



FEB 26 2010

Carson City, A Consolidated Municipality

Application for

Community Support Services Funding
Fiscal Year 2010-2011

Name of Organization: Partnership Carson City

Amount Requested: \$100,000.00

Contact Person: Kathlyn Bartosz *KB*

Mailing Address: 1711 North Roop Street

City: Carson City State: NV Zip Code: 89706

Phone Number: (775) 841-4730 E-mail: bartosz4@sbcglobal.net

501(c)3 Taxpayer I.D. Number: 88-0249300

Date Submitted: 2/26/10

Please mail completed application and attachments to:
Carson City Executive Offices
201 N. Carson Street, Suite 2
Carson City, NV 89701

Carson City Community Support Services
APPLICATION FOR GRANT FUNDS
Fiscal Year 2010-2011

Organization Information

1. What is the overall purpose or goal of your organization?

“The Partnership Carson City (PCC) coalition works to prevent the devastating effects of gangs, methamphetamine and other illegal drug and alcohol use by initiating and supporting grass-roots, community-wide programs and environmental strategies.”

2. How long has your organization been in existence? 20 Years 6 Months

How long has your organization been in Carson City? 20 Years 6 Months

3. Describe in general the activities or services of your organization:

Partnership Carson City mobilizes, shares and collaborates for a healthy community in which all can grow, live and learn. PCC is dedicated to assisting civic organizations, community groups, nonprofits, local service providers, schools, faith-based organizations, tribes, law enforcement, media, government entities and concerned citizens to promote efforts that enhance:

1. A community-wide strategic and balanced approach that builds community, family and individual assets; decreases community/individual risk factors; promotes science-based prevention strategies; and generally promotes healthy communities for all to grow, live and learn;
2. Public and family awareness and education of the inherent ills associated with drug and alcohol use and gang involvement;
3. Prevention of first-time use or participation in drug and alcohol use, gang involvement and other at-risk behaviors;
4. Evaluation, treatment and counseling of substance abusers; and people, especially youth, engaging in at-risk behaviors; and
5. Effectiveness of public policy in solving the social issues created by substance abuse and at-risk behaviors.

PCC currently supports monthly meetings of seven community-driven task forces addressing: gang suppression, drug suppression, community awareness and education, housing, poverty and economic development, school and health service connectivity, and early childhood development. Additionally, during the 2009-2010 grant year PCC is implementing/monitoring 64 projects and sub grant programs.

4. How many people do you intend to serve during this Fiscal Year 2010-2011?

of Youth 1,540 # of Adults 1,288 # of Seniors In adult #s
(All numbers are based on average of last several years, an additional 22,217 families
will be served through emergency services and referrals)

5. How many people served this Fiscal Year 2010-2011 will be Carson City residents?

of Youth 100%

of Adults 100%

of Seniors 100%

6. How many paid employees/volunteers does your organization employ?

of full-time employees 1

of part-time employees 2

7. Percentage of organizational funds to be utilized for administrative costs (i.e., salaries, travel, training, etc): 5%

8. Describe how your organization is managed and governed (i.e., Board of Directors).

PCC works under an Executive Board of Directors and is supported by the expertise of a Steering Committee functioning as an ad hoc committee led by the Mayor.

9. Please provide information on your Executive Board members or contact person:

<u>Name</u>	<u>Title</u>	<u>Phone</u>
Jack Araza	President	883-2720
Molly Walt	Vice President	887-2100
Lynne Conrad	Sect./Treas.	684-3205
Ron Beck	member	283-1600
Ron Kendall	member	883-0906
John Simms	member	887-2033
JoAnne Skelly	member	887-2252
Catherine Thayer	member	888-7414
Tish Carpenter	member	882-7388
Donna Curtis	member	884-3037
Barry Smith	member	885-0866

Program/Proposal Information

10. Amount of funds requested? \$ 100,000.00
11. Purpose of Program/Proposal: Describe the program/proposal, target population, number to be served, what the grant will specifically fund. Explain your organization's qualifications to deal with the issue.

This proposal is submitted to allow for the distribution of monies per Carson City Resolution 1995-R-20 "designating the Community Council on Youth, a local non-profit organization, as the coordinating agency for requesting grants of money appropriated by the Board of Supervisors for youth services in Carson City." In May 2009, Community Council on Youth merged with the Mayor's Anti-Meth Task Force, an ad hoc committee in existence since 2005, and was renamed Partnership Carson City (PCC). For the past 14 years, PCC (formerly CCOY) has created a sub grant process for the Youth Community Support Services Grant Funds and encouraged local non profit agencies serving youth to apply. Applications are screened and funded based on how well they address identified risk factors in the community, the goals adopted by Carson City and cost effectiveness.

The target population consists of youth and families living in Carson City that receive services through funded non profit agencies. PCC anticipates serving a minimum of 1,540 youth, 1,288 adults and 22,217 families in fiscal year 2010-2011. Traditionally, agencies funded support services for populatins that may be at risk such as low-income/homeless youth and families, youth who have parents that are incarcerated, youth that have dropped out of school, and youth/families that are experiencing conflict.

In the 2009 funding cycle, PCC reduced the amount of city funds that had previously gone to administrative oversight and used those funds to create mini grant opportunities for youth educational enhancement programs, ranging between \$100 to \$1,000. The mini grants are made available to school personnel first, and then opened to non profits not receiving other funds from Community Support Services. PCC will follow the same practice in allocating the 2010 Community Support Funds. A copy of the sub grant application, and the mini grant application are included as Attachments F and G respectively.

PCC has a long and proven history of supporting community health and safety. During this last year alone, PCC assisted in securing two grants to combat methamphetamine and related drug problems equaling over \$500,000, wrote the successful Tri County Gang Suppression grant for the Carson City, Douglas County and Lyon County Sheriff's Departments for \$350,000, and secured an additioanl \$19,000 from Justice Assistance to help fund staff at the Carson City United Latino Community Office. These funds primarily support law enforcement activities, treatment, and Latino specific populations. Additionally, in the 2009-2010 grant year, PCC implemented/monitored 64 projects and sub grants.

In June 2009, PCC took over as fiscal agent for the Carson City Nevada Hispanic Services office, formerly managed by the Reno based Nevada Hispanic Services, to

prevent the closure of the Carson City office and the elimination of services. PCC has overseen the operation of services, contracted with a consultant to act as an interim director, and organized the first Community Strategic Planning Meeting on February 1, 2010, attended by over 35 concerned citizens to create the plan to advance and enhance current services specific to the Latino community.

12. Goals, Objectives & Measurable Outcomes: The events and/or services must assist the City to fulfill its vision statement and accomplish one or more of the City's Goals. Please indicate which goal(s) will be met. Clearly state measurable outcomes of the project. Tell how you propose to achieve the outcomes of the project in terms of specific activities, including a timetable (proposed starting date and duration of the project):

PCC does not use any of the Community Support funds for direct services. We operate as the fiscal agent and oversight agency for sub grants to the community. Each sub grantee is asked to justify the intent of their application by identifying the need or gap in service they will be meeting, and a maximum of four measurable objectives. The subgrants have been disseminated and will be reviewed and scored based on their application to the PCC and City strategic goals. Traditionally, applicants have supported the City's goals of 1) a safe and secure community, 2) a healthy community, 3) a community dedicated to excellence in education, and 4) a community where information is available to all. Additionally, agencies must support PCC's efforts as outlined in #3 above. The subgrants are due by February 24, 2010 and will be consolidated into one application to the City by the March 18, 2010 presentation to the City Board of Supervisors. All funded sub grantees are required to complete the outcomes of their projects within the City's fiscal year. PCC requires a quarterly program and fiscal report to track outcomes and adherence to timelines of the grants.

The mini grant applications are made available on an on-going basis, and will be reviewed as they are submitted for funding. The intent of the mini grant funds is to support our local educators wanting to provide quality educational experiences through curriculum enhancement or special learning opportunities for students in the face of difficult funding times.

13. Indicate who will benefit from the use of these funds, and how they will benefit. If this is an ongoing event, please state how you intend to fund the program in future years.

Youth and families of Carson City will benefit through services and opportunities funded through Carson City's network of non profit organizations with a reputation of providing quality youth and family programs. The final list of agencies funded, their program objectives and projected number to be served will be summarized and presented at the March 18, 2010 Board of Supervisors meeting. PCC, and each funded agency, continually researches and applies for monies from other funding sources. Through the coalition, dollars are leveraged and resources are shared, thus eliminating duplication and saving money.

14. Are you aware of any other private sector/nonprofit/governmental/agencies in the area providing the same services as your program/proposal? If yes, please explain how your project will compliment other existing programs?

No. Partnership Carson City is the only coalition recognized by the state to receive federal and state substance abuse prevention funds. The role of a coalition is to bring services in the community together for collaboration to ensure maximum efficiency and avoid duplicative efforts. A coalition does not provide direct services beyond environmental strategies (community education, training, policy review) and therefore does not compete with other services in the community.

15. Please include a detailed budget for this program/event, and detailed list of intended expenditures and revenues.

See Attachment A.

16. Has your organization been funded by Carson City previously? Yes No
If yes, please list:

<u>Year</u>	<u>Amount</u>	<u>Program/Event</u>
01-02	95,000.00	For this, and all subsequent years through 2010 listed, projects were services and activities for youth based on reviews of grant applications submitted to PCC and funded by final approval of the Board of Supervisors.
02-03	106,500.00	
03-04	100,170.00	
04-05	103,000.00	
05-06	110,000.00	
06-07	100,000.00	
07-08	90,000.00	
08-09	90,000.00	
09-10	100,000.00	

Required Attachments:

- X A copy of your 501(c)3 Designation Letter from the IRS. For branches of a larger organization (i.e., local troop of Boy Scouts of America), please provide the letter for your umbrella organization.
- X A copy of your most recent audited financial statement. For smaller organizations, or branches, a more simple budget showing income and expenses is acceptable. Also include an IRS form 990.
- X **Previous Grantees: If your organization received grant funding in Fiscal Year 2009-2010 you must complete and submit an Annual Report form detailing how those funds were spent. Applications for former grantees will not be considered if an Annual Report has not been included.**
- X Signed Guidelines for Grants (please keep a copy for your files).

ATTACHMENT A

YOUTH COMMUNITY SUPPORT SERVICES FUNDING

BUDGET

BUDGET ITEM	CALCULATION/EXPLANATION	TOTAL
Direct Service Non-Profit Agency Sub-grants	The sub grant awards will not exceed \$25,000 for any one applicant. Sub grants will be for the period of one year, with quarterly financial and program activity reporting requirements.	\$85,000.00
Special Project Mini Grants	Grant applications will be accepted from school and non-profit agencies to support youth enrichment activities. Grant amounts will range between a minimum of \$100 and a maximum of \$1,000.	\$10,000.00
Partnership Carson City Grants management and reporting	5% of total	\$5,000.00
Total		\$100,000.00

Attachment B

501(c)(3) Letter



Department of the Treasury
Internal Revenue Service

P.O. Box 2508, Room 4010
Cincinnati OH 45201

In reply refer to: 4077556751
Feb. 03, 2010 LTR 4168C 0
88-0249300 000000 00
00038044
BODC: TE

PARTNERSHIP CARSON CITY
% KATHY BARTOSZ
PO BOX 613
CARSON CITY NV 89702-0613



029062

Employer Identification Number: 88-0249300
Person to Contact: Jo Ann Cunningham
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Dec. 01, 2009, request for information regarding your tax-exempt status.

Our records indicate that your organization was recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in March 1992.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Beginning with the organization's sixth taxable year and all succeeding years, it must meet one of the public support tests under section 170(b)(1)(A)(vi) or section 509(a)(2) as reported on Schedule A of the Form 990. If your organization does not meet the public support test for two consecutive years, it is required to file Form 990-PF, Return of Private Foundation, for the second tax year that the organization failed to meet the support test and will be reclassified as a private foundation.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Attachment C

Audit

IRS Form 990

**COMMUNITY COUNCIL
ON YOUTH
(A NONPROFIT ORGANIZATION)
AGREED-UPON PROCEDURES REPORT**

June 30, 2008



Mary C. Sanada, CPA

2832 Table Rock Dr.
Carson City, NV 89706

INDEPENDENT ACCOUNTANT'S REPORT ON APPLYING AGREED-UPON PROCEDURES

To the Board of Carson City Community Council on Youth
and The State of Nevada, Bureau of Alcohol and Drug Abuse

I have performed the procedures enumerated below, which were agreed to by Carson City Community Council on Youth (CCOY) and the Bureau of Alcohol and Drug Abuse (the specified parties), solely to assist you with respect to the accounting records of CCOY for the fiscal year ending June 30, 2008. Management is responsible for the organization's accounting records. This agreed-upon procedures engagement was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants. The sufficiency of these procedures is solely the responsibility of those parties specified in the report. Consequently, I make no representation regarding the sufficiency of the procedures described below either for the purpose of which this report has been requested or for any other purpose.

My procedures and findings are as follows:

1. Inspect a sample of original invoices and other supporting documentation that support expenditures submitted for reimbursement to the Bureau of Alcohol and Drug Abuse (BADA) for evidence that they are allowable costs included in the approved budget categories, which are personnel, consultants/contracts, travel, training and operating for the subgrants #08201SP;08161MT; and 08024PX.

All expenses for personnel costs were adequately documented and charged within the approved budgets.

All expenses for subgrantees under grant#08201SP were adequately documented and charged within the approved budgets.

From the sample of other expenses selected, it was possible to verify only one.

2. Inspect monthly bank statements for evidence that funds received as reimbursement for expenditures which were approved by SAPTA were properly deposited into the bank account.

No exceptions noted.

3. Verify that selected expenditures submitted for reimbursement by SAPTA are within the approved budget amounts, subject to any variances defined in the grant agreement.

With the exception of personnel and subgrant expenditures, it was not possible to verify that submitted reimbursements were within approved budget amounts.

4. Verify that the Organization has maintained Subgrant accounting records.

While the organization is now maintaining subgrant accounting records, the system was not in place for the year ended December 31, 2008, and consequently the records do not agree with reports submitted to BADA.

5. Verify that the Organization is properly licensed.

No exceptions noted.

6. Inspect the Organization's non-discrimination policy.

The Organization's non-discrimination policy is in accordance with SAPTA policies.

7. Verify that the Organization has a letter from the Internal Revenue Service granting tax-exempt status.

No exceptions noted.

8. Inspect the Organization's policies and procedures manual for evidence that a system of internal controls, which would result in fiscal integrity and stability, including generally accepted accounting principles, has been adopted. I will also look for evidence of workplace policies required by SAPTA.

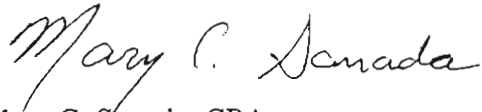
No exceptions noted.

9. Review documentation supporting compliance with all other policies required by the grant.

No exceptions noted.

I was not engaged to, and did not conduct an audit, the objective of which would be the expression of an opinion on the accounting record. Accordingly, I do not express such an opinion. Had I performed additional procedures, other matters might have come to my attention that would have been reported to you.

This report is intended solely for the information and use of CCOY and the Bureau of Alcohol and Drug Abuse and is not intended to be and should not be used by anyone other than those specified parties.



Mary C. Sanada, CPA

Carson City, NV
October 8, 2009

Return of Organization Exempt From Income Tax

2008

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2008 calendar year, or tax year beginning July 1, 2008, and ending June 30, 20 09

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

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

C Name of organization Carson City Community Council on Youth
 Doing Business As Partnership Carson City
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
 P.O.Box 613
 City or town, state or country, and ZIP + 4
 Carson City, NV 89702

D Employer identification number
88 : 0249300

E Telephone number
(775) 841-4730

G Gross receipts \$ 635526.17

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)

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

J Website: ▶ www.partnershipcarsoncity.org

H(c) Group exemption number ▶

K Type of organization: Corporation Trust Association Other ▶

L Year of formation:

M State of legal domicile: NV

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
 The Partnership Carson City coalition will work to prevent the devastating effects of gangs, methamphetamine and other illegal drug and alcohol use by initiating and supporting grass-roots, community wide efforts.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	11
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	
5 Total number of employees (Part V, line 2a)	5	6
6 Total number of volunteers (estimate if necessary)	6	
7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	
7b Net unrelated business taxable income from Form 990-T, line 34	7b	

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	423383.00	634824.00
9 Program service revenue (Part VIII, line 2g)	165.00	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	99.81	59.87
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		642.30
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	423647.81	635526.17

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	178918.10	213974.08
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)	123760.89	141324.45
16a Professional fundraising fees (Part IX, column (A), line 11e)		
b Total fundraising expenses (Part IX, column (D), line 25) ▶		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	151443.22	194718.65
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	454122.21	500017.18
19 Revenue less expenses. Subtract line 18 from line 12	-30474.40	135508.99

	Beginning of Year	End of Year
20 Total assets (Part X, line 16)	15896.03	86691.59
21 Total liabilities (Part X, line 26)	1560.79	6571.26
22 Net assets or fund balances. Subtract line 21 from line 20	14335.24	80120.33

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 _____
 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 _____ EIN _____
 Phone no. _____ () _____

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:

Mission Statement: "The Partnership Carson City coalition will work to prevent the devastating effects of gangs, methamphetamine and other illegal drug and alcohol use by initiating and supporting grass-roots, community-wide efforts."

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 \$ 90,000.00 including grants of \$ 90,000.00) (Revenue \$)

Carson City Grant - purpose to increase number of services for Carson City youth with the potential of reducing the onset of substance abuse.

4b (Code:) (Expenses \$ 325,674.00 including grants of \$ 325,674.00) (Revenue \$)

State of Nevada Substance Abuse Prevention and Treatment - SAPTA SPF & SPI - Purpose to increase number of services for Carson City youth with the potential of reducing the onset of substance abuse

4c (Code:) (Expenses \$ 70608.95 including grants of \$ 70608.95) (Revenue \$)

Department of Health and Human Services - Substance Abuse and Mental Health Services Administration Drug Free Communities - Purpose to increase number of services for Carson City youth with the potential of reducing the onset of substance abuse.

4d Other program services. (Describe in Schedule O.)
(Expenses \$ Including grants of \$) (Revenue \$)

4e Total program service expenses ▶

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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		✓
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		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		✓
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		✓
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		✓
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		✓
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		✓
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		✓
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		✓
	<ul style="list-style-type: none"> • 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.		✓
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
			✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		✓
14a	Did the organization maintain an office, employees, or agents outside of the United States?		✓
14b	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		✓
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		✓
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		✓
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		✓
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		
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		✓
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		✓

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

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			7
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			6
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		
2b			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		✓
3a			
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			
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.		
4b			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		✓
5a			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		✓
5b			
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			
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			
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			
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 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			
Jack Araza President		✓						-0-	-0-	-0-
Ron Beck		✓						-0-	-0-	-0-
Lynne Conrad Secretary/Treasurer		✓						-0-	-0-	-0-
Ron Kendall		✓						-0-	-0-	-0-
John Simms		✓						-0-	-0-	-0-
JoAnn Skelly		✓						-0-	-0-	-0-
Catherine Thayer		✓						-0-	-0-	-0-
Molly Walt Vice President		✓						-0-	-0-	-0-
Tish Carpenter		✓						-0-	-0-	-0-
Barry Smith		✓						-0-	-0-	-0-
Donna Curtis		✓						-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			
Mark Inman Project coordinator	40				<input checked="" type="checkbox"/>			36691.20		
Kathy Bartosz Executive director	30				<input checked="" type="checkbox"/>			24900.00		
Barbara Jones Program Coordinator (no longer employed)	40				<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	22764.00		
J Chrissi Barnett Media Specialist	25				<input checked="" type="checkbox"/>			18880.00		
Eric Ohlson Executive Director (no longer employed)	40				<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	16276.92		
1b Total								5		

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? <i>If "Yes," complete Schedule J for such individual</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule J for such individual.</i>		<input checked="" type="checkbox"/>
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		<input checked="" type="checkbox"/>

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.

(A) Name and business address	(B) Description of services	(C) Compensation
None		

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	-0-				
	b	Membership dues	1b	-0-				
	c	Fundraising events	1c	-0-				
	d	Related organizations	1d	-0-				
	e	Government grants (contributions).	1e	634304.00				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	520.00				
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f ▶			634824.00			
Program Service Revenue				Business Code				
	2a	.....					
	b	.....					
	c	.....					
	d	.....					
	e	.....					
	f	All other program service revenue						
g	Total. Add lines 2a-2f ▶			-0-				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		59.87				
	4	Income from investment of tax-exempt bond proceeds ▶						
	5	Royalties ▶						
	6a			(i) Real	(ii) Personal			
		Gross Rents						
		b	Less: rental expenses					
		c	Rental income or (loss)					
	d	Net rental income or (loss) ▶						
	7a			(i) Securities	(ii) Other			
		Gross amount from sales of assets other than inventory						
		b	Less: cost or other basis and sales expenses					
		c	Gain or (loss)					
	d	Net gain or (loss) ▶						
	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					
	b	Less: cost of goods sold	b					
	c	Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue			Business Code					
11a	.....		900099	642.30			
b	.....						
c	.....						
d	All other revenue							
e	Total. Add lines 11a-11d ▶							
12	Total revenue. See instructions. ▶			635526.17				

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).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>		(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	213974.08	213974.08		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
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	119512.12	98923.66	10294.23	10294.23
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				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	6081.96	5144.46	468.75	468.75
10	Payroll taxes	15730.37	10937.95	2396.21	2396.21
11	Fees for services (non-employees):				
a	Management				
b	Legal				
c	Accounting	7569.82	7569.82		
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	107304.60	107304.60		
12	Advertising and promotion	9626.66	9626.66		
13	Office expenses	29341.96	13182.95	16159.01	
14	Information technology	1332.27		1332.27	
15	Royalties				
16	Occupancy	5289.31		5289.31	
17	Travel	5441.64	5441.64		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	12982.92	12982.92		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	825.00		825.00	
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	Memberships	725.00		725.00	
b	Workman's Comp	4277.02	2138.50	1069.26	1069.26
c	Incentives	2369.10	2369.10		
d	Misc	7633.35		7633.35	
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f				
26	Joint costs. Check here <input type="checkbox"/> 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	550017.18	489596.34	46192.39	14228.45

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	-3599.99	1	66502.09
	2	Savings and temporary cash investments	19496.02	2	19511.17
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	678.33
	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		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b	Less: accumulated depreciation	10b		10c
	11	Investments—publicly traded securities		11	
	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		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	15896.03	16	86691.59	
Liabilities	17	Accounts payable and accrued expenses	1560.79	17	6571.26
	18	Grants payable		18	
	19	Deferred revenue		19	
	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		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1560.79	26	6571.26
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	14335.24	33	80120.33	
34	Total liabilities and net assets/fund balances		34		

Part XI Financial Statements and Reporting

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? . . .

b Were the organization's financial statements audited by an independent accountant?

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.

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?

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.

	Yes	No
2a		
2b		✓
2c		✓
3a	✗	✓
3b	✗	

**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

Carson City Community Council on Youth

Employer identification number

88 : 0249300

All documents and records are available upon request and are located at the Carson City Community Council
on Youth's office.

**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" to 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
Carson City Community Council on Youth

Employer identification number
88 0249300

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
Boys and Girls Club of Western 1870 Russell Way CC, NV			75259.00				
Ron Wood FRC 212 E. Winnie Lane CC, NV			64621.46				
Nevada Hispanic Services Carson City, NV			16008.00				
Advocates to End Domestic Violence Carson City, NV			2850.00				
Brewery Arts Center Carson City, NV			1584.00				
J.O.I.N. Carson City, NV			11858.33				
Washoe Tribe Carson City, NV			10362.00				
Carson City Sheriff's Office Carson City, NV			22149.29				
Carson City High School Carson City, NV			6000.00				
Court Appt. Special Advocate Carson City, NV			3282.00				

- 2 Enter total number of section 501(c)(3) and government organizations **10**
 3 Enter total number of other organizations **0**

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50059P Schedule I (Form 990) 2009

Attachment D

Annual Report

Annual Report
For Community Support Services Funding
Fiscal Year 2009-2010

Name of Organization: Partnership Carson City

Program/Project: Carson City Youth and Family Programming

Amount of Funds Received \$ 100,000.00

Contact Person: Kathlyn Bartosz

Mailing Address: 1711 N. Roop Street

City: Carson City State: NV Zip Code: 89706

Phone Number: 841-4730 E-mail: bartosz4@sbcglobal.net

Date Submitted: _____

1. Please attach a final financial income and expense statement that specifically explains how grant funds were used, including a comparison between your budgeted and your actual incomes and expenses.

2. Evaluate your achievement of your program/proposal objectives listed in your application:

Monies distributed per Carson City Resolution 1995-R-20 to local youth and family agencies for programming are distributed based on 1) priorities established through a comprehensive community needs assessment process, guided by community coalition partners; and 2) priorities established through the Community Referral Initiative's three Community Referral Teams.

The Comprehensive Community Needs Assessment uses data to determine a programs' impact on prioritized risk factors as defined by federal and state funding sources. These risk factors are:

- Family management and conflict
- Community norms favorable towards substance abuse
- Favorable youth attitudes towards substance abuse
- Youth alienation and rebelliousness

The Community Referral Initiative uses an inter-agency, action-based, outcome-oriented approach to addressing issues affecting youth and families in Carson City. The three Community Referral Teams established through this approach and the priorities are:

- Schools and Mental Health Issues: efficiency in service delivery, interagency support, and multi-disciplinary teams
- Early Childhood Development and Health Issues: safe environments for children, nutritional needs, and collaboration among partners
- Poverty and Economic Development Issues: emergency relief and community resource bank, voucher program and services integration, and re-entry services

Partnership Carson City requires quarterly reporting of the funded agencies including numbers served, gender, ethnicity, and a narrative. Following is a list of agencies funded to achieve the above objectives including the program name, brief description of services provided and numbers served through December 31, 2009:

Advocates to End Domestic Violence - Teen Dating Violence Prevention: Program delivered to middle school youth through various community organizations and the two local middle schools. Focuses on recognizing healthy relationships, signs of control and potential violence, and decision making skills. (61 middle school youth)

Boys & Girls Club of Western Nevada - Teen Center: Program delivered to middle and high school youth at the Club. Supports the Keystone Club which focuses on leadership training and community service; the Career Launch and Money Matters program which provides job training and money management skills; Youth for Unity which offers youth a venue to discuss issues in their lives and respect for others; SMART Girls which deals with physical and mental challenges girls face; and Club Tech, a program where youth are introduced to different technologies. (70 middle and high school youth)

Boys & Girls Club Mentor Center - Mentoring Program: Programs serves elementary, middle, and high school youth matched with adult mentors. Services included one-on-one matches, trainings, participation in community events, and recognition events. (262 youth and adults)

Job Opportunities in Nevada (JOIN) - GED Preparation & Vocational Training: Program serves out-of-school youth, primarily referred from juvenile probation, providing GED training, employment preparation services, and case management. (46 high school aged youth)

United Latino Community - Hispanic Youth Leadership Program: Program serves middle and high school Hispanic youth. Supports the Carson High School Latino Club which promotes cultural diversity at the high school, a community service/tutoring program, and youth cultural events. (132 middle and high school Hispanic youth)

Ron Wood Family Resource Center - Youth & Family Support Services: Funding supports general services to youth and families residing in Carson City. Direct services to individuals include truancy referrals, emergency food bank provisions, and families receiving group services. General services include information or other service referrals. (209 truancy referrals, 15,077 emergency food bank provisions, 1,026 families receiving group services, 7,140 information or other service referrals)

Special Projects - Educational & Cultural: Projects and special events supporting educational and cultural opportunities for youth and families in Carson City. A mini grant application is submitted to the PCC Board of Directors for approval prior to funding to ensure the project/event complies with the priorities established. Two projects were funded in the first two quarters: 1) Children's Museum Cultural Family Day; and 2) Eagle Valley After School Tutorial Program.

3. Approximately how many people benefitted from your project? How many of those people were Carson City residents? What were some of the individual benefits?

In the first two quarters of FY 2009-2010, 1,806 youth and adults were served through direct programming. 22,181 were served through emergency services and referrals. Demographics of those receiving direct programming are as follows:

Male = 38% Female = 62%
White = 49% Black = 4% Hispanic = 40% Asian = 3% Native Am. = 4%

All services were provided to Carson City residents. Individual benefits include youth receiving leadership skills, involvement in community service, job skills, GED training, life skills, various trainings, mentoring, cultural diversity, and truancy services. All these benefits directly relate to the priorities established by Partnership Carson City.

4. What specific community benefit did your project provide Carson City?

All programs/services benefit Carson City by supporting healthy, substance free lifestyles for youth and their families. Services provided through the Ron Wood Family Resource Center offer the most direct benefit to the community by providing the necessities such as emergency food assistance, nutritional education programs such as WIC (Women's, Infants and Children), and crisis intervention/case management services. Other agencies funded support services for populations that may be at risk such as low-income/homeless youth and families, youth who have parents that are incarcerated, youth that have dropped out of school, and youth/families that are experiencing conflict. Dealing with these issues in a community is necessary and beneficial.

5. Will this program/project be reoccurring? How do you anticipate funding the project in the future?

Partnership Carson City continually assesses the needs of Carson City related to youth and family services. Those agencies that provide programs/services that address community priorities will continue to be funded. Each grant cycle, new agencies/programs can apply for funding, allowing for PCC to fund services as needed in the community. PCC actively pursues other funding sources to support its priority goals and objectives, including state

funding, federal grants, and private donors. Leveraging funding has been very successful over the past five years but these funding sources expire in 2010, leaving the organization to face the same economic realities as the City of Carson. PCC will adjust budgets and services provided as needed to best serve the community while maintaining quality programming.

6. Describe any challenges that impacted your program.

There have been no challenges in the first two quarters as all programming/services are desperately needed now in Carson City. All agencies have experienced increased requests for services with less and less funding. It is expected that youth and families served this fiscal year will far exceed the proposed numbers to be served.

Partnership Carson City – City Youth Services Grant

Income/Expense Statement

7/1/09 – 12/31/09

Agency	Annual Funding	Approved Budget		Expended to Date	
Advocates to End Domestic Violence	5,896	Personnel Operating	4,465 1,431	Personnel	2,232
Boys & Girls Club Teen Center	21,472	Personnel	21,472	Personnel	10,736
Boys & Girls Club Mentor Center	6,864	Personnel	6,864	Personnel	3,432
Job Opportunities in Nevada (JOIN)	11,000	Personnel Operating Supplies Other	7,735 1,275 490 1,500	Personnel Operating Supplies Other	3,567 696 135 529
United Latino Community	8,360	Personnel	8,360	Personnel	4,408
Ron Wood Family Resource Center	21,472	Personnel Contract Operating Other	9,792 1,680 8,000 2,000	Personnel Contract Operating Other	4,896 840 4,000 1,000
Special Projects Educational & Cultural	19,936	Contract	19,936	Contract	2,000
Partnership Carson City Grants Management	5,000	Personnel	5,000	Personnel	2,000
Totals	100,000		100,000		40,471

Attachment E

Guidelines for Grant

Guidelines for Grants

Fiscal Year 2010-2011

Vision

A leader among cities as an inviting, prosperous community where people live, work and play!

Mission

Preserve and enhance the quality of life and heritage of Carson City for present and future generations of residents, workers and visitors.

City's Goals

A Safe and Secure Community

A Healthy Community

An Active and Engaged Community

A Clean and Healthy Environment

A Vibrant, Diverse and Sustainable Economy

A Community Rich in History, Culture and the Arts

A Community Dedicated to Excellence in Education

A Physically and Socially Connected Community

A Community Where Information is Available to All

1. The competitive grant review process seeks to identify and fund those projects and programs with the greatest potential for furthering the City's goals while benefitting the community.
2. Funding is provided on a year to year basis only. Funding is strictly limited by the availability of funds.
3. Upon approval by the Board of Supervisors of the request, the grant money will be included in the next succeeding year's budget and will be dispensed by the City Manager's Office without further hearing. However, the Board shall continue to retain the prerogative and authority to deny any payment, if in the opinion of the Board, the applicant is not making a "good faith" effort in meeting the obligations and commitments outlined by said applicant within the application process. All grants approved shall be subject to funding availability.
4. The Board of Supervisors may in any event decide by majority vote to conduct a subsequent hearing concerning the application and, if so, the applicant will be notified as to the date of the subsequent hearing.
5. The applicant will utilize the grant monies solely for the general benefit of Carson City and the purpose set forth in the grant application.
6. These guidelines shall not prevent the City from entering into a contract to provide grant money for a term of years.
7. These guidelines shall not control any grants of money provided by any other public or private entity.

8. Approval of each request for funds and/or other forms of consideration shall have a condition that the applicant must complete an Annual Report form detailing all funds utilized, measurable outcomes and benefit to the citizens of Carson City. The completed Annual Report must be submitted to the City Manager's Office no later than March 1, 2011.
9. Any and all individuals and/or entities desiring a grant from the City must complete and execute an "Application for Grant Funds" form and include the required attachments as listed in the application.
10. The **original and nine (9) copies** of the application packet must be submitted to the City Manager's Office no later than **5:00 p.m. on February 25, 2010**. An electronic pdf version may also be emailed to cceo@ci.carson-city.nv.us.

I have read and understand the Guidelines for Grants. The information that is included within this application and its attachments are true to my knowledge.

Partnership Carson City - Youth
Name of Program


Project Director Signature

2-23-10
Date

Carson City Executive Offices
201 N. Carson Street, Suite 2
Carson City, NV 89701
775-887-2100
775-887-2286 (fax)
cceo@ci.carson-city.nv.us
www.carson-city.nv.us

Attachment F

**Partnership Carson City
Youth Community Support Services Funding**

Grant Application



Application for

Carson City Youth Community Support Services Funding

Fiscal Year 2010 – 2011

Due Date:	February 25, 2010 – 4:00 p.m. Deliver to: Partnership Carson City 1711 N. Roop Street, Carson City
Number of Copies:	Original plus five (5) copies 1 electronic copy
Approximate Total Available Funding:	\$100,000
Funding Range	No less than \$1,000 and no more than \$25,000
Project Period:	July 1, 2010 – June 30, 2011
Eligible Applicants:	Accredited school or 501(c)(3) nonprofit entity serving youth residing within Carson City
Questions:	Kathy Bartosz – 841-4730 bartosz4@sbcglobal.net

Name of Organization:

Contact Person:

Address:

Phone Number:

Email:

Taxpayer I.D. Number:

Total Amount Requested:

Previous City-Sponsored Grant Funding Received:

09 – 10 _____ 07 – 08 _____

08 – 09 _____ 06 – 07 _____

Signature of Authorized Representative

Title

Date

APPLICATION BACKGROUND

On January 19, 1995, Carson City Supervisors adopted Resolution 1995-R-20, “designating the Community Council on Youth, a local non-profit organization, as the coordinating agency for requesting grants of money appropriated by the Board of Supervisors for youth services in Carson City” In May 2009, Community Council on Youth merged with the Mayor’s Anti-Meth Task Force, ad hoc committee in existence since 2005, and was renamed Partnership Carson City (PCC).

GRANT GUIDELINES

The competitive grant review process seeks to identify and fund those projects and programs with the greatest potential for furthering PCC’s vision and the City of Carson’s goals. Funding is provided on a year-to-year basis and is limited by the availability of funds. The applicant will utilize the grant monies solely for the general benefit of Carson City.

PCC Mission: Partnership Carson City is a coalition that strives to create and maintain a safe and healthy community in Carson City by preventing involvement in, and reversing the effects of gangs, drugs, alcohol use and other at-risk behaviors.

PCC Vision: Partnership Carson City will mobilize, share and collaborate for a healthy community in which all can grow, live and learn. PCC is dedicated to assisting civic organizations, community groups, nonprofits, local service providers, schools, faith-based organizations, tribes, law enforcement, media, government entities and concerned citizens to promote efforts that enhance:

- A community-wide strategic and balanced approach that builds community, family and individual assets; decreases community/individual risk factors; promotes science-based prevention strategies; and generally promotes healthy communities for all to grow, live and learn;
- Public and family awareness and education of the inherent ills associated with drug and alcohol use and gang involvement;
- Prevention of first-time use or participation in drug and alcohol use, gang involvement and other at-risk behaviors;
- Evaluation, treatment and counseling of substance abusers; and people, especially youth, engaging in at-risk behaviors; and
- Effectiveness of public policy in solving the social issues created by substance abuse and at-risk behaviors.

City of Carson’s Goals:

- A safe and secure community
- A healthy community
- An active and engaged community
- A clean and healthy environment
- A vibrant, diverse and sustainable economy
- A community rich in history, culture and the arts
- A community dedicated to excellence in education
- A physically and socially connected community
- A community where information is available to all

- A. **Problem/Unmet Need this Proposal will Address:** Using local (Carson City) data and information, define the problem this proposal will address, or the gap in service/activities this proposal will fill.
(Page Limit – ½ page)
- B. **Program/Proposal Description:** Briefly describe the program/proposal including the target population, numbers to be served, and other implementation activities specific to the scope of work. Explain the organization’s qualifications to deal with this issue.
(Page Limit – 1 page)
- C. **Goals, Objectives and Measurable Outcomes:** In the table provided, describe how services will fulfill PCC’s vision and the goals of Carson City (provided on page 2). Clearly state the overarching goal, and objectives with coinciding measurable outcomes of the program/proposal.
(Limit – maximum of 4 objectives)

GOAL:	
OBJECTIVES	OUTCOME (MUST BE MEASURABLE)

D. Program/Proposal Budget: In the table below, outline the budget as it relates to the goals and objectives listed in Section C.

Budget Category	Calculations	Budget Request
Personnel/Fringe:		
Consultants/Contractors:		
Travel:		
Training:		
Operating:		
Other:		
Budget Total		

Attachment G

**Partnership Carson City
Mini Grant Application**

Instructions and Application Form

Partnership Carson City (PCC) Mini Grant Application Instructions and Application Form

The Partnership Carson City Mini Grant Project is intended to support enrichment opportunities for youth in Carson City. Classroom teachers with a unique project to make their curriculum “come alive” or an after-school activity to expand young people’s knowledge, experiences, or talents are examples of acceptable applications. The awards are available one time only per project and may range from \$100 - \$1,000 per project.

Applications will be accepted on an on-going basis. The applications will be reviewed at the next regularly scheduled meeting of the Partnership Carson City Executive Board, held the first Wednesday of the month with some exceptions. Should the Board need any additional information, you will be contacted immediately. Projects may begin as soon as approval is received by the Board.

Before you complete the application, you must call to ensure your project idea is appropriate for these funds. Please contact:

Kathy Bartosz, Partnership Carson City: 841-4730, ext. 203

Instructions for Completing Application

1. **Organization receiving funds:** Must be an accredited school, or 501(c)(3) non-profit organization that is NOT currently receiving other funds from Partnership Carson City. If you are not sure if the organization is currently receiving funds, please call the PCC office.
2. **Organization address:** Provide the mailing and physical address (if different) of the organization.
3. **Title/Name of the project:** Create a descriptive title for the project.
4. **Contact name for the project:** Identify the person who will be in charge of implementing the project.
5. **Contact person’s phone and email:** Provide the phone number and email address of the contact person for the project.
6. **Amount requested:** The amount requested may not be less than \$100 or more than \$1,000.
7. **Project target population:** Describe the intended participants for the project including number participating, age range, and other qualifications such as: must be students of a particular school, youth in recovery, residents of a particular at-risk neighborhood, etc.
8. **Project description:** Should include the following:
 - Briefly describe your goal
 - How will you accomplish your goal
 - When and where you want to conduct your project
 - Provide the necessary details of your project to demonstrate to the review committee that you have thought through this project, and it is well organized

9. **Budget:** Explain how you arrived at the amount you are requesting. This includes staff time, supplies, travel, and other related costs.

Example: Staff: \$300 - \$15/hour for 20 hours
 Supplies : \$200 - 20 widgets at \$10 each
 Travel: \$298 - District rate for use of school bus for three hours
 Other: \$100 - \$5/hour for 20 hours to rent a wombat

If it is not obvious to a reasonable person how a cost is related to your project, please explain.

If applicable, explain how costs over what you are requesting for this project are being covered, such as participant fees, etc.

Completed applications must be mailed to:

Kathy Bartosz, Executive Director
Partnership Carson City
P.O. Box 603
Carson City, Nevada 89702

Mini Grant Project Application Form

Date of application: _____

1. Organization receiving funds:
2. Organization address:
3. Title/Name of Project:
4. Contact name for the Project:
5. Contact person's phone and email:
6. Amount Requested:
7. Project target participants:
8. Project Description: should not exceed space allowed – be organized and concise

9. Project Budget: list all expenses

Signature of Project Coordinator

Date

Print name/title of authorized representative

Signature of authorized representative

Date

For PCC Internal Use Only	
<input type="checkbox"/> Approved Date:	<input type="checkbox"/> Post project data received Date:
<input type="checkbox"/> Not Approved Date: Justification:	Number served: Ages served: Ethnicity served: Information disseminated: Other information:

**PARTNERSHIP CARSON CITY
1711 NORTH ROOP STREET
CARSON CITY, NEVADA 89706
(775) 841-4730
www.partnershipcarsoncity.org**

FEB 26 2010

February 25, 2010

TO: Larry Werner, City Manager

FROM: Kathy Bartosz, Executive Director
Partnership Carson City



Re: Summary of Community Youth Service Grant Applications and
selection process

Per requests following last year's youth grant process, below is a summary of applications received by Partnership Carson City for consideration from the Community Service Funds.

As of 4:00PM February 25, 2010, PCC received 12 applications totaling \$195,000.00 in requests,

Given the difficult economic times, PCC is submitting a request for \$100,000.00, which represents stable funding from last year's amount, and will allow PCC to fund slightly over half of the proposals received.

Proposals will be reviewed and scored by every board member, with the score, past grant performance, cost effectiveness and level of critical need met considered in the final funding allocations.

The final recommendations will be made t the PCC Executive Board Meeting, March 3, 2010.

If anyone has any questions, they are free to call me. Thank you!