



Carson City, a Consolidated Municipality

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**CARSON CITY  
EXECUTIVE OFFICES**

Application for  
**Community Support Services Funding**  
Fiscal Year 2011-2012

Name of Organization: NEVADA DAY INC

Amount Requested: \$ 24,000.00

Contact Person: KEN HAMILTON

Mailing Address: P.O BOX 999

City: CARSON CITY State: NV Zip Code: 89702

Phone Number: 882-2600 E-mail: ADMIN@NEVADADAY.COM

501(c)3 Taxpayer I.D. Number: 75-3022297

Date Submitted: 2/22/2011

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 2011-2012

**Organization Information**

1. What is the overall purpose or goal of your organization?  
**TO CELEBRATE NEVADA'S ADMISSION INTO STATEHOOD BY PROVIDING EVENTS SURROUNDING THE OFFICIAL NEVADA DAY STATE HOLIDAY FOR A FOUR DAY PERIOD, INCLUDING THE PARADE. TO PROMOTE AND MARKET THESE EVENTS TO BOTH STATE AND NATIONAL MARKETS.**
2. How long has your organization been in existence? 73 Years \_\_\_\_ Months  
How long has your organization been in Carson City? 43 Years \_\_\_\_ Months
3. Describe in general the activities or services of your organization:  
**TO ORGANIZE, PROMOTE, MARKET, AND COORDINATE THE NEVADA DAY PARADE AND ALL OF THE SURROUNDING EVENTS**
4. How many people do you intend to serve during this Fiscal Year 2011-2012?  
# of Youth N/A # of Adults N/A # of Seniors N/A
5. How many people served this Fiscal Year 2011-2012 will be Carson City residents?  
# of Youth N/A # of Adults N/A # of Seniors N/A
6. How many paid employees/volunteers does your organization employ?  
# of full-time employees \_\_\_\_\_ # of part-time employees 1
7. Percentage of organizational funds to be utilized for administrative costs (i.e., salaries, travel, training, etc): NONE
8. Describe how your organization is managed and governed (i.e., Board of Directors).  
**BOARD, CONSISTING OF FOUR EXECUTIVE BOARD MEMBERS, AND UP TO, BUT NOT EXCEEDING, THIRTEEN BOARD MEMBERS**
9. Please provide information on your Executive Board members or contact person:

<u>Name</u>	<u>Title</u>	<u>Phone</u>
<b>ROBERT BEAN</b>	<b>VICE PRESIDENT</b>	<b>885-9524</b>
<b>KEN BROWN</b>	<b>TREASURER</b>	<b>888-2008</b>
<b>KERI PUTNAM</b>	<b>SECRETARY</b>	<b>684-3354</b>

### Program/Proposal Information

10. Amount of funds requested? \$ 24,000.00
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. **TO ORGANIZE AND PROMOTE THE NEVADA DAY CELEBRATION. THE TARGET POPULATION WOULD BE LOCAL RESIDENTS AND BUSINESS' OF CARSON CITY, ALL OTHER COUNTIES WITHIN THE STATE, AND THE REST OF THE UNITED STATES, ESPECIALLY OUR NEIGHBORING STATES. THE GRANT WILL FUND EVERYDAY OPERATIONS, OFFICE EXPENSES, ADVERTISING, GRAND MARSHAL SELECTION, INSURANCE, PROMOTIONS, GRAPHIC, WEBSITE, ETC... NEVADA DAY INC HAS BEEN MARKETING AND PROMOTING THE NEVADA DAY CELEBRATION FOR OVER 40 YEARS.**
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): **OUR MAIN GOAL IS TO PROMOTE A COMMUNITY RICH IN HISTORY, CULTURE, AND THE ARTS. THE PARADE AND OTHER RELATED EVENTS DRAW A LARGE NUMBER OF PARTICIPANTS EVERY YEAR, DURING MAINLY A FOUR DAY PERIOD, WHICH WILL BE OCTOBER 27TH THROUGH OCTOBER 30TH. THIS CAN ONLY BE ACHIEVED BY THE HARD WORK OF NUMEROUS VOLUNTEERS, LOCAL BUSINESS', CITY AND STATE OFFICIALS, AND LOCAL LAW ENFORCEMENT AGENCIES.**
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. **THE ENTIRE COMMUNITY BENEFITS FROM THE NEVADA DAY CELEBRATION, BUT MAINLY LOCAL BUSINESS', DUE TO A LARGE NUMBER OF LOCAL AND OUT OF TOWN PEOPLE CONGREGATING AROUND THE DOWNTOWN AREA, STAYING IN HOTELS, AND EATING IN OUR LOCAL RESTAURANTS. SPONSORSHIPS, PRIVATE DONATIONS, MERCHANDISE SALES, PARADE ENTRY FEES, AND CITY AND/OR STATE GRANTS.**
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**

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

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>
2010	21,500	NEVADA DAY CELEBRATION
2009	25,000	NEVADA DAY CELEBRATION
2008	9,000	NEVADA DAY CELEBRATION
2007	9,000	NEVADA DAY CELEBRATION
2006	10,000	NEVADA DAY CELEBRATION

**Required Attachments:**

- 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.
- 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.
- **Previous Grantees: If your organization received grant funding in Fiscal Year 2010-2011 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.**
- Signed Guidelines for Grants (please keep a copy for your files).

Carson City, a Consolidated Municipality

**Annual Report**  
**For Community Support Services Funding**  
**Fiscal Year 2010-2011**

Name of Organization: NEVADA DAY INC  
Program/Project: NEVADA DAY CELEBRATION  
Amount of Funds Received \$ 21,500.00  
Contact Person: KEN HAMILTON  
Mailing Address: P O BOX 999  
City: CARSON CITY State: NV Zip Code: 89702  
Phone Number: 775-882-2600 E-mail: ADMIN@NEVADADAY.COM  
Date Submitted: 2/25/2010

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 the measurable outcomes listed in your application:

**OVERALL WE ARE VERY PLEASED WITH LAST YEARS ACHIEVEMENTS. THE NEVADA DAY OFFICE WAS MOVED INTO THE DOWNTOWN AREA ALLOWING US TO PARTICIPATE IN DOWNTOWN EVENTS, GIVING US MORE EXPOSURE, AND HELPING US PROMOTE THE RICH HISTORY OF NEVADA AND NEVADA DAY. WE BROUGHT BACK THE GRAND MARSHAL RECEPTION DINNER BY PROVIDING A WELL KNOWN FIGURE IN AMERICAN, IF NOT INTERNATIONAL, HISTORY, WHERE OVER 300 PARTICIPANTS WERE IN ATTENDANCE. THE PARADE AND ALL OTHER EVENTS WERE VERY WELL ATTENDED, AND EVERYTHING SEEMED TO GO OFF FAIRLY SMOOTHLY AND SAFELY.**

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?

**THE EXACT NUMBER OF PEOPLE THAT BENEFITTED AND WHICH OF THOSE WERE CARSON CITY RESIDENTS IS UNKNOWN. WE HAD WELL OVER 200 PARADE ENTRIES, 300 PLUS AT THE GRAND MARSHAL RECEPTION DINNER, AND WOULD ESTIMATE 30,000 OR MORE SPECTATORS ENJOYED THE PARADE AND OTHE NEVADA DAY EVENTS. MANY LOCAL BUSINESS' BENEFIT FROM THE ADDED REVENUE THE NEVADA DAY CELEBRATION BRINGS.**

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

**THE NEVADA DAY CELEBRATION SEEMS TO BRING THE ENTIRE COMMUNITY TOGETHER TO HELP RECOGNIZE AND PARTAKE IN NEVADA'S ADMISSION INTO STATEHOOD CELEBRATION. THE PARADE ALSO PROVIDES THE OPPORTUNITY FOR CITY AND STATE OFFICIALS TO DISPLAY THEIR SERVICES, HELPING THE COMMUNITY TO RECOGNIZE WHAT AN IMPORTANT ROLE THEY PLAY.**

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

**YES. THE NEVADA DAY PARADE AND CELEBRATION HAS TAKEN PLACE IN CARSON CITY SINCE 1938, AND WE INTEND TO CONTINUE THIS VERY IMPORTANT TRADITION. SPONSORSHIPS, PRIVATE DONATIONS, MERCHANDISE SALES, ENTRY FEES, AND GRANTS.**

6. Describe any challenges that impacted your program.

**FUNDING IS, AND WILL PROBABLY ALWAYS BE, OUR BIGGEST CHALLENGE, FOLLOWED BY COORDINATING ALL THE EVENTS WITH LOCAL OFFICIALS, PROMOTION, AND MARKETING. THIS IS PARTICULARLY DIFFICULT TO ACHIEVE WITH VOLUNTEERS, AND ONE SEASONAL EMPLOYEE.**

<b>Nevada Day, Inc.</b>							
<b>2010 Budget</b>							
	<u>2006 Actual</u>	<u>2007 Actual</u>	<u>2008 Actual</u>	<u>2009 Actual</u>	<u>2010 Projected</u>	<u>2010 Actual</u>	<u>2011 Projected</u>
<b>INCOME:</b>							
<b>Administrative Income</b>						21,500.00City	24,000.00City
						5,000.00CCVB	5,000.00CCVB
Credit Cards				246.00			
Dividends	131.25	250.74					
Donations	65.00	20.00		0.30	0.30		
Grants	16,500.00	18,056.00	15,453.75	30,014.19	27,950.00	26,500.00	29,000.00
Interest	41.98			0.10	0.10		
Rebate	0.00			98.24	98.24		
Friends of Nevada - Parade				1,495.00	1,500.00	850.00	1,000.00
Sponsorship	30,250.00	31,554.00	21,875.00	15,300.00	15,000.00	17,880.00	17,000.00
Sponsorships Prior Year			1,850.00	1,050.00			
<b>Total Administrative Income</b>	<b>46,988.23</b>	<b>49,880.74</b>	<b>39,178.75</b>	<b>48,203.83</b>	<b>44,548.64</b>	<b>45,230.00</b>	<b>45,000.00</b>
<b>Events Income</b>							
<b>Bar Sales</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>		
<b>Total Bar Sales</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>		
<b>Balloon Rides</b>				0.00			
<b>Total Balloon Rides</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>		
<b>Downtown Entertainment</b>	<b>591.65</b>	<b>610.00</b>					
<b>Total Downtown Entertainment</b>	<b>591.65</b>	<b>610.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>		
<b>Golf Tournament</b>							
Entry Fees	3,100.00	2,450.00		3,600.00	3,600.00	500.00	2,500.00
Golf Tournament - Sponsorship	5,000.00	5,200.00		2,072.00	2,072.00	1,125.00	1,500.00
Hole Sponsor	150.00	150.00				100.00	
Raffle	4,150.00					206.57	
<b>Total Golf Tournament</b>	<b>12,400.00</b>	<b>7,800.00</b>	<b>0.00</b>	<b>5,672.00</b>	<b>5,672.00</b>	<b>1,931.57</b>	<b>4,000.00</b>
<b>Grand Marshal Reception Dinner</b>				1,365.00	1,365.00	3,640.00	3,000.00
<b>Total Nugget Dinner</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>1,365.00</b>	<b>1,365.00</b>	<b>3,640.00</b>	<b>3,000.00</b>
<b>Pinewood Derby</b>							
Sponsorship		2,750.07	2,500.00	1,740.00	1,740.00	2,000.00	2,000
Friends of the derby			172.00	44.00	44.00	300.00	300.00
<b>Total Pinewood Derby</b>	<b>0.00</b>	<b>2,750.07</b>	<b>2,672.00</b>	<b>1,784.00</b>	<b>1,784.00</b>	<b>2,300.00</b>	<b>2,300.00</b>
<b>Rock Drilling</b>							
Entry Fees	850.00	1,150.00	850.00	1,000.00	1,000.00	700.00	800.00
Sponsorships	2,100.00	4,700.00	4,950.00	3,600.00	3,600.00	2,000.00	2,000
Friends of the Rock						500.00	500
<b>Total Rock Drilling</b>	<b>2,950.00</b>	<b>5,850.00</b>	<b>5,800.00</b>	<b>4,600.00</b>	<b>4,600.00</b>	<b>3,200.00</b>	<b>3,300.00</b>
<b>Vendors</b>	<b>2,425.00</b>	<b>2,712.50</b>	<b>2,972.50</b>	<b>2,337.50</b>	<b>2,337.50</b>	<b>3,550.00</b>	<b>3,000.00</b>
<b>Total Vendors</b>	<b>2,425.00</b>	<b>2,712.50</b>	<b>2,972.50</b>	<b>2,337.50</b>	<b>2,337.50</b>	<b>3,550.00</b>	<b>3,000.00</b>
<b>Total Events Revenue</b>	<b>18,366.65</b>	<b>19,722.57</b>	<b>11,444.50</b>	<b>15,758.50</b>	<b>15,758.50</b>	<b>14,821.57</b>	<b>15,600.00</b>
<b>Other Income</b>							
Total Merchandise	7,369.50	14,236.52	5,686.28	6,798.50	8,000.00	4,033.00	4,500.00
Parade Entry Fees	10,865.00	8,735.00	11,265.00	9,550.00	10,000.00	15,150.00	11,000
Uncategorized							
<b>Total Other Income</b>	<b>18,234.50</b>	<b>22,971.52</b>	<b>16,951.28</b>	<b>16,348.50</b>	<b>18,000.00</b>	<b>19,183.00</b>	<b>15,500.00</b>
<b>TOTAL INCOME</b>	<b>83,589.38</b>	<b>92,574.83</b>	<b>67,574.53</b>	<b>80,310.83</b>	<b>78,307.14</b>	<b>79,034.57</b>	<b>76,100.00</b>

	2006 Actual	2007 Actual	2008 Actual	2009 Actual	2010 Projected	2010 Actual	2011 Projected
<b>EXPENSE:</b>							
<b>Administrative Expenses</b>							
Awards(internal)	160.85		1,417.54	252.85	500.00	178.72	180.00
Bank Charges	11.00	148.65	92.00	57.72	120.00	124.75	125.00
Storage Rent						612.15	612.15
Credit Card Fees	453.16	395.27	372.77	479.35	451.34	496.45	496.45
Dues & Subscriptions	1,700.00	270.00	530.00	820.00	820.00	461.83	450.00
Equipment Maintenance	98.00		197.14		350.00	617.00	500.00
History Project		177.92	0.00				
Insurance	3,303.92	4,196.68	3,210.08	3,048.00	3,048.00	2,779.68	2,800.00
Internet	239.40	1,238.16	230.25	1,362.10	872.75	812.50	750.00
License - Carson City			21.30	68.60	68.60	75.07	75.05
Meeting	18.96	718.84	11.98	73.53	73.53	127.73	125.00
Distribution	164.90						
Payroll Expense	10,257.58	13,452.89	7,442.24	4,745.66	10,000.00	5,592.09	7,500.00
Payroll Preparation	140.00					295.00	300.00
Payroll Taxes	3,043.35				768.00		
Postage	242.50	901.92	455.71	239.45	250.00	529.28	600.00
Poster			36.55				
Rent	1,800.00	4,050.00	3,600.00	4,300.00	4,800.00	4,800.00	4,800.00
Supplies	2,210.04	1,509.65	1,421.18	797.15	1,300.00	1,217.87	1,200.00
Sponsor Fulfillment			864.10				
Sponsorship Commission			500.00				
Parking fees	0.00					60.00	0
Telephone	1,676.80	1,999.99	1,544.74	1,783.02	1,600.00	1,963.65	1,800.00
Travel	753.01	400.00					
Administrative	6,948.26	1,504.69	1,029.00	1,466.00	1,500.00	100.00	100.00
Wine walk						307.06	550
<b>Total Administrative</b>	<b>33,221.73</b>	<b>30,984.66</b>	<b>22,976.58</b>	<b>19,493.43</b>	<b>26,522.22</b>	<b>21,150.83</b>	<b>22,983.65</b>
<b>Marketing</b>							
Print Advertising	23,195.56	17,722.40	11,057.52	5,765.76	5,500.00	10,343.50	10,000
Promotions	250.98						
Commission on Sponsorships							
Distribution							
Program printing					3,000.00	1,816.38	1800
Sponsor Fulfillment	2,440.00	1,268.47	248.47				
Outside Services	10,746.00	13,675.00	18,247.50	17,500.00	12,000.00	6,891.25	7,000.00
<b>Total Marketing</b>	<b>36,632.54</b>	<b>32,665.87</b>	<b>29,553.49</b>	<b>23,265.76</b>	<b>20,500.00</b>	<b>19,051.13</b>	<b>18,800.00</b>
<b>Merchandise</b>							
Various Merchandise	5,724.51	9,143.09	5,488.71	5,214.95	5,214.95	3,974.62	4,000
Buttons/Buckles		510.00	375.00	535.00	535.00	549.50	550.00
Coins		2,381.65	1,859.00	2,055.00	2,055.00	0.00	0.00
<b>Total Merchandise</b>	<b>5,724.51</b>	<b>12,034.74</b>	<b>7,722.71</b>	<b>7,804.95</b>	<b>7,804.95</b>	<b>4,524.12</b>	<b>4,550.00</b>
<b>Events Expense</b>							
<b>Balloon</b>							
Balloon Expense	301.00	1,300.00		316.00	200.00	1,168.00	200.00
Advertising							
<b>Total Balloon Expense</b>	<b>301.00</b>	<b>1,300.00</b>	<b>0.00</b>	<b>316.00</b>	<b>200.00</b>	<b>1,168.00</b>	<b>200</b>
<b>Beard Contest</b>							
Beard Contest Expense			166.00	510.63	510.63	278.50	300.00
Awards							
<b>Total Beard Contest</b>	<b>0.00</b>	<b>0.00</b>	<b>166.00</b>	<b>510.63</b>	<b>510.63</b>	<b>278.50</b>	<b>300</b>
<b>Golf Tournament</b>							0
Advertising		431.10				540.00	
Awards	450.00						
Miscellaneous	1,036.23			112.26	112.26		
Raffle	2,215.00						
Refreshments	0.00	4,588.90					
<b>Total Golf Tournament</b>	<b>3,701.23</b>	<b>5,020.00</b>	<b>0.00</b>	<b>112.26</b>	<b>112.26</b>	<b>540.00</b>	<b>0</b>



	2006 Actual	2007 Actual	2008 Actual	2009 Actual	2010 Projected	2010 Actual	2011 Projected
<b>Grand Marshal Reception</b>							
Grand Marshal Costs					5,000.00	5,000.00	2000
Band	500.00	250.00					
Other						46.00	
Caterer	2,110.99	1,838.70					
Grand Marshal Reception - Other	306.83					5,338.07	4,000.00
<b>Total Grand Marshal Reception</b>	<b>2,917.82</b>	<b>2,088.70</b>	<b>0.00</b>	<b>0.00</b>	<b>5,000.00</b>	<b>10,384.07</b>	<b>6,000.00</b>
<b>Pinewood Derby</b>							
Awards		123.50		53.00	53.00	53.00	60.00
Advertising (Fliers)							
Shirts/Banners		233.03		225.00	225.00	175.00	200.00
Pinewood Derby - Other		449.00	1,657.00	278.36	278.36	269.00	300.00
<b>Total Pinewood Derby</b>	<b>0.00</b>	<b>805.53</b>	<b>1,657.00</b>	<b>556.36</b>	<b>556.36</b>	<b>497.00</b>	<b>580.00</b>
<b>Rock Drilling</b>							
Advertising	630.57						
Awards	6,053.94	6,076.14	6,310.15	6,310.15	6,310.15	4,000.00	5,000
Outside Services	580.21	181.78	90.40	97.65	97.65	293.95	300.00
Shirts		401.70					
Rock Drilling - Other		350.00					
<b>Total Rock Drilling</b>	<b>7,264.72</b>	<b>7,009.62</b>	<b>6,400.55</b>	<b>6,407.80</b>	<b>6,407.80</b>	<b>4,293.95</b>	<b>5,300.00</b>
<b>Total Events</b>	<b>14,184.77</b>	<b>16,223.85</b>	<b>8,223.55</b>	<b>7,903.05</b>	<b>12,787.05</b>	<b>17,161.52</b>	<b>12,380.00</b>
<b>Parade</b>							
Advertising							
Awards	3,699.83	5,684.45		1,203.44	1,203.44	1,708.28	1,700.00
Fees	900.00	400.00		32.41	32.41	172.32	175.00
Banners (Sponsors)	884.48	3,258.10	975.00	498.00	498.00	771.80	750.00
Catering	956.00	831.00	200.00		200.00	250.00	250.00
Grandstand Expense		417.02	429.36	48.11	50.00		
Equipment	900.00	1,275.00	0.00			500.00	500.00
Parade Marshals	260.00	353.45	400.00	460.00	500.00	480.00	450.00
Portable Human Waste Disposal	850.00	850.00	961.00	989.00	989.00	1,246.00	1,200.00
Supplies		222.91	94.95		150.00	162.10	165.00
<b>Total Parade</b>	<b>8,450.31</b>	<b>13,291.93</b>	<b>3,060.31</b>	<b>3,230.96</b>	<b>3,622.85</b>	<b>5,290.50</b>	<b>5,190.00</b>
<b>Vendors</b>							
Commissions	1,228.52	1,475.60	100.75				
Refund				50.00	0.00		
Vendors - Other							
<b>Total Vendors</b>	<b>1,228.52</b>	<b>1,475.60</b>	<b>100.75</b>	<b>50.00</b>	<b>0.00</b>	<b>0.00</b>	
<b>Volunteer Expense</b>							
Volunteer Thank You Party	2,848.11	1,850.00	1,600.00	1,325.00	1,325.00	1,236.48	1,300.00
Awards	0.00			250.00	250.00		200
<b>Total Volunteers</b>	<b>2,848.11</b>	<b>1,850.00</b>	<b>1,600.00</b>	<b>1,575.00</b>	<b>1,575.00</b>	<b>1,236.48</b>	<b>1,500.00</b>
<b>Total Expenses</b>	<b>102,290.49</b>	<b>108,506.65</b>	<b>73,237.39</b>	<b>63,323.15</b>	<b>72,812.07</b>	<b>68,414.58</b>	<b>65,363.65</b>
<b>Net Income</b>	<b>(18,701.11)</b>	<b>(15,931.82)</b>	<b>(5,662.86)</b>	<b>16,987.68</b>	<b>5,495.07</b>	<b>10,619.99</b>	<b>10,736.35</b>

Internal Revenue Service  
Director, EO Rulings & Agreements  
P.O. Box 2508  
Cincinnati, OH 45201

Date: October 5, 2009

NEVADA DAY INC  
PO BOX 999  
CARSON CITY, NV 89702

Department of the Treasury

Employer Identification Number:  
75-3022297  
Document Locator Number:  
17053-269-71709-9  
Toll Free Number: 877-829-5500

***Acknowledgement of Your Request***

We received your Form 8734, Support Schedule for Your Advance Ruling, or other information regarding your public support status. When communicating with us, please refer to the employer identification number and document locator number shown above.

Your tax exempt status under section 501(c)(3) of the Internal Revenue Code remains in effect.

***What Happens Next?***

The information you submitted was entered into our computer system at our processing center in Covington, Kentucky, and has been sent to our Cincinnati office for initial review. We approve some cases based on this review. If this is the case, you will receive a letter stating that you are a publicly supported organization.

If the review indicates that additional information or changes are necessary, your case will be assigned to an Exempt Organization Specialist in Cincinnati who will call or write you. We assign cases in the order we receive them.

If the additional information indicates that you meet one of the public support tests, you will receive a letter stating that you are a publicly supported organization. If the public support tests are not met, we will send you a letter re-classifying you as a private foundation. That letter will tell you why we believe you do not meet the public support tests, and will include a complete explanation of your appeal rights.

***When Can You Expect To Initially Hear From Us About Your Application?***

Normally, you may expect to hear from us within 120 days. If you do not, you may call our toll free number at 1-877-829-5500 Monday through Friday. Please have your identification numbers available so that we can identify your case. If you would rather write than call, please include a copy of this notice with your correspondence.

# Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2009

Department of the Treasury  
Internal Revenue Service

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

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

A For the 2009 calendar year, or tax year beginning

, 2009, and ending

, 20

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

NEVADA DAY INC

Number and street (or P.O. box, if mail is not delivered to street address)

PO BOX 999

City or town, state or country, and ZIP + 4

CARSON CITY, NV 89701

D Employer identification number

75-3022297

E Telephone number

F Group Exemption Number ▶

- Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method: ☒ Cash ☐ Accrual  
Other (specify) ▶

I Website: ▶

H Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).J Tax-exempt status (check only one) - ☒ 501(c) ( 3 ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 80,311

## Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

R e v e n u e	1	Contributions, gifts, grants, and similar amounts received	1	80,311
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	
	6b	Less: direct expenses other than fundraising expenses	6b	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
E x p e n s e s	7a	Gross sales of inventory, less returns and allowances	7a	
	7b	Less: cost of goods sold	7b	7,805
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	(7,805)
	8	Other revenue (describe ▶ )	8	
A s s e t s	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	72,506
	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	4,746
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	4,300
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ▶ STM130 )	16	49,898
	17	Total expenses. Add lines 10 through 16	17	58,944
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	13,562
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	7,307	
20	Other changes in net assets or fund balances (attach explanation)	20		
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	20,869	

## Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	7,307	14,315
23 Land and buildings		
24 Other assets (describe ▶ STM131 )		6,554
25 Total assets	7,307	20,869
26 Total liabilities (describe ▶ )		
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	7,307	20,869



**Other Information** (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	
b Did the organization file Form 1120-POL for this year?	37b	X
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ; section 4912 ; section 4955		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b	X
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X
41 List the states with which a copy of this return is filed.		
42 a The organization's books are in care of <b>KEN HAMILTON</b> Telephone no. <b>775-882-2600</b> Located at <b>TELEGRAPH CARSON CITY, NV</b> ZIP + 4 <b>89701</b>		
b 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)? 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.	42b	X
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country:	42c	X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041-Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

**Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/>	<input checked="" type="checkbox"/>
49 a Did the organization make any transfers to an exempt non-charitable related organization?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes," was the related organization a section 527 organization?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000 **▶** \_\_\_\_\_

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 **▶** \_\_\_\_\_

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer <b>KEN BROWN, TREASURER</b>		Date	
<b>Paid Preparer's Use Only</b>	Preparer's signature		Date <b>02-22-2011</b>	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 <b>KEN BROWN LTD 1027 S CARSON Carson City, NV 89701</b>		EIN <b>▶</b>	Preparer's Identifying No. (See inst.)
			Phone no. <b>▶</b>	<b>775-888-2008</b>

May the IRS discuss this return with the preparer shown above? See instructions **▶** ☐ Yes ☒ No



**Part I** **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.") . . . . .	67,027	83,417	92,603	51,794	80,311	375,152
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 <b>Total.</b> Add lines 1 through 3 . . . . .	67,027	83,417	92,603	51,794	80,311	375,152
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 <b>Public support.</b> Subtract line 5 from line 4 . . . . .						375,152

**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 . . . . .	67,027	83,417	92,603	51,794	80,311	375,152
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
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.) . . . . .						
11 <b>Total support.</b> Add lines 7 through 10 . . . . .						375,152
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	
13 <b>First five years.</b> 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 <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	100.00	%
15 Public support percentage from 2008 Schedule A, Part II, line 14 . . . . .	15		%
16a <b>33 1/3% support test - 2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input checked="" type="checkbox"/>			
b <b>33 1/3% support test - 2008.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>			
17a <b>10%-facts-and-circumstances test - 2009.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>			
b <b>10%-facts-and-circumstances test - 2008.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>			
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>			



**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 bus. under sec 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 . . . . . ☐

# Federal Supporting Statements

2009

Name(s) as shown on return

FEIN

## FORM 990EZ, PART I, LINE 16 OTHER EXPENSES SCHEDULE 2

DESCRIPTION	AMOUNT
ADVERTISING	5,766
ADVERTISING PREVIOUS YEAR	3,062
AWARDS	253
BANK FEES	58
CREDIT CARD FEES	524
DUES & SUBSCRIPTIONS	820
INSURANCE	3,048
INTERNET	1,362
LICENSE	69
MARKETING	17,550
MEETINGS	74
POSTAGE	239
SUPPLIES	797
TELEPHONE	1,783
OTHER	1,466
BALLON EXPENSE	316
BEARD CONTEST	511
GOLF TOURNAMENT	112
PINE WOOD DERBY	556
ROCK DRILLING	6,408
PARADE EXPENSE	3,499
VENDOR REFUND	50
VOLUNTEER EXPENSE	1,575
TOTAL	49,898

## FORM 990EZ, PART II, LINE 24 OTHER ASSETS SCHEDULE 3

DESCRIPTION	BEGINNING OF YEAR	END OF YEAR
VARIOUS INVENTORY		6,554
TOTAL		6,554

## **Guidelines for Grants**

Fiscal Year 2011-2012

### **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 23, 2011**. An electronic pdf version may also be e-mailed to [cceo@carson.org](mailto:cceo@carson.org).

*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.*

**NEVADA DAY CELEBRATION**

Name of Program

  
Project Director Signature

2/23/11  
Date

Carson City Executive Offices  
201 N. Carson Street, Suite 2  
Carson City, NV 89701  
775-887-2100  
775-887-2286 (fax)  
[cceo@carson.org](mailto:cceo@carson.org)  
[www.carson.org](http://www.carson.org)