization's endowment activities consist of two donor-restricted funds, "Reynolds Endowment" and other endowment, established for various purposes. As required by generally accepted accounting principles, net assets associated with endowment funds, including funds designated by the Board of Trustees to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions.

The Reynolds Endowment Agreement Stipulates the corpus is restricted in perpetuity for capital maintenance of the central facility. Additionally, earnings from the endowment may only be used for capital maintenance of the facility. As a result of these donor restrictions, the Organization classified as permanently restricted net assets, the Reynolds Endowment corpus. The remaining portion of the Reynolds Endowment Fund is classified as temporarily restricted net assets until those amounts are spent for capital maintenance of the facility.

The other endowment agreement stipulates the corpus is restricted in perpetuity for the tax exempt purposes of the Organization. The earnings of the corpus may be used in any of the tax-exempt purposes of the Organization. As a result, the Organization classifies as permanently restricted net assets of the endowment corpus. The remaining portion of the fund is classified as unrestricted net assets.

The Organization does not have a formal investment policy for the endowment; however, the Organization chooses investments whose estimated annual rate of return exceeds maintenance costs and maintains corpus with acceptable levels of risk.

From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level that the donor requires the Organization to retain as a fund of perpetual duration. These deficiencies resulted from unfavorable market fluctuations that occurred. There were no such deficiencies as of June 30, 2010 and 2009.

NOTE 13 – Donor-Designated Endowments (continued)

Endowment (donor-restricted) net asset composition as of June 30, 2010 and 2009 is as follows:

	2010	2009
Temporarily restricted	$ 217,820	$ 82,827
Permanently restricted	2,479,249	2,479,249
Total Investments	$ 2,697,069	$ 2,562,076

Changes in endowment net assets as of June 30, 2010 and 2009 are as follows:

	Unrestricted	Temporarily Restricted	Permanently Restricted	Total Net Endowment
Endowment, net assets - July 1, 2008	$ -	$ 268,238	$2,479,249	$ 2,747,487
Investment Income	-	123,875	-	123,875
Gain (loss)	-	(298,922)	-	(298,922)
Appropriated for expenses	-	(10,364)	-	(10,364)
Endowment, net assets - June 30, 2009	-	82,827	2,479,249	2,562,076
Investment income	-	84,749	-	84,749
Gain (loss)	-	135,684	-	135,684
Appropriated for expenses	-	(85,440)	-	(85,440)
Endowment, net assets - June 30, 2010	$ -	$ 217,820	$2,479,249	$2,697,069

NOTE 14 – Concentration of Credit Risk

Financial instruments that potentially subject the Organization to significant concentrations of credit risk consist principally of cash. The Organization deposits its cash in various financial institutions. At times, such amounts may be in excess of the $250,000 FDIC and $500,000 SIPC insurance limits. As of June 30, 2010 and 2009, the Organization's uninsured balances were $987,580 and $867,097, respectively.

NOTE 15 – Pension Plan

The Organization has a defined contribution pension plan, which covers all eligible employees. Employees are eligible to participate in the plan if they are age twenty-one or over and have worked for the Organization for one year. Generally, employees can elect to defer a percentage of their gross salary into the plan. The employer will make a contribution of 3 percent of all eligible participants' compensation and will then match eligible employees contributions at 50 percent (up to a maximum of three percent). Employer contributions for the plan year ended June 30, 2010 and 2009 were $160,207 and $167,979, respectively.

COMPLIANCE SECTION

KAFOURY, ARMSTRONG & CO.
A PROFESSIONAL CORPORATION
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS*

To the Board of Directors of
Catholic Charities of Southern Nevada

We have audited the financial statements of Catholic Charities of Southern Nevada (a nonprofit organization) as of and for the year ended June 30, 2010, and have issued our report thereon dated November 10, 2010. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

Internal Control Over Financial Reporting

In planning and performing our audit, we considered the Organization's internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control over financial reporting.

Our consideration of internal control over financial reporting was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in internal control over financial reporting that might be significant deficiencies or material weaknesses and therefore, there can be no assurance that all deficiencies, significant deficiencies, or material weaknesses have been identified. However, as described in the accompanying schedule of findings and questioned costs, we identified certain deficiencies in internal control over financial reporting that we consider to be material weaknesses.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the Organization's financial statements will not be prevented, or detected and corrected on a timely basis. We consider the deficiencies described in the accompanying schedule of findings and questioned costs as items 2010-1-FS and 2010-2-FS to be material weaknesses.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Organization's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards.*

The Organization's responses to the findings identified in our audit are described in the accompanying schedule of findings and questioned costs. We did not audit the Organization's responses and, accordingly, we express no opinion on them.

This report is intended solely for the information and use of management, the Board of Directors, and others within the Organization, and federal awarding agencies and pass-through entities and is not intended to be and should not be used by anyone other than these specified parties.

Kafoury, Armstrong & Co.

Las Vegas, Nevada
November 10, 2010

KAFOURY, ARMSTRONG & CO.
A PROFESSIONAL CORPORATION
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH REQUIREMENTS THAT COULD HAVE A DIRECT AND MATERIAL EFFECT ON EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH OMB CIRCULAR A-133

To the Board of Directors of
Catholic Charities of Southern Nevada

Compliance

We have audited Catholic Charities of Southern Nevada's (the Organization) compliance with the types of compliance requirements described in the *OMB Circular A-133 Compliance Supplement* that could have a direct and material effect on each of the Organization's major federal programs for the year ended June 30, 2010. The Organization's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs. Compliance with the requirements of laws, regulations, contracts, and grants applicable to each of its major federal programs is the responsibility of the Organization's management. Our responsibility is to express an opinion on the Organization's compliance based on our audit.

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and OMB Circular A-133. Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the Organization's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances. We believe that our audit provides a reasonable basis for our opinion. Our audit does not provide a legal determination of the Organization's compliance with those requirements.

In our opinion, the Organization complied, in all material respects, with the requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2010. However, the results of our auditing procedures disclosed instances of noncompliance with those requirements, which are required to be reported in accordance with OMB Circular A-133 and which are described in the accompanying schedule of findings and questioned costs as items 2010-1, 2010-2, and 2010-3.

Internal Control Over Compliance

Management of the Organization is responsible for establishing and maintaining effective internal control over compliance with requirements of laws, regulations, contracts and grants applicable to federal programs. In planning and performing our audit, we considered the Organization's internal control over compliance with the requirements that could have a direct and material effect on a major federal program to determine the auditing procedures for the purpose of expressing our opinion on compliance and to test and report on internal control over compliance in accordance with OMB Circular A-133, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the Organization's internal control over compliance.

Our consideration of internal control over compliance was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in internal control over compliance that might be significant deficiencies or material weaknesses and therefore, there can be no assurance that all deficiencies, significant deficiencies, or material weaknesses have been identified. However, as discussed below, we identified certain deficiencies in internal control over compliance that we consider to be material weaknesses and another deficiency that we consider to be a significant deficiency.

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. We consider the deficiencies in internal control over compliance described in the accompanying schedule of findings and questioned costs as items 2010-1 and 2010-2 to be material weaknesses.

A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal ontrol over compliance, yet important enough to merit attention by those charged with governance. We consider the deficiency in internal control over compliance described in the accompanying schedule of findings and questioned costs as item 2010-3 to be a significant deficiency.

The Organization's responses to the findings identified in our audit are described in the accompanying schedule of findings and questioned costs. We did not audit the Organization's responses and, accordingly, we express no opinion on them.

This report is intended solely for the information and use of management, the Board of Directors, and others within the Organization, and federal awarding agencies and pass-through entities, and is not intended to be and should not be used by anyone other than these specified parties.

Kafoury, Armstrong & Co.

Las Vegas, Nevada
November 10, 2010

SUPPLEMENTARY INFORMATION

CATHOLIC CHARITIES OF SOUTHERN NEVADA
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2010

Federal Grantor/ Pass-through Grantor/ Program Title	Federal CFDA Number	Agency or Pass-through Number	Federal Expenditures
U.S. DEPARTMENT OF AGRICULTURE			
Pass-Through the State of Nevada			
Department of Health and Human Services			
Special Supplemental Nutrition Program for Women, Infants, and Children	10.557	7NV700NV7	$ 770,591
Pass-Through the State of Nevada			
Department of Administration			
Emergency Food Assistance Cluster:			
Emergency Food Assistance Program (Food Commodities)	10.569	None	112,107
ARRA-Emergency Food Assistance Program (Food Commodities)	10.569	None	26,172
			138,279
Pass-Through the State of Nevada			
Department of Administration			
Senior Farmers Market Nutrition	10.576	None	7,500
Total U.S. Department of Agriculture			916,370
U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT			
Pass-Through City of Las Vegas			
CDBG Entitlement Grants Cluster:			
Homeless Coalition			
St. Vincent HELP Apartments	14.218	None	15,000
Public Restrooms-CDBG	14.218	None	37,512
Homeless to Home CDBG	14.218	None	17,573
Residential Service Division - Job Office - CDBG	14.218	None	18,745
Pass-Through City of Henderson			
Marian Residence Transitional Living for Seniors	14.218	None	1,000
Henderson CDBG	14.218	None	4,240
			94,069
Pass-Through City of Las Vegas			
Emergency Shelter Program			
Lied Dining Room	14.231	None	91,690
Pass-Through City of Las Vegas			
HOME Investment Partnerships Program			
Homeless to Home Project HOME-TBRA	14.239	None	60,762
Total U.S. Department of Housing and Urban Development			246,522
U.S. DEPARTMENT OF LABOR			
Pass-Through the State of Nevada			
Department of Human Resources			
Division for Aging Services			
Senior Community Service Employment Program	17.235	03-001-70-VW	$ 619,916
ARRA - Senior Community Service Employment Program	17.235	03-001-70-VAX	96,248
			716,163

CATHOLIC CHARITIES OF SOUTHERN NEVADA
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2010

Federal Grantor/ Pass-through Grantor/ Program Title	Federal CFDA Number	Agency or Pass-through Number	Federal Expenditures
Pass-Through Southern Nevada Workforce Investment Board			
WIA Cluster:			
ARRA-Workforce Investment Act Adult Program	17.258	09-ADW-ARR-CCS	306,010
ARRA-Workforce Investment Act Youth Activities	17.259	08-ARRA-CIS-00	2,184
ARRA-Workforce Investment Act Dislcoated Workers	17.260	09-ADW-ARR-CCS	215,196
Total Workforce Investment Act Cluster			523,390
Total U.S. Department of Labor			1,239,553
DEPARTMENT OF STATE, BUREAU OF POPULATION, REFUGEES, AND MIGRATION			
Pass-Through United States Conference of Catholic Bishops			
Refugee Admission Program	19.510	None	246,638
U.S. DEPARTMENT OF EDUCATION			
Pass-Through the State of Nevada Department of Education			
Adult Education	84.002	None	319,828
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES			
Pass-Through the State of Nevada			
Department of Human Resources			
Division for Aging Services			
Aging Cluster			
Special Programs for the Aging			
Title III, Part B - Senior Companion Program	93.044	03-001-16-BX	79,904
Title III, Part B - Marian Transitional Housing for Senior Women	93.044	03-001-17-BX	48,419
Title III, Part B - Respite Care and Supportive Services	93.044	03-001-56-BX	217,453
Title III, Part B - Senior Advocate	93.044	03-001-06-BX	185,891
Title III, Part B - Medical Nutrition Therapy	93.044	03-001-41-BX	56,250
			587,917
Title III, Part C - Senior Nutrition Program	93.045	03-001-04-2X	883,685
Title III, Part C - Senior Nutrition Program Indian Springs	93.045	03-065-04-2X	16,561
Title III, Part C - Senior Nutrition Equipment	93.045	03-001-66-1X	34,343
			934,589
Nutrition Services Incentive Program			
Senior Nutrition Incentive Program	93.053	03-001-57-NX	140,760
ARRA - Aging Home-Delivered Nutrition Services	93.705	03-001-04-2AX	104,230
ARRA - Aging Home-Delivered Nutrition Services Indian Springs	93.705	03-065-04-2AX	1,368
			105,598
ARRA - Aging Congregate Nutrition Services	93.707	03-001-55-1AX	16,000
Total Aging Cluster			1,784,864

CATHOLIC CHARITIES OF SOUTHERN NEVADA
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2010

Federal Grantor/ Pass-through Grantor/ Program Title	Federal CFDA Number	Agency or Pass-through Number	Federal Expenditures
Pass-Through Office of Refugee Resettlement			
Refugee and Entrant Assistance - State Administered Programs	93.566	G-09WFNV9120	$ 757,772
Refugee and Entrant Assistance - Discretionary	93.576	09RQ0031/01	23,517
Refugee and Entrant Assistance - Wilson Fish Programs	93.583	90RW0028/05	3,371,092
Refugee and Entrant Assistance - Target Assistance Grants	93.584	09A1NVRRTA	440,206
			4,592,586
Pass-Through the State of Nevada:			
Department of Health and Human Services			
Mental Health Block Grant	93.958	None	88,878
Total U.S. Department of Health and Human Services			6,466,327
UNITED STATES CORPORATION FOR NATIONAL AND COMMUNITY SERVICE			
Retired Senior Volunteer Program	94.002	03SRPNV003	94,353
Foster Grandparent/Senior Companion Cluster			
Foster Grandparent Program	94.011	None	353,535
Senior Companion Program	94.016	03SCPNV002	316,222
			669,757
Total United States Corporation for National and Community Service			764,110
DEPARTMENT OF HOMELAND SECURITY			
Pass-Through United States Conference of Catholic Bishops:			
Cuban / Haitian Entrant Program	97.009	None	101,229
Pass-Through United Way of Southern Nevada:			
Emergency Food and Shelter Program Cluster			
Emergency Food and Shelter National Board Program	97.024	26-5868	521,245
ARRA - Emergency Food and Shelter National Board Program	97.114	AR-5868	99,436
			620,681
Total Department of Homeland Security			721,910
Total Federal Expenditures			$ 10,921,258

CATHOLIC CHARITIES OF SOUTHERN NEVADA
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2010

NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

NOTE 1 - BASIS OF PRESENTATION

The schedule of expenditures of federal awards includes the federal grant activity of Catholic Charities of Southern Nevada and is presented on the accrual basis of accounting. The information in this schedule is presented in accordance with the requirements of OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations. Therefore, some amounts presented in this schedule may differ from amounts presented on, or used in preparation of, the basic financial statements.

NOTE 2 - FOOD DISTRIBUTION

Non-monetary assistance is received for the Commodities Supplemental Food Program and is reported in the schedule at fair market value of the commodities received and disbursed, as provided by the grantor agency.

NOTE 3 - SUBRECIPIENTS

The Organization provided federal awards to subrecipients as follows:

Refugee and Entrant Assistance - State Administered Programs - CFDA 93.566	$ 82,731
Refugee and Entrant Assistance - Targeted Assistance Grants - CFDA 93.584	37,169
Total	$ 119,900

CATHOLIC CHARITIES OF SOUTHERN NEVADA
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
JUNE 30, 2010

SECTION I - SUMMARY OF AUDITOR'S RESULTS

Financial Statements

Type of auditor's report issued	Unqualified
Internal control over financial reporting:	
• Material weaknesses identified?	Yes
• Significant deficiencies identified that are not considered to be material weaknesses?	No
Noncompliance material to financial statements noted?	No

Federal Awards

Internal control over major programs:	
• Material weaknesses identified?	Yes
• Significant deficiencies identified that are not considered to be material weaknesses?	Yes
Type of auditor's report issued on compliance for major programs:	Unqualified
Any audit findings disclosed that are required to be reported in accordance with section 510(a) of OMB Circular A-133?	Yes

Identification of major programs:

Name of Federal Program or Cluster	CFDA Number(s)
Special Supplemental Nutrition Program for Women, Infants, and Children	10.557
Emergency Food Assistance Cluster	10.569
Senior Community Service Employment Program	17.235
WIA Cluster	17.258, 17.259, 17.260
Aging Cluster	93.044, 93.045, 93.053, 93.705, 93.707
Refugee and Entrant Assistance – State Administered Programs	93.566
Refugee and Entrant Assistance – Targeted Assistance Grants	93.584
Foster Grandparent/Senior Companion Cluster	94.011, 94.016

Dollar threshold used to distinguish between type A and type B programs:	$327,637
Auditee qualified as low-risk auditee?	Yes

SECTION II – FINANCIAL STATEMENT FINDINGS

FINDING 2010-1-FS CONTROLS OVER THE FINANCIAL REPORTING PROCESS

Criteria: The Organization should have controls over the financial reporting process that enable it to produce timely, reliable financial statements in accordance with generally accepted accounting principles. A key control in achieving reliable financial reporting is review of the financial statement balances, which includes review of detail subsidiary ledgers, account detail, reconciliations, and other supporting schedules at the supervisory level. In addition, management must also review the financial statement balances for any significant or unusual changes.

Condition: During our audit, we identified numerous errors that should have been detected during management's review of the financial statement balances. The following material adjustments were needed to correct these errors:

1. Increased bad debt expense and allowance for doubtful accounts by $117,334.
2. Increased beginning of year unrestricted net assets and decreased grant revenue by $90,836.
3. Decreased accounts payable and expenses by $16,992.
4. Increased inventory and decreased expenses by $28,191.
5. Recorded releases of temporarily restricted net assets in the amount of $116,098.
6. Reclassified $134,553 of investments from temporarily restricted to designated. Additionally, reclassified $35,976 of related investment income from temporarily restricted revenue to unrestricted revenue.
7. Increased contributions receivable and permanently restricted contributions by $859,266.

In addition, management chose to record five other adjustments identified during the audit and chose to pass on recording another ten suggested audit entries which would have impacted the financial statements.

Additionally, we noted that certain required disclosures relating to fair value measurements were missing.

Cause: The cause of the above appears to be the result of two factors. First, the Controller has not been provided with the adequate accounting research tools or continuing education to stay apprised of current accounting standards. Second, given the degree of responsibility assigned to the Controller, she does not have adequate time to prepare and review the year-end statements.

Effect: Lack of controls over the financial reporting process increases the likelihood that management and other financial statement users will rely on faulty information to make important decisions about the entity.

Recommendation: The Organization should provide the necessary accounting research tools and continuing education to the Controller. Additionally given the time constraints of the Controller, the Organization should either reduce the workload of the Controller or obtain internal or external expertise to assist with the review of the year-end trial balance and financial statement preparation.

Management's Response: The Organization has recently restructured and as a result the Accounting Department has also restructured. The net effect of the two restructurings should be to reallocate some of the responsibilities which are currently solely assigned to the controller, thus allowing the controller adequate time to prepare and review year-end statements. Steps will also be taken to provide the controller and assistant controller with additional training and access to the FASB codification.

FINDING 2010-2-FS CONTROLS OVER PROMISES TO GIVE

Criteria: Generally accepted accounting principles establish certain requirements for the recognition of unconditional promises to give. The Organization receives unconditional promises to give, which fall under the guidance of FASB Accounting Standards Codification Topic 958-605. This topic requires an entity to recognize unconditional promises to give as revenue when the promise is received if there is sufficient evidence in the form of verifiable documentation that a promise was made and received.

Condition: During our audit of the financial statements, we identified several unconditional promises to give that were not recorded. This resulted in audit adjustments as outlined in Finding 2010-1-FS.

Cause: The Organization had the required documentation and was aware of these promises. Such documentation is maintained by the administration department. It appears that the accounting department was either not aware of these items or did not understand the accounting treatment of unconditional promises to give.

Effect: Lack of controls over the financial reporting process increases the likelihood that management and other financial statement users will rely on faulty information to make important decisions about the entity.

Recommendation: The Organization should ensure that the administration department notifies the accounting department of any promises to give as they become aware of the promises, and the accounting department should establish procedures for evaluating each promise to give for proper accounting treatment.

Management's Response: A Development Department has been created as part of the Organization's restructure. The Accounting Department will work closely with the Development Department to implement procedures that will ensure all promises to give are recorded accurately and promptly.

SECTION III – FEDERAL AWARDS FINDINGS AND QUESTIONED COSTS

U.S. DEPARTMENT OF LABOR

Questioned Costs

2010-1 Senior Community Service Employment Program – CFDA 17.235 and ARRA – Senior Community Service Employment Program – CFDA 17.235; all grant numbers and grant periods reported for this CFDA on the schedule of expenditures of federal awards.

Criteria and condition: The OMB Circular A-133 Compliance Supplement provides eligibility guidelines for the program which indicate persons 55 years or older whose family is low-income (i.e., income does not exceed the low-income standards defined in 20 CFR section 641.507) are eligible for enrollment (20 CFR section 641.500). Low-income means an income of the family which, during the preceding 6 months on an annualized basis or the actual income during the preceding 12 months, at the option of the grantee, is not more than 125 percent of the poverty levels established and periodically updated by the U.S. Department of Health and Human Services (42 USC 3056p(a)(4)). The program has not complied with this requirement.

Additionally, the Organization should have effective controls in place to provide reasonable assurance that only eligible individuals and organizations receive assistance under Federal award programs.

Context: A random sample of 60 active participant files for the year was selected. Our tests disclosed that the Organization's internal control procedures were not followed in determining eligibility for 15 of the 60 participants. Additionally, our testing disclosed that 1 of the 60 participants was ineligible for the program due to income restrictions.

Effect: We question whether some of the participants receiving benefits under the Senior Community Service Employment Program are eligible to receive enrollee wages. Total enrollee wages and related expenses paid on behalf of program participants were $581,683 during the year under audit.

Cause: Effective controls were not in place to ensure that eligibility was determined and redetermined annually for each potential and active participant.

Recommendation: The Organization should consider modifying its policies and procedures regarding participant eligibility determinations to ensure

appropriate review procedures are being performed for both initial applications and annual recertifications.

Views of responsible officials and planned corrective actions:

1. All Staff will be retrained with regard to determining income eligibility for the SCSEP participants.
2. Once the participant information and required documentation is gathered by the program eligibility specialist, staff will prepare a participant file.
3. The file will be reviewed by the Program Supervisor to make sure it contains all the required documentation as well as to make certain the participants meet all the eligibility criteria. The Program Supervisor will sign off on the income forms used to verify eligibility signifying that the correct determination was made.
4. The Program Supervisor will submit the file to the Employment Services Center Director.
5. The Employment Services Center Director will review the file and its documents to determine if the documentation meets the requirements set forth in the TEGL 12-06 as well as the OMB Circular A-133 Compliance Supplements 20 CFR section 641.507; 20 CFR section 641.500.
6. The Employment Services Center Director will sign the form used to determine eligibility.
7. In addition random audits of participant files will be conducted by the Employment Services Center Director and Program Supervisor to make sure all required documentation is current.
8. The annual recertification process for each participant will follow the same procedure stated above to ensure the eligibility determination is accurate.

U.S. CORPORATION FOR NATIONAL AND COMMUNITY SERVICE

Questioned Costs

2010-2 Foster Grandparent Program – CFDA 94.011 and Senior Companion Program – CFDA 94.016; all grant numbers and grant periods reported for this CFDA on the schedule of expenditures of federal awards.

Criteria and condition: The OMB Circular A-133 Compliance Supplement provides eligibility guidelines for the program which indicate "to be eligible to be paid a stipend, Foster Grandparents and Senior Companions must be at least 55 years old (or 60 years old prior to October 1, 2009); meet income guidelines; and be physically, mentally, and emotionally capable of serving on a person-to-person basis. Income eligibility is based on the applicant's total annual income (including the total annual income of the applicant's spouse), less allowable medical expenses. Effective October 1, 2009, to be income-eligible, an applicant's income must fall at or below 200 percent of the poverty level as annually established by the Department of Health and Human Services for the State in which he or she resides." The program has not complied with this requirement.

Additionally, the Organization should have effective controls in place to provide reasonable assurance that only eligible individuals and organizations receive assistance under Federal award programs.

Context: A random sample of 14 volunteer stipend transactions was selected for testing of allowable costs. Additionally, a random sample of 60 participant files from a total of 270 active Foster Grandparent Program and Senior Companion Program participant files for the year was selected. Our tests disclosed that 2 of the 14 volunteer stipend payments were incorrectly calculated and paid. Additionally, 4 of the 60 participants (7%) were ineligible to receive a stipend due to income guidelines. We also noted incomplete eligibility determinations for another 4 of the 60 participants.

Effect: We question whether some of the participants receiving benefits under the Foster Grandparent Program and Senior Companion Program are eligible to receive volunteer stipends. Additionally, we question whether some of the volunteer stipends paid were calculated correctly. Total volunteer stipends paid were $354,611 during the year under audit. Of that amount, $2,443 is known to be paid to 4 volunteers ineligible to receive a stipend. $ 2,443

Cause: Effective controls were not in place to ensure that eligibility was accurately determined and redetermined for each potential and active participant. Additionally, effective controls were not in place to ensure eligible participants were being paid the appropriate stipend.

Recommendation: The Organization should put effective policies and procedures in place regarding review and approval of volunteer stipend pay as well as participant eligibility determinations to ensure appropriate review procedures are being performed for both initial applications and annual recertifications.

Views of responsible officials and planned corrective actions: Prior to the review of files by the auditors, it was discovered that volunteers who were not income eligible to receive stipends were paid stipends. Corrective action, which is outlined in the following paragraph, was taken immediately after the discovery of this error. No further stipends were paid to these volunteers after the discovery of this error. Please note that non-stipend volunteers are still eligible for mileage reimbursement. The mileage reimbursement is paid from supplemental, non-federal grants.

When a prospective volunteer submits an application, income eligibility worksheets are reviewed by the program supervisor. The program supervisor signs and dates all worksheets. Prior to the volunteer beginning orientation, the director of the program reviews all applications and ensures that eligibility requirements are met.

Additionally, all current files have been reviewed and all required

documentation is up-to-date. All volunteers receive reminder notices two months prior to the expiration of any documents, and program staff follow up to ensure that files are compliant.

U.S. DEPARTMENT OF AGRICULTURE

Questioned Costs

2010-3 Emergency Food Assistance Program (Food Commodities) – CFDA 10.569 and ARRA-Emergency Food Assistance Program (Food Commodities) – CFDA 10.569; all grant numbers and grant periods reported for this CFDA on the schedule of expenditures of federal awards.

Criteria and condition: The OMB Circular A-133 Compliance Supplement includes the provision that accurate and complete records shall be maintained with respect to the receipt, distribution/use, and inventory of donated foods, including end products processed from donated foods.

Distributing and recipient agencies shall take a physical inventory of all storage facilities. Such inventory shall be reconciled annually with the storage facility's inventory records and maintained on file by the agency which contracted with or maintained the storage facility. The program has not complied with these requirements.

Context: Our tests disclosed that the Organization did not keep accurate and complete records with respect to the receipt, distribution/use, and inventory of the donated food items received by the Lied Dining Facility, as required by OMB Circular A-133.

Effect: Commodities received are improperly reported for the Lied Dining Hall to the grantor.

Cause: It appears there was a lack of controls and oversight regarding the required records to be maintained for the Lied Dining Hall.

Recommendation: The Organization should implement policies and procedures to begin keeping perpetual inventory records in order to track the receipt, distribution/use, and inventory of the donated foods for the Lied Dining Hall as well as implementing review procedures over the entire process.

Views of responsible officials and planned corrective actions: As of October 1st 2010 the Organization began maintaining a perpetual inventory for all USDA commodities.

The USDA Commodities are received at the loading dock of the Lied Dining room by either the Receiving Manager or the Operations Manager and checked for damage or missing items. Once this is complete the invoices are then signed. The product is immediately placed in the store rooms on the USDA shelves. The Invoices are turned in to the Food Services Purchasing

Manager so that he can record them on the inventory spread sheets.
When the items are issued out of the store room a separate requisition is created and filled out by the Executive Chef and is given to the Receiving Manager. The receiving manger then takes the items requested out of the store room and delivers the items to the Executive Chef. The Requisition sheets are then given to the Purchasing Manager and he records the requisition sheets on the Inventory spread sheets.
Forms are available for review by request.

CATHOLIC CHARITIES OF SOUTHERN NEVADA
SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS
JUNE 30, 2010

There were no prior year findings or questioned costs related to the major programs selected for testing.

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning JUL 1, 2009 and ending JUN 30, 2010

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
CATHOLIC CHARITIES OF SOUTHERN NEVADA

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1501 LAS VEGAS BLVD NORTH

City or town, state or country, and ZIP + 4
LAS VEGAS, NV 89101

F Name and address of principal officer: MONSIGNOR PATRICK LEARY
1501 LAS VEGAS BLVD NORTH, LAS VEGAS, NV 89

D Employer identification number
88-0059425

E Telephone number
702-385-2662

G Gross receipts $ 19,906,199.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.CATHOLICCHARITIES.COM

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1945 M State of legal domicile: NV

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO PROVIDE SERVICES FOR POOR, HOMELESS AND DISADVANTAGED PEOPLE	
	2	Check this box ▶ ☐ 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)	17
	4	Number of independent voting members of the governing body (Part VI, line 1b)	17
	5	Total number of employees (Part V, line 2a)	495
	6	Total number of volunteers (estimate if necessary)	5593
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	18,337,376.	17,900,850.
	9	Program service revenue (Part VIII, line 2g)	1,447,063.	1,270,605.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	160,713.	90,165.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	135,145.	2,408.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	20,080,297.	19,264,028.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,428,934.	5,462,216.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	8,176,637.	8,771,092.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 194,562.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	5,329,147.	5,509,444.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18,934,718.	19,742,752.
	19	Revenue less expenses. Subtract line 18 from line 12	1,145,579.	-478,724.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	23,397,963.	22,812,807.
	21	Total liabilities (Part X, line 26)	2,179,230.	2,061,878.
	22	Net assets or fund balances. Subtract line 21 from line 20	21,218,733.	20,750,929.

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date 12/30/10

▶ MONSIGNOR PATRICK LEARY, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ▶ ☐	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4: KAFOURY, ARMSTRONG & CO. 8329 WEST SUNSET ROAD, SUITE 210 LAS VEGAS, NV 89113-2202			EIN ▶ Phone no. ▶ (702)384-7717

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
RECOGNIZING THAT EVERY PERSON IS CREATED IN THE IMAGE OF GOD, CATHOLIC CHARITIES OF SOUTHERN NEVADA ORIGINALLY WAS FORMED TO CARRY ON CHARITABLE WORK IN THE FIELDS OF RELIGION, EDUCATION, AND SOCIAL WELFARE AND CONTINUES TO CARRY OUT THE VISION AND MISSION OF THE ROMAN

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 $ 5,274,016. including grants of $ 3,488,881.) (Revenue $ 103,892.)
IMMIGRATION AND REFUGEE SERVICES-ASSIST IMMIGRANTS AND REFUGEES IN OBTAINING FOOD, CLOTHING, SHELTER, AND EMPLOYMENT AS WELL AS AID LEGALIZATION PROCESS

4b (Code:) (Expenses $ 4,886,205. including grants of $ 23,267.) (Revenue $ 770,962.)
RESIDENTIAL SERVICES-PROVIDE BASIC NECESSITIES ON A TEMPORARY BASIS TO THE HOMELESS AND LOW INCOME COMMUNITY

4c (Code:) (Expenses $ 4,289,097. including grants of $ 816,300.) (Revenue $ 52,989.)
SENIOR PROGRAMS-ADDRESS THE NEEDS OF LOW-INCOME SENIORS WITH REGARD TO EMPLOYMENT, NUTRITION, VOLUNTEER OPPORTUNITIES, COMPANIONS, AND RESPITE SERVICES

4d Other program services. (Describe in Schedule O.)
(Expenses $ 3,253,165. including grants of $ 1,013,868.) (Revenue $ 443,958.)

4e Total program service expenses ▶ $ 17,702,483.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		X
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	Is the organization's answer to any of the following questions "Yes"? *If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI.*			
	• 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.*			
	• 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.*			
	• 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.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*			
	• 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? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII.*	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* (Yes / No: 12A — / X)			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Part II*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Part III*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) 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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a	15		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	495		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return. (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	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			

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body	1a	17		
b	Enter the number of voting members that are independent	1b	17		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5			X
6	Does the organization have members or stockholders?	6			X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a			X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	X	

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☒ Another's website ☐ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶

MONSIGNOR PATRICK LEARY - 702-385-2662

1501 LAS VEGAS BLVD NORTH, LAS VEGAS, NV 89101

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

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. Use Schedule J-2 if additional space is needed.

- 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. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

☒ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MOST REV JOSEPH PEPE CHAIRMAN		X						0.	0.	0.
LARRY BROWN SECRETARY		X						0.	0.	0.
TOM MCCORMICK TREASURER		X						0.	0.	0.
MSGR KEVIN MCAULIFE DIRECTOR		X						0.	0.	0.
DENISE MAULER PRESIDENT		X						0.	0.	0.
VICTORIA FOUCE-OTTER DIRECTOR		X						0.	0.	0.
KEVIN J HIGGINS DIRECTOR		X						0.	0.	0.
T.J. MATTHEWS DIRECTOR		X						0.	0.	0.
TERESSA CONLEY DIRECTOR		X						0.	0.	0.
JILL BLANCHETTE DIRECTOR		X						0.	0.	0.
JEANNE KILDUFF DIRECTOR		X						0.	0.	0.
JENNIFER LOGAN DIRECTOR		X						0.	0.	0.
PATRICIA MORRISSEY DIRECTOR		X						0.	0.	0.
JOHN B PAGE DIRECTOR		X						0.	0.	0.
FRANK GARGANO DIRECTOR		X						0.	0.	0.
SHAUNDELL NEWSOME DIRECTOR		X						0.	0.	0.
JOHN SELI DIRECTOR		X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MONSIGNOR PATRICK LEARY EXECUTIVE DIRECTOR	40.00			X				0.	0.	0.
1b Total ▶								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 0

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. NONE

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a 583,767.				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d 152,482.				
	e Government grants (contributions)	1e 15,281,554.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1883047.				
	g Noncash contributions included in lines 1a-1f: $ 312,794.					
	h Total. Add lines 1a-1f		17,900,850.			
Program Service Revenue		Business Code				
	2a PROGRAM SERVICE FEES	900099	1018402.	1018402.		
	b RENTAL INCOME	531120	252,203.	252,203.		
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		1270605.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		90,675.			90,675.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory					
	b Less: cost or other basis and sales expenses		510.			
	c Gain or (loss)		-510.			
	d Net gain or (loss)			-510.		-510.
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 a					
	b Less: direct expenses b					
	c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities. See Part IV, line 19 a					
	b Less: direct expenses b					
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances a	542873.				
	b Less: cost of goods sold b	641661.				
	c Net income or (loss) from sales of inventory		-98,788.			-98,788.
	Miscellaneous Revenue	Business Code				
	11a MISCELLANEOUS INCOME	900099	76,903.	76,903.		
	b MEDICAID REIMBURSEMENT	900099	24,293.	24,293.		
	c					
	d All other revenue					
	e Total. Add lines 11a-11d		101,196.			
	12 Total revenue. See instructions.		19,264,028.	1371801.	0.	-8,623.

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	119,900.	119,900.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	5,342,316.	5,342,316.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	7,156,145.	6,155,968.	893,604.	106,573.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	721,440.	640,754.	68,700.	11,986.
10 Payroll taxes	893,507.	648,166.	235,459.	9,882.
11 Fees for services (non-employees):				
a Management	106,280.		106,280.	
b Legal	1,922.		1,922.	
c Accounting	109,758.	6,194.	103,564.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	294,110.	270,720.	16,648.	6,742.
12 Advertising and promotion				
13 Office expenses	2,089,576.	2,040,840.	46,499.	2,237.
14 Information technology				
15 Royalties				
16 Occupancy	1,125,640.	1,003,532.	121,223.	885.
17 Travel	33,867.	31,731.	1,686.	450.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	55,658.	46,686.	8,412.	560.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	825,961.	773,317.	52,644.	
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a MISCELLANEOUS	397,168.	287,051.	86,133.	23,984.
b BAD DEBTS	117,334.	117,334.		
c TRAINING	100,265.	100,265.		
d OTHER CLIENT ASSISTANCE	96,143.		96,143.	
e REPAIRS & MAINTENANCE	92,883.	89,937.	2,920.	26.
f All other expenses	62,879.	27,772.	3,870.	31,237.
25 Total functional expenses. Add lines 1 through 24f	19,742,752.	17,702,483.	1,845,707.	194,562.
26 Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	575,654.	1	179,779.
	2	Savings and temporary cash investments	1,962,097.	2	1,387,155.
	3	Pledges and grants receivable, net		3	859,266.
	4	Accounts receivable, net	1,369,507.	4	1,316,129.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	44,754.	8	44,762.
	9	Prepaid expenses and deferred charges	18,590.	9	88,578.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 24,569,257.			
	b	Less: accumulated depreciation — 10b: 8,672,872.	16,482,281.	10c	15,896,385.
	11	Investments - publicly traded securities	2,308,846.	11	2,423,575.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	636,234.	15	617,178.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	23,397,963.	16	22,812,807.
Liabilities	17	Accounts payable and accrued expenses	211,830.	17	218,289.
	18	Grants payable		18	
	19	Deferred revenue	452,203.	19	187,086.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	936,485.	23	893,494.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	578,712.	25	763,009.
	26	Total liabilities. Add lines 17 through 25	2,179,230.	26	2,061,878.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	17,985,455.	27	16,457,082.
	28	Temporarily restricted net assets	754,029.	28	955,332.
	29	Permanently restricted net assets	2,479,249.	29	3,338,515.
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	21,218,733.	33	20,750,929.
	34	Total liabilities and net assets/fund balances	23,397,963.	34	22,812,807.

Part XI Financial Statements and Reporting

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization	Employer identification number
CATHOLIC CHARITIES OF SOUTHERN NEVADA	88-0059425

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii)	A family member of a person described in (i) above?	11g(ii)	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col. (i) of your support? Yes	(v) No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	(vi) No	(vii) Amount of support
Total									

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	12,132,786.	14,855,091.	14,775,434.	18,421,558.	17,900,850.	78,085,719.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	12,132,786.	14,855,091.	14,775,434.	18,421,558.	17,900,850.	78,085,719.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						78,085,719.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	12,132,786.	14,855,091.	14,775,434.	18,421,558.	17,900,850.	78,085,719.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	84,153.	162,244.	458,709.	409,211.	342,878.	1,457,195.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	78,597.	144,494.	146,257.	112,910.	100,686.	582,944.
11 **Total support.** Add lines 7 through 10						80,125,858.
12 Gross receipts from related activities, etc. (see instructions)					12	14,117,325.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	97.45 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	97.65 %

16a **33 1/3% support test - 2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2008.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2009.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	**Schedule of Contributors** ▶ Attach to Form 990, 990-EZ, or 990-PF.	OMB No. 1545-0047 **2009**

Name of the organization	Employer identification number
CATHOLIC CHARITIES OF SOUTHERN NEVADA	88-0059425

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☒ 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

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) $5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year. ..... ▶ $ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization: CATHOLIC CHARITIES OF SOUTHERN NEVADA

Employer identification number: 88-0059425

Part I **Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	OFFICE OF REFUGEE RESETTLEMENT AEROSPACE BUILDING 901 D STREET, SW WASHINGTON, DC 20447	$ 4,597,628.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
2	STATE OF NEVADA 100 NORTH STEWART STREET CARSON CITY, NV 89701	$ 4,209,155.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
3	UNITED STATES COPORATION FOR NATIONAL AND COMMUNITY SERVICE 1201 NEW YORK AVENUE, NW WASHINGTON, DC 20525	$ 763,910.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
4	UNITED WAY 8391 OLD COURTHOUSE ROAD SUITE 200 VIENNA, VA 22182	$ 583,767.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
5	SOUTHERN NV WORKFORCE INVESTMENT BOARD 7251 WEST LAKE MEAD, SUITE 200 LAS VEGAS, NV 89128	$ 523,072.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution.)

Name of organization: CATHOLIC CHARITIES OF SOUTHERN NEVADA

Employer identification number: 88-0059425

Part II **Noncash Property** (see instructions)

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

Name of organization: CATHOLIC CHARITIES OF SOUTHERN NEVADA

Employer identification number: 88-0059425

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. 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

Schedule D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization: CATHOLIC CHARITIES OF SOUTHERN NEVADA

Employer identification number: 88-0059425

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

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

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

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

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

☐ Preservation of land for public use (e.g., recreation or pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

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

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

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2562076.	2747487.			
b Contributions					
c Net investment earnings, gains, and losses	220,433.	-175,047.			
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	85,440.	10,364.			
g End of year balance	2697069.	2562076.			

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Term endowment ▶ _____ %

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

		Yes	No
(i) unrelated organizations	3a(i)		X
(ii) related organizations	3a(ii)		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		738,694.		738,694.
b Buildings		19,487,965.	5,374,369.	14,113,596.
c Leasehold improvements		949,724.	413,218.	536,506.
d Equipment		2,663,973.	2,441,421.	222,552.
e Other		728,901.	443,864.	285,037.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				15,896,385.

Part VII Investments - Other Securities. 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
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
Federal income taxes	
ACCRUED EXPENSES	763,009.
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	763,009.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	19,264,028.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	19,742,752.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-478,724.
4	Net unrealized gains (losses) on investments	4	10,920.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	10,920.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-467,804.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	20,064,735.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	10,920.		
b	Donated services and use of facilities	2b	148,126.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d	641,661.		
e	Add lines 2a through 2d			2e	800,707.
3	Subtract line 2e from line 1			3	19,264,028.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	19,264,028.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	20,532,539.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	148,126.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d	641,661.		
e	Add lines 2a through 2d			2e	789,787.
3	Subtract line 2e from line 1			3	19,742,752.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	19,742,752.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

DIRECT EXPENSES FOR INVENTORY SALES: 641661.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

DIRECT EXPENSES FOR INVENTORY SALES: 641661.

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.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

CATHOLIC CHARITIES OF SOUTHERN NEVADA

Employer identification number

88-0059425

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ... ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ETHIOPIAN COMMUNITY DEVELOPMENT COUNCIL - 901 SOUTH HIGHLAND STREET - ARLINGTON, VA 22204	52-1308986	503(C)(3)	119,900.	0.			ASSIST IMMIGRANTS AND REFUGEES IN OBTAINING FOOD, CLOTHING, SHELTER, AND EMPLOYMENT AS WELL AS

2 Enter total number of section 501(c)(3) and government organizations ▶ 1.

3 Enter total number of other organizations ▶

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

Schedule I (Form 990) 2009

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

932101 02-02-10

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
MEALS/FOOD	2483	22,900.	811,462.	FMV	MEALS AND FOOD
HOUSEHOLD GOODS	666	56,155.	49,151.	FMV	HOUSEHOLD ITEMS
TRANSPORTATION	2641	129,066.	0.		
UTILITIES	140	36,937.	0.		
RENT	233	211,309.	0.		

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

ETHIOPIAN COMMUNITY DEVELOPMENT COUNCIL

(H) PURPOSE OF GRANT OR ASSISTANCE: ASSIST IMMIGRANTS AND REFUGEES IN OBTAINING FOOD, CLOTHING, SHELTER, AND EMPLOYMENT AS WELL AS AID LEGALIZATION PROCESS

Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
MEDICAL/PRESCRIPTION/VISION	2,414.	2,200,188.	277,709.	FMV	MEDICAL/PRESCRIPTION
INTERPRETORS	92.	26,475.	0.		
LEGAL SERVICES	156.	744.	44,100.	FMV	LEGAL SERVICES
PRO-BONO SERVICES	90.	0.	35,200.	FMV	OTHER PRO-BONO SERVICES
EDUCATION	38.	9,656.	0.		
EDUCATION/TRAINING	7.	17,421.	0.		
EMPLOYMENT ASSISTANCE	14.	659.	0.		
EMPLOYMENT TRAINING	174.	320,569.	0.		
DIRECT CASH	706.	878,185.	0.		

Part II Continuation of Grants and Other Assistance to Individuals In the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CHILD CARE ASSISTANCE	6.	2,245.	0.		
RECREATION	63.	18,176.	0.		
STIPENDS	182.	442,340.	0.		
ENROLLEE WAGES/FRINGES	279.	2,884.	0.		
TRAINING	45.	322.	0.		
RECOGNITION	280.	0.	16,684.	FMV	MISCELLANEOUS RECOGNITIONS
WORK CARDS	65.	4,102.	0.		
SHELTERS - YEAR ROUND	69,350.	0.	1,330,000.	FMV	SHELTER
SHELTERS - INCLEMENT WEATHER	41,713.	0.	607,704.	FMV	SHELTER

Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SOCIAL SERVICES - NON-CASH	34,385.	0.	268,861.	FMV	VARIETY
SOCIAL SERVICES - FOOD	23,604.	0.	150,663.	FMV	FOOD
SOCIAL SERVICES - HOUSEHOLD ITEMS	8,437.	0.	101,050.	FMV	HOUSEHOLD ITEMS
SOCIAL SERVICES - CLOTHING	2,397.	0.	17,148.	FMV	CLOTHING
DINING HALL MEALS	199090.	0.	1,171,118.	FMV	MEALS
ALBERTSON'S DONATED FOOD	0.	0.	117,947.	FMV	FOOD
RENT	115.	123,644.	0.		
HOTEL/MOTEL	57.	38,231.	0.		
TRANSPORTATION	7,133.	32,553.	0.		

Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
MEDICAL	16.	2,864.	0.		
HOUSEHOLD	2,775.	0.	8,590.	FMV	HOUSEHOLD ITEMS
IDENTIFICATION	43.	516.	0.		
WORK HEALTH CARDS	55.	2,520.	0.		

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization: CATHOLIC CHARITIES OF SOUTHERN NEVADA

Employer identification number: 88-0059425

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
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	X	1	15,900.	FMV
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
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	X	1	164,855.	FMV
18	Collectibles				
19	Food inventory	X	52	117,974.	FMV
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (MISC)	X	25	14,065.	
26	Other ▶ ( )				
27	Other ▶ ( )				
28	Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment ..... 29 | 0

		Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a		X
b	If "Yes," describe the arrangement in Part II.		
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a		X
b	If "Yes," describe in Part II.		
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

SCHEDULE O
(Form 990)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047
2009
Open to Public Inspection

Name of the organization
CATHOLIC CHARITIES OF SOUTHERN NEVADA

Employer identification number
88-0059425

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

CATHOLIC CHURCH BY: PROVIDING SERVICES TO SUSTAIN THE HUMAN DIGNITY OF ALL PERSONS, FOSTERING SOCIAL JUSTICE, AND CALLING ON OTHERS TO DO THE SAME WITHIN THE COUNTIES OF CLARK, ESMERALDA, LINCOLN, NYE, AND WHITE PINE IN THE STATE OF NEVADA.

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

SOCIAL SERVICES- PROVIDE LOW INCOME PERSONS WITH FOOD AND SHELTER

EMPLOYMENT SERVICE CENTER - OFFERS HELP TO MEN AND WOMEN WITH JOB SKILLS ASSESSMENT AND EMPLOYMENT

ADOPTIONS-PROVIDE SERVICES TO UNWED MOTHERS AND ADOPTIVE PARENTS.

ALL OTHER

EXPENSES $ 3253165. INCLUDING GRANTS OF $ 1013868. REVENUE $ 443958.

FORM 990, PART VI, SECTION B, LINE 11: THE AGENCY'S ANNUAL BUDGET AND THE ANNUAL AUDIT ARE REVIEWED AND APPROVED BY THE AGENCY'S BOARD OF TRUSTEES. THE 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND THE CONTROLLER PRIOR TO BEING FILED.

FORM 990, PART VI, SECTION B, LINE 12C: KEY EMPLOYEES ARE REQUIRED TO NOTIFY THE AGENCY OF ANY CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15A: COMPENSATION OF THE EXECUTIVE

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization: CATHOLIC CHARITIES OF SOUTHERN NEVADA

Employer identification number: 88-0059425

DIRECTOR IS DETERMIED BY THE BOARD OF DIRECTORS. COMPENSATION FOR OTHER KEY EMPLOYEES IS SET BY THE EXECUTIVE DIRECTOR AND APPROVED IN THE BUDGET BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19: THE CHARITY PROVIDES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 2C EXPLANATION OF CHANGES:
THERE HAVE BEEN NO CHANGES TO THE COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT, REVIEW OR COMPILATION OF ITS FINANCIAL STATEMENTS AND SELECTION OF THE INDEPENDENT ACCOUNTANT

SCHEDULE R (Form 990)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047
2009
Open to Public Inspection

Name of the organization
CATHOLIC CHARITIES OF SOUTHERN NEVADA

Employer identification number
88-0059425

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN 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

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to 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 501(c)(3))	(f) Direct controlling entity
ST. VINCENT H.E.L.P., INC. 1501 LAS VEGAS BLVD NORTH LAS VEGAS, NV 89101	TO PROVIDE TEMPORARY HOUSING AND SUPPORT SERVICES TO SINGLE ADULTS	NEVADA	501(C)(3)	170(B)(1)(A)(V	N/A
UNITED STATES CONFERENCE OF CATHOLIC BISHOPS - 53-0196617, 3211 FOURTH STREET, N.E., WASHINGTON, DC 20017	TO PROMOTE THE GREATER GOOD WHICH THE CHURCH OFFERS HUMANKIND	DISTRICT OF COLUMBIA	501(C)(3)	170(B)(1)(A)(V	N/A

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) Disproportionate allocations? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) General or managing partner? No
ST. VINCENT H.E.L.P. ASSOCIATES LIMITED PARTNERSHIP, 1501 LAS VEGAS BLVD NORTH, LAS VEGAS, NV	COLLECTION OF RENTS AND MANAGEMENT OF LOW-INCOME HOUSING UNITS.	NV	ST. VINCENT H.E.L.P., INC.	RELATED	0.	0.		X	N/A		X

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to 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	(c) Legal domicile (state or foreign country)	(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

Part V **Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

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

		Yes	No
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	1a		X
b	Gift, grant, or capital contribution to other organization(s)	1b		X
c	Gift, grant, or capital contribution from other organization(s)	1c	X	
d	Loans or loan guarantees to or for other organization(s)	1d		X
e	Loans or loan guarantees by other organization(s)	1e		X
f	Sale of assets to other organization(s)	1f		X
g	Purchase of assets from other organization(s)	1g		X
h	Exchange of assets	1h		X
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		X
l	Performance of services or membership or fundraising solicitations by other organization(s)	1l		X
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		X
n	Sharing of paid employees	1n		X
o	Reimbursement paid to other organization for expenses	1o	X	
p	Reimbursement paid by other organization for expenses	1p		X
q	Other transfer of cash or property to other organization(s)	1q		X
r	Other transfer of cash or property from other organization(s)	1r		X

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

	(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1)	UNITED STATES CONFERENCE OF CATHOLIC BISHOPS	C	0.
(2)	ST. VINCENT H.E.L.P. ASSOCIATES LIMITED PARTNERSHIP	O	0.
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 COGS

COGS

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	PROPERTY IMPROVEMENTS														
25	IMPROVEMENTS - PRIOR YEAR ADDITIONS	VARIOUS	SL	.000	HY	16	5,445.				5,445.	4,578.		0.	4,578.
	* 990 COGS TOTAL - PROPERTY IMPROVEMENTS						5,445.				5,445.	4,578.		0.	4,578.
	BUILDINGS														
26	BUILDINGS - PRIOR YEAR ADDITIONS	VARIOUS	SL	.000	HY	16	2,745.				2,745.	1,510.		0.	1,510.
	* 990 COGS TOTAL - BUILDINGS						2,745.				2,745.	1,510.		0.	1,510.
	LEASEHOLD IMPROVEMENTS														
28	LEASEHOLD IMPROVEMENTS - PRIOR YEAR ADDITIONS	VARIOUS	SL	.000	HY	16	17,570.				17,570.	15,813.		0.	15,813.
62	HEAT PUMP (RANCHO THRIFT STORE)	07/01/08	SL	10.00	HY	16	4,700.				4,700.	470.		470.	940.
63	SECURITY CAMERAS (RANCHO STORE)	07/01/08	SL	10.00	HY	16	3,148.				3,148.	315.		315.	630.
64	SECURITY CAMERAS (RANCHO STORE)	07/01/08	SL	10.00	HY	16	3,148.				3,148.	315.		315.	630.
	* 990 COGS TOTAL - LEASEHOLD IMPROVEMENTS						28,566.				28,566.	16,913.		1,100.	18,013.
	EQUIPMENT														
27	EQUIPMENT - PRIOR YEAR ADDITIONS	VARIOUS	SL	.000	HY	16	66,623.				66,623.	57,034.		0.	57,034.
	* 990 COGS TOTAL - EQUIPMENT						66,623.				66,623.	57,034.		0.	57,034.
	* GRAND TOTAL 990 COGS DEPR						103,379.				103,379.	80,035.		1,100.	81,135.

928111
04-24-09

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	LAND	VARIOUS	L		HY		738,694.				738,694.			0.	
	LAND			.000	HY	16									
	* 990 PAGE 10 TOTAL - PROPERTY IMPROVEMENTS						738,694.				738,694.	0.		0.	0.
	IMPROVEMENTS - PRIOR YEAR														
2	ADDITIONS	VARIOUS	SL	.000	HY	16	708,653.				708,653.	310,076.		0.	310,076.
3	A/C MONITOR ROOM (ADMIN)	01/01/08	SL	5.00	HY	16	13,785.				13,785.	4,136.		2,757.	6,893.
4	DOOR & FRAME (SENIORS)	01/01/08	SL	5.00	HY	16	2,675.				2,675.	802.		535.	1,337.
5	ROOF REPAIR (ADMIN)	01/01/08	SL	10.00	HY	16	3,400.				3,400.	510.		340.	850.
29	NEW PARKING AREA (WIC HENDERSON)	01/01/09	SL	15.00	HY	16	26,972.				26,972.	899.		1,798.	2,697.
30	LANDSCAPE DOCUMENTS (WIC HENDERSON)	01/01/09	SL	15.00	HY	16	1,800.				1,800.	60.		120.	180.
31	A/C UNITS (WIC HENDERSON)	01/01/09	SL	15.00	HY	16	14,080.				14,080.	469.		939.	1,408.
32	CAT WIRING	01/01/09	SL	15.00	HY	16	4,275.				4,275.	143.		285.	428.
33	CCTV (FERTITTA)	01/01/09	SL	15.00	HY	16	7,123.				7,123.	237.		475.	712.
34	CCTV (FERTITTA)	01/01/09	SL	15.00	HY	16	7,123.				7,123.	237.		475.	712.
	* 990 PAGE 10 TOTAL - PROPERTY IMPROVEMENTS						789,886.				789,886.	317,569.		7,724.	325,293.
	BUILDINGS														
	BUILDINGS - PRIOR YEAR														
6	ADDITIONS	VARIOUS	SL	.000	HY	16	18842278.				18842278.	4,797,840.		0.	4,797,840.
7	EMPLOYMENT SVC BLDG REMODEL	01/01/08	SL	27.50	MM	16	504,308.				504,308.	27,507.		18,338.	45,845.

928111
04-24-09

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	FERTITTA BUILDING COUNTER														
35	RENOVATION	01/01/09	SL	31.50	HY	16	24,107.				24,107.	383.		765.	1,148.
36	A/C UNIT FOR SERVER ROOM	01/01/09	SL	31.50	HY	16	4,724.				4,724.	75.		150.	225.
37	ROOFING AT WIC	01/01/09	SL	31.50	HY	16	2,680.				2,680.	43.		85.	128.
	* 990 PAGE 10 TOTAL - BUILDINGS						19378097				19378097	4,825,848.		19,338	4,845,186.
	LEASEHOLD IMPROVEMENTS														
58	HOT WATER HEATER (SENIORS)	07/01/08	SL	10.00	HY	16	3,200.				3,200.	320.		320.	640.
59	2ND HOT WATER HEATER (SENIORS)	07/01/08	SL	10.00	HY	16	3,200.				3,200.	320.		320.	640.
60	WALK-IN FRIDGE/FREEZER (SENIORS)	07/01/08	SL	10.00	HY	16	34,000.				34,000.	3,400.		3,400.	6,800.
61	BUILDING RENOVATION (SENIORS)	07/01/08	SL	10.00	HY	16	59,108.				59,108.	5,911.		5,911.	11,822.
	* 990 PAGE 10 TOTAL - LEASEHOLD IMPROVEMENTS						99,508.				99,508.	9,951.		9,951.	19,902.
	EQUIPMENT														
8	EQUIPMENT - PRIOR YEAR ADDITIONS	VARIOUS	SL	.000	HY	16	2,368,748.				2,368,748.	2,213,834.		0.	2,213,834.
9	HEAT PUMPS (2) (CHILD CARE)	01/01/08	SL	5.00	HY	16	8,240.				8,240.	2,472.		1,648.	4,120.
10	COPIER (RSD/WEATHER SHELTER)	01/01/08	SL	5.00	HY	16	5,725.				5,725.	1,717.		1,145.	2,862.
11	FREEZER DOOR (MEALS ON WHEELS)	01/01/08	SL	5.00	HY	16	2,686.				2,686.	806.		537.	1,343.
12	SECURITY SYSTEM (RSD/EMPL SVCS)	01/01/08	SL	5.00	HY	16	4,386.				4,386.	1,315.		877.	2,192.
13	SECURITY SYSTEM (RSD/EMPL SVCS)	01/01/08	SL	5.00	HY	16	4,387.				4,387.	1,316.		877.	2,193.
14	PHONE SYSTEM (ADMIN)	01/01/08	SL	5.00	HY	16	45,812.				45,812.	13,743.		9,162.	22,905.

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04-24-09

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
38	FILE IMAGE SERVER KIT (CCSN)	01/01/09	SL	5.00	HY	16	3,175.				3,175.	318.		635.	953.
39	FILE BOUND IMAGING (CCSN)	01/01/09	SL	5.00	HY	16	26,495.				26,495.	2,650.		5,299.	7,949.
40	CROWN ELECTRIC FORKLIFT (RSD)	01/01/09	SL	5.00	HY	16	3,750.				3,750.	375.		750.	1,125.
41	PHOTOCOPIER (FINANCE)	01/01/09	SL	5.00	HY	16	10,300.				10,300.	1,030.		2,060.	3,090.
42	PRESSURE STEAMER (DR)	01/01/09	SL	5.00	HY	16	5,800.				5,800.	580.		1,160.	1,740.
43	KITCHEN EQ (TRAYS, CARTS - SENIORS)	01/01/09	SL	5.00	HY	16	20,568.				20,568.	2,057.		4,114.	6,171.
44	REFRIGERATOR (SENIORS)	01/01/09	SL	5.00	HY	16	2,610.				2,610.	261.		522.	783.
45	FREEZER (SENIORS)	01/01/09	SL	5.00	HY	16	3,437.				3,437.	344.		687.	1,031.
46	HEATED CABINET (SENIORS)	01/01/09	SL	5.00	HY	16	3,015.				3,015.	302.		603.	905.
47	COMPUTER SOFTWARE	01/01/09	SL	5.00	HY	16	2,796.				2,796.	280.		559.	839.
	* 990 PAGE 10 TOTAL - EQUIPMENT						2,521,930.				2,521,930.	2,243,400.		30,635.	2,274,035.
	VEHICLES														
15	VEHICLES - PRIOR YEAR ADDITIONS	VARIOUS	SL	.000	HY	16	352,571.				352,571.	324,656.		0.	324,656.
16	2007 NISSAN VAN	09/28/07	SL	5.00	HY	16	23,406.				23,406.	7,022.		4,681.	11,703.
17	2007 ISUZU TRUCK W SERIES	05/19/08	SL	5.00	HY	16	55,695.				55,695.	16,708.		11,139.	27,847.
48	2006 FORD F-150 (B29007)	01/01/09	SL	5.00	HY	16	33,000.				33,000.	3,300.		6,600.	9,900.
49	2007 CHEVY EXPRESS CUTAWAY (249179)	01/01/09	SL	5.00	HY	16	48,740.				48,740.	4,874.		9,748.	14,622.
50	2008 ISUZU TRUCK W/SERIES (802705)	01/01/09	SL	5.00	HY	16	56,439.				56,439.	5,644.		11,288.	16,932.

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04-24-09

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
51	2009 CHEVY EXPRESS (DONATED HARRAH'S VAN)	01/01/09	SL	5.00	HY	16	26,500.				26,500.	2,650.		5,300.	7,950.
52	2008 CHEVY EXPRESS (217357)	01/01/09	SL	5.00	HY	16	26,490.				26,490.	2,649.		5,298.	7,947.
53	2008 CHEVY EXPRESS (121749)	01/01/09	SL	5.00	HY	16	26,490.				26,490.	2,649.		5,298.	7,947.
54	2007 CHEVY W3S042 (801937)	01/01/09	SL	5.00	HY	16	53,790.				53,790.	5,379.		10,758.	16,137.
	* 990 PAGE 10 TOTAL - VEHICLES						703,121.				703,121.	375,531.		70,110.	445,641.
	* GRAND TOTAL 990 PAGE 10 - DEPR						24231236.				24231236.	7,772,299.		137,758.	7,910,057.

928111
04-24-09

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization 990
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2009

Attachment Sequence No. 67

Name(s) shown on return	Business or activity to which this form relates	Identifying number
CATHOLIC CHARITIES OF SOUTHERN NEVADA	FORM 990 PAGE 10	88-0059425

Part I Election To Expense Certain Property Under Section 179 Note: *If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	800,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	137,758.

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property	/		27.5 yrs.	MM	S/L	
		/		27.5 yrs.	MM	S/L	
i	Nonresidential real property	/		39 yrs.	MM	S/L	
		/			MM	S/L	

Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	137,758.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V **Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete* **only** *24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A - Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles*)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No | 24b If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use						25		
26 Property used more than 50% in a qualified business use:								
	: :	%						
	: :	%						
	: :	%						
27 Property used 50% or less in a qualified business use:								
	: :	%				S/L -		
	: :	%				S/L -		
	: :	%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
30 Total business/investment miles driven during the year (**do not** include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are **not** more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: *If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.*

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2009 tax year:					
	: :				
	: :				
43 Amortization of costs that began before your 2009 tax year				43	
44 Total. Add amounts in column (f). See the instructions for where to report				44	

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization COGS
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2009

Attachment Sequence No. 67

Name(s) shown on return	Business or activity to which this form relates	Identifying number
CATHOLIC CHARITIES OF SOUTHERN NEVADA	FORM 990 COGS	88-0059425

Part I **Election To Expense Certain Property Under Section 179** Note: *If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	800,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II **Special Depreciation Allowance and Other Depreciation (Do not include listed property.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,100.

Part III **MACRS Depreciation (Do not include listed property.) (See instructions.)**

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property	/		27.5 yrs.	MM	S/L	
		/		27.5 yrs.	MM	S/L	
i	Nonresidential real property	/		39 yrs.	MM	S/L	
		/			MM	S/L	

Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	40-year	/		40 yrs.	MM	S/L	

Part IV **Summary** (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	1,100.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V **Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete* **only** *24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A - Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles*)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No | 24b If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use						25		
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: *If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.*

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2009 tax year:					
43 Amortization of costs that began before your 2009 tax year				43	
44 Total. Add amounts in column (f). See the instructions for where to report				44	

Form **8868**
(Rev. April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I **Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits.*

Type or print	Name of Exempt Organization	Employer identification number
File by the due date for filing your return. See instructions.	CATHOLIC CHARITIES OF SOUTHERN NEVADA	88-0059425
	Number, street, and room or suite no. If a P.O. box, see instructions. 1501 LAS VEGAS BLVD NORTH	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LAS VEGAS, NV 89101	

Check type of return to be filed(file a separate application for each return):

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (sec. 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ▶ MONSIGNOR PATRICK LEARY 1501 LAS VEGAS BLVD NORTH - LAS VEGAS, NV 89101
  Telephone No. ▶ 702-385-2662 FAX No. ▶ 702-384-0677
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ [ ]. If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2011, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ [ ] calendar year _____ or
▶ [X] tax year beginning JUL 1, 2009, and ending JUN 30, 2010.

2 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	$
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	$
c	**Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA **For Privacy Act and Paperwork Reduction Act Notice, see Instructions.** Form **8868** (Rev. 4-2009)

923831
05-26-09

Catholic Charities
OF SOUTHERN NEVADA

Executive Offices

Monsignor Patrick R. Leary, *Chief Executive Officer*

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October 25, 2011

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Las Vegas, NV 89117

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Governor's Office of Economic Development
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Urban Chamber of Commerce
1951 Stella Lake St.
Las Vegas, NV 89106

John D. Seli
Fisk Electric Company
3451 W. Martin Ave., Suite C
Las Vegas, NV 89118-4572

Very Rev. Robert E. Stoeckig, VG
Diocese of Las Vegas
P.O. Box 18316
Las Vegas, NV 89114