

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2022 calendar year, or tax year beginning , **and ending** ,

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: **Legal Aid Center of Southern Nevada**
 Doing business as: _____
 Number and street (or P.O. box if mail is not delivered to street address): **725 E. Charleston Blvd.** Room/suite: _____
 City or town, state or province, country, and ZIP or foreign postal code: **Las Vegas NV 89104**

D Employer identification number: **88-0072562**

E Telephone number: **702-386-1070**

G Gross receipts\$ **19,468,573**

F Name and address of principal officer:
Barbara Buckley
725 E. Charleston Blvd.
Las Vegas NV 89104

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions

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

J Website: **www.lacsn.org** **H(c)** Group exemption number _____

K Form of organization: Corporation Trust Association Other

L Year of formation: **1958** **M** State of legal domicile: **NV**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: LACSN's mission is the preservation of access to justice and the provision of quality legal counsel, advice and representation for individuals who are unable to protect their rights because they cannot afford an attorney.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	16
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	232
	6 Total number of volunteers (estimate if necessary)	6	625
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	17,647,562	15,351,113
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,280,513	3,577,072
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	658,914	540,388
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,847,900	0
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	24,434,889	19,468,573
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	15,256,813	17,272,657
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) 99,880		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,397,599	2,460,476
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	17,654,412	19,733,133	
19 Revenue less expenses. Subtract line 18 from line 12	6,780,477	-264,560	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	66,332,477	63,638,482
	22 Net assets or fund balances. Subtract line 21 from line 20	1,020,742	1,234,359
		65,311,735	62,404,123

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: **Barbara Buckley** Date: _____
 Executive Director
 Type or print name and title

Paid Preparer Use Only Print/Type preparer's name: **Jessica P Sayles** Preparer's signature: _____ Date: _____
 Check if self-employed PTIN: **P01530213**

Firm's name: **Houldsworth, Russo & Company, P.C** Firm's EIN: **88-0374623**
 Firm's address: **8675 S Eastern Ave Ste A Las Vegas, NV 89123** Phone no.: **702-269-9992**

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
LACSN's mission is the preservation of access to justice and the provision of quality legal counsel, advice and representation for individuals who are unable to protect their rights because they cannot afford an attorney.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **5,643,696** including grants of\$) (Revenue \$)
Children's Attorneys Project provides free counsel, advice and representation to abused and neglected children who have been removed from their homes. Generally, once a child has been removed from parental custody, a court hearing to determine family reunification, permanency planning, or termination of parental rights is necessary. The Children's Attorneys Project provides services to children who have not had the benefit of attorney representation in court.

4b (Code:) (Expenses \$ **2,964,046** including grants of\$) (Revenue \$)
See Schedule O

4c (Code:) (Expenses \$ **2,560,002** including grants of\$) (Revenue \$)
The Family Justice Project provides direct legal assistance to victims of domestic violence who otherwise could not afford legal representation. Victims leaving abusive relationships often require extended protective orders against domestic violence or stalking and harassment, child custody/child support orders and/or divorces, intercession with landlords or employers, and other assistance in establishing and maintaining a safe household (i.e. immigration assistance, counseling on how to establish independent credit, etc.). This program levels the playing field for a victim who otherwise suffers intimidation from a better financed batterer.

4d Other program services (Describe on Schedule O.)
(Expenses \$ **6,919,847** including grants of\$) (Revenue \$ **3,577,072**)

4e Total program service expenses **18,087,591**

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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	X	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

Part V Statements Regarding Other IRS Filings and Tax Compliance <i>(continued)</i>		Yes	No		
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	232		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring 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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17			

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	16	
b	Enter the number of voting members included on line 1a, above, who are independent	16	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **None**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records

Terry R. Bratton
Las Vegas

725 E. Charleston Blvd.

NV 89104

702-386-1070

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

See the instructions for the order in which to list the persons above.

 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(1) Barbara Buckley Executive Director	40.00 0.00			X				210,790	0	38,026
(2) Terry Bratton Chief Financial Dir.	40.00 0.00			X				154,708	0	35,221
(3) April S Green Attorney	40.00 0.00					X		141,292	0	34,551
(4) Janice Wolf Attorney	40.00 0.00					X		142,125	0	26,490
(5) Susan Noyce Attorney	40.00 0.00					X		129,822	0	25,899
(6) Robert Flemming Attorney	40.00 0.00					X		138,771	0	16,026
(7) Venicia Considine Attorney	40.00 0.00					X		122,759	0	31,910
(8) Max Couvillier President	2.00 0.00	X		X				0	0	0
(9) J. Randall Jones Secretary	2.00 0.00	X		X				0	0	0
(10) Shelby Keefer Treasurer	2.00 0.00	X		X				0	0	0
(11) Bob Dickerson Director	2.00 0.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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			
(12) Karen Haller	2.00									
Director	0.00	X						0	0	0
(13) Patricia Lee	2.00									
Director	0.00	X						0	0	0
(14) Robyn Ratcliffe Manzini	2.00									
Director	0.00	X						0	0	0
(15) Michon Martin	2.00									
Director	0.00	X						0	0	0
(16) Paul Martin	2.00									
Director	0.00	X						0	0	0
(17) Stephen Martino	2.00									
Director	0.00	X						0	0	0
(18) Richard Morgan	2.00									
Director	0.00	X						0	0	0
(19) Elizabeth Nelson	2.00									
Director	0.00	X						0	0	0
1b Subtotal								1,040,267		208,123
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,040,267		208,123

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **26**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Chetu, Inc Sunrise FL 33323	1500 Concord Terrace, Ste 100 Case Mgmt	163,136
Sandia Tech Park Las Vegas NV 89104	1129 S. Casino Center Blvd Rent	150,514
Willick Investments, Inc. Las Vegas NV 89110	3591 E. Bonanza Road, Suite 200 Rent	129,385
Classic Contractors Janitorial LLC Las Vegas NV 89130	5005 Aussie Court Janitorial	127,430
Abacus Data Systems Pasadena CA 91110-4038	PO Box 31001-4038 Case Mgmt Softw	105,595

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

5

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include Marisa Rodriguez, Betsy Ward, John Valery White, and Marshal Willick.

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

Table with 3 columns: Question number, Yes, No. Rows 3, 4, 5 regarding compensation reporting requirements.

Section B. Independent Contractors

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

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Multiple empty rows for data entry.

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	12,377,752				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,973,361				
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f		15,351,113				
	Program Service Revenue	2a Attorney Fees	Business Code	541100	3,577,072	3,577,072	
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f			3,577,072				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		479,616			479,616	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	60,772			
			(ii) Other				
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c	60,772				
	d Net gain or (loss)		60,772	60,772			
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11a	Business Code					
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions		19,468,573	3,637,844	0	479,616		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	438,747	136,849	214,812	87,086
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	11,575,566	10,842,638	732,928	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,200,595	1,116,173	83,967	455
9 Other employee benefits	2,942,104	2,743,691	197,843	570
10 Payroll taxes	1,115,645	1,026,951	84,901	3,793
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	35,000		35,000	
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	119,060	109,595	9,060	405
12 Advertising and promotion				
13 Office expenses	515,808	474,801	39,253	1,754
14 Information technology	649,290	597,671	49,411	2,208
15 Royalties				
16 Occupancy	719,732	662,513	54,772	2,447
17 Travel	214,844	197,764	16,350	730
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	79,512	61,830	17,682	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	117,971	108,592	8,978	401
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Miscellaneous	9,259	8,523	705	31
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	19,733,133	18,087,591	1,545,662	99,880
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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

		(A)		(B)	
		Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing	22,326,897	1	19,771,383
	2	Savings and temporary cash investments	5,512,739	2	5,426,151
	3	Pledges and grants receivable, net	4,388,241	3	2,666,602
	4	Accounts receivable, net	1,749,551	4	2,368,877
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	416,659	9	471,357
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 20,501,726		
	b	Less: accumulated depreciation	10b 4,206,745	10c	16,294,981
	11	Investments—publicly traded securities	15,852,143	11	16,639,131
	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	15,531	15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	66,332,477	16	63,638,482	
Liabilities	17	Accounts payable and accrued expenses	894,129	17	987,723
	18	Grants payable		18	
	19	Deferred revenue	11,000	19	131,023
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	115,613	21	115,613
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,020,742	26	1,234,359
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	65,311,735	27	62,404,123
	28	Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	65,311,735	32	62,404,123
33	Total liabilities and net assets/fund balances	66,332,477	33	63,638,482	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	19,468,573
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,733,133
3	Revenue less expenses. Subtract line 2 from line 1	3	-264,560
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	65,311,735
5	Net unrealized gains (losses) on investments	5	-2,470,379
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-172,673
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	62,404,123

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		X

**SCHEDULE A
(Form 990)**

Public Charity Status and Public Support

OMB No. 1545-0047

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

2022

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public
Inspection

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

Name of the organization Legal Aid Center of Southern Nevada	Employer identification number 88-0072562
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	22,993,799	19,214,726	16,929,887	17,647,562	15,351,113	92,137,087
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	22,993,799	19,214,726	16,929,887	17,647,562	15,351,113	92,137,087
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)						4,901,344
6 Public support. Subtract line 5 from line 4						87,235,743

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	22,993,799	19,214,726	16,929,887	17,647,562	15,351,113	92,137,087
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	155,560	317,203	323,622	658,914	479,616	1,934,915
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 VI.)		8,741	2,691	1,847,900		1,859,332
11 Total support. Add lines 7 through 10						95,931,334
12 Gross receipts from related activities, etc. (see instructions)					12	13,744,536

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f) divided by line 11, column (f))	14	90.94 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	88.66 %

16a 33 1/3% support test—2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here**. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

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

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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 on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 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 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2022. 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—2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations *(continued)*

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11c		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
2a		
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

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

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

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D – Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required—explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2022		
a	From 2017		
b	From 2018		
c	From 2019		
d	From 2020		
e	From 2021		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2022 distributable amount		
i	Carryover from 2017 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2022 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2022 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2023. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2018		
b	Excess from 2019		
c	Excess from 2020		
d	Excess from 2021		
e	Excess from 2022		

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II, Line 10 - Other Income Detail

Other income **\$ 1,859,332**

**Schedule B
(Form 990)**Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization

**Legal Aid Center of Southern
Nevada**

Employer identification number

88-0072562

Organization type (check one):

Filers of:**Section:**

Form 990 or 990-EZ

 501(c)(**3**) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

-
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

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

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

Schedule B (Form 990) (2022)

Name of organization

Legal Aid Center of Southern

Employer identification number

88-0072562

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Clark County 500 S Grand Central Pkwy, 5th Floor Las Vegas NV 89155-1212	\$ 1,167,869	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	State of Nevada 100 N. Carson Street Carson City NV 89701	\$ 4,710,056	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	HUD 302 E Carson Ave, Ste 400 Las Vegas NV 89101	\$ 332,092	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

**SCHEDULE C
(Form 990)**

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2022

Open to Public Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

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

Name of organization **Legal Aid Center of Southern Nevada** Employer identification number **88-0072562**

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."
- 2 Political campaign activity expenditures. See instructions \$
- 3 Volunteer hours for political campaign activities. See instructions

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

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

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

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990) 2022

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

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	0													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	130,695													
c	Total lobbying expenditures (add lines 1a and 1b)	130,695													
d	Other exempt purpose expenditures	18,087,592													
e	Total exempt purpose expenditures (add lines 1c and 1d)	18,218,287													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount	809,378	911,863	959,476	1,000,000	3,680,717
b Lobbying ceiling amount (150% of line 2a, column (e))					5,521,076
c Total lobbying expenditures	4,295	599	68,605	130,695	204,194
d Grassroots nontaxable amount	202,345	227,966	239,869	250,000	920,180
e Grassroots ceiling amount (150% of line 2d, column (e))					1,380,270
f Grassroots lobbying expenditures				0	

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

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

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

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

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

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

Part IV Supplemental Information

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

Schedule C, Part II-B, Line 1
Lobbying is performed to advocate for Legal Aid Center of Southern Nevada programs.

Part IV **Supplemental Information** *(continued)*

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization: Legal Aid Center of Southern Nevada; Employer identification number: 88-0072562

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form for Part II Conservation Easements, including questions 1-8 and a table for line 2a-d.

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

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

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, including questions 1a-2b.

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	18,326,873	16,815,604	15,287,129	9,247,871	5,218,936
b Contributions		9,029	510,664	4,962,700	4,347,851
c Net investment earnings, gains, and losses		1,502,240	1,017,811	1,076,558	-318,916
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	18,326,873	18,326,873	16,815,604	15,287,129	9,247,871

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment **17.91** %
 - b** Permanent endowment %
 - c** Term endowment **82.09** %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|------------------------------------|-----|-------------------------------------|
| (i) Unrelated organizations | | <input checked="" type="checkbox"/> |
| (ii) Related organizations | | <input checked="" type="checkbox"/> |
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		3,654,157		3,654,157
b Buildings		15,308,585	3,130,392	12,178,193
c Leasehold improvements				
d Equipment		1,538,984	1,076,353	462,631
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				16,294,981

Part VII Investments – Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments – Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	19,468,573
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	19,468,573
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	19,468,573

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

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

1	Total expenses and losses per audited financial statements		1	19,733,133
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	19,733,133
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	19,733,133

Part XIII Supplemental Information.

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

Part IV, Line 2b - Escrow Liability Arrangement Explanation

The Legal Aid Center of Southern Nevada holds settlement proceeds received on behalf of clients in trust until such a time that disbursement is made to the clients.

Part V, Line 4 - Intended Uses for Endowment Funds

The Board of Directors passed a resolution authorizing the establishment of the Legal Aid Center of Southern Nevada Endowment (the Endowment). The Endowment is intended to provide an ongoing source of financial support for the mission of the Organization and to enhance its stability and prestige, fund its program expansion, provide financial independence from outside sources, and offer flexibility for its management. It will be invested

Part XIII Supplemental Information *(continued)*

with the long-term goal of generating income to support the Organization's programs.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation Information

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

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Legal Aid Center of Southern Nevada

Employer identification number

88-0072562

Part I Questions Regarding Compensation

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

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

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

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

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

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

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

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

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

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Barbara Buckley Executive Director	(i)	210,790	0	0	10,540	27,486	248,816	0
	(ii)	0	0	0	0	0	0	0
2 Terry Bratton Chief Financial Dir.	(i)	154,708	0	0	7,735	27,486	189,929	0
	(ii)	0	0	0	0	0	0	0
3 April S Green Attorney	(i)	141,292	0	0	7,065	27,486	175,843	0
	(ii)	0	0	0	0	0	0	0
4 Janice Wolf Attorney	(i)	142,125	0	0	7,106	19,384	168,615	0
	(ii)	0	0	0	0	0	0	0
5 Susan Noyce Attorney	(i)	129,822	0	0	6,491	19,408	155,721	0
	(ii)	0	0	0	0	0	0	0
6 Robert Flemming Attorney	(i)	138,771	0	0	6,939	9,087	154,797	0
	(ii)	0	0	0	0	0	0	0
7 Venicia Considine Attorney	(i)	122,759	0	0	4,424	27,486	154,669	0
	(ii)	0	0	0	0	0	0	0
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

**SCHEDULE L
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open To Public Inspection

Legal Aid Center of Southern Nevada

Employer identification number

88-0072562

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org.?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
				(1)									
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total							\$						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**SCHEDULE O
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022**Open to Public
Inspection**

Name of the organization Legal Aid Center of Southern Nevada	Employer identification number 88-0072562
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Form 990, Part III, Line 4b - Second Accomplishment

Its Guardianship Advocacy Project provides representation to vulnerable senior citizens and individuals with disabilities whose civil rights and property are at significant risk of exploitation and loss. The project provides a voice in court proceedings for seniors and individuals with disabilities. Legal Aid Center's Consumer Rights Project help families reach self-sufficiency by resolving consumer-related problems such as foreclosure, predatory lending, and car repossessions. The Organization also assists individuals with serious illnesses who have been denied social security benefits. Those expenses are allocated under Consumer Rights Project in the statement of functional expenses.

Legal Aid Center's Guardianship Advocacy Program provides representation to individuals and adults with disabilities who are facing or under guardianship to ensure the person's legal rights are protected. Cases are referred to the Guardianship Advocacy Program from the Court.

Form 990, Part III, Line 4d - All Other Accomplishments

Legal Aid Center of Southern Nevada provides free legal counsel, advice and representation to low income individuals who cannot afford an attorney. The Pro Bono Project provides placement services for low-income individuals needing legal representation with an issue not regularly handled by the Organization's staff attorneys, or with matters that cannot be handled by the attorneys due to limited availability of resources. The Pro Bono Project recruits private attorneys to volunteer their time to provide free legal representation to low-income residents in all of our program areas

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

Schedule O (Form 990) 2022

Name of the organization

Employer identification number

Legal Aid Center of Southern**88-0072562**

including family law, domestic violence, abused/neglected children, bankruptcy, real estate fraud, guardianship, and consumer fraud. The Pro Bono Project also runs a variety of Ask-A-Lawyer programs where unrepresented people can meet one-on-one with an attorney to discuss their case.

The Civil Law Self-Help Center provides legal information and forms to those wishing to represent themselves in civil matters in the Clark County court system. Types of matters include small claims, evictions, housing, harassment, and lawsuits and judgments for money. The mission of the Civil Law Self-Help Center is to increase informed access to the court by providing education, information, legal forms, community referrals, and support services to self-represented civil litigants, regardless of their income. The Organization operates and staffs the Civil Law Self-Help Center under a contract with the Courts. The Civil Law Self-Help Center also houses a Neighborhood Justice Center mediator on site as an alternative to litigation.

The Family Law Self-Help Center provides legal information and forms to those wishing to represent themselves in domestic matters in the Clark County court system. Types of matters include divorce, custody and paternity, separation, annulment, protection orders, child support, guardianship, probate, and juvenile matters. The mission of the Family Law Self-Help Center is to increase informed access to the court by providing education, information, legal forms, community referrals, and support services to self-represented civil litigants, regardless of their income. The Organization operates and staffs the Family Law Self-Help Center under a contract with the Eighth Judicial District Court.

The Vegas Strong Resiliency Center (VSRC) is a place of healing and support

Name of the organization Legal Aid Center of Southern	Employer identification number 88-0072562
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dedicated to serving as a multi-agency resource and referral center for residents, visitors and responders affected by the shooting at the Route 91 Harvest Festival. The Center is managed by Legal Aid Center of Southern Nevada, and is staffed by knowledgeable and caring professionals to help people access resources to help them build strength and resiliency in the aftermath of this incident. Anyone impacted by 1 October is welcome to call, email or visit the Resiliency Center. Services that are available include victim advocacy and support, case management, counseling and spiritual care referrals, and technical assistance with applying for online services including FBI Victim Assistance services. Free civil legal services are available including legal consultations and possible legal representation for issues involving insurance matters, medical billing problems, debt collection, housing and evictions, family law matters and more.

The Culinary & Bartenders Unions Legal Services Fund was developed through a partnership between the Culinary Workers Union Local 226, UNITE HERE Bartenders Union Local 165, participating employers, and Legal Aid Center of Southern Nevada to help safeguard the legal and economic wellbeing of eligible employees and their families. For hotel, casino, and other employees eligible under the Legal Service Fund, Legal Aid Center of Southern Nevada has a team of attorneys and advocates that help with legal matters including immigration, bankruptcy, housing, tenant's rights, Powers of Attorney and Healthcare directives, and family law information.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
The Form 990 is reviewed internally by Legal Aid Center Management, then reviewed by all the Board members, prior to signature and submission to the

Name of the organization

Employer identification number

Legal Aid Center of Southern

88-0072562

IRS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The conflict of interest policy is reviewed, discussed and adopted annually by the board. Each volunteer board member is required to sign the policy. All board members discuss at each board meeting any activity by any board member with the organization and discuss the potential for conflict.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

Compensation is reviewed by volunteer board members and considered in terms of persons in similar situations. It is also compared to existing staff and cost of living.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Compensation is reviewed by executive director and considered in terms of persons in similar situations. It is also compared to existing staff and cost of living.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Documents are provided upon request, on our website, and on GuideStar.

Form 990, Part XII, Line 3b - Reason for Not Undergoing Required Audit

Single Audit for the calendar year 2022 is not complete as of the date of filing this Form 990.

Form **990-T**

**Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))**

OMB No. 1545-0047

2022

Department of the Treasury
Internal Revenue Service

For calendar year 2022 or other tax year beginning _____, and ending _____

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection
for 501(c)(3)
Organizations Only

<p>A <input type="checkbox"/> Check box if address changed.</p> <p>B Exempt under section</p> <p><input checked="" type="checkbox"/> 501(C) (3)</p> <p><input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)</p> <p><input type="checkbox"/> 408A <input type="checkbox"/> 530(a)</p> <p><input type="checkbox"/> 529(a) <input type="checkbox"/> 529A</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) Legal Aid Center of Southern Nevada</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 725 E. Charleston Blvd.</p> <p>City or town, state or province, country, and ZIP or foreign postal code Las Vegas NV 89104</p>	<p>D Employer identification number 88-0072562</p> <p>E Group exemption number (see instructions)</p> <p>F <input type="checkbox"/> Check box if an amended return.</p>
<p>C Book value of all assets at end of year 63,638,482</p>			

G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust State college/university

H Check if filing only to Claim credit from Form 8941 Claim a refund shown on Form 2439

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation

J Enter the number of attached Schedules A (Form 990-T) _____

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation _____

L The books are in care of **Terry R. Bratton** Telephone number **702-386-1070**

Part I Total Unrelated Business Taxable Income

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	0
2 Reserved	2	
3 Add lines 1 and 2	3	
4 Charitable contributions (see instructions for limitation rules)	4	
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	
6 Deduction for net operating loss. See instructions	6	0
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	0
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000
9 Trusts. Section 199A deduction. See instructions	9	
10 Total deductions. Add lines 8 and 9	10	1,000
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	0

Part II Tax Computation

1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	0
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2	0
3 Proxy tax. See instructions	3	
4 Other tax amounts. See instructions	4	
5 Alternative minimum tax (trusts only)	5	
6 Tax on noncompliant facility income. See instructions	6	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	0

For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2022)

Part III Tax and Payments

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b Other credits (see instructions)	1b		
c General business credit. Attach Form 3800 (see instructions)	1c		
d Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e Total credits. Add lines 1a through 1d		1e	
2 Subtract line 1e from Part II, line 7		2	
3 Other amounts due. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)		3	
4 Total tax. Add lines 2 and 3 (see instructions) <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here		4	0
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k)		5	
6a Payments: A 2021 overpayment credited to 2022	6a	15,531	
b 2022 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c Tax deposited with Form 8868	6c		
d Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e Backup withholding (see instructions)	6e		
f Credit for small employer health insurance premiums (attach Form 8941)	6f		
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	6g		
7 Total payments. Add lines 6a through 6g		7	15,531
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>		8	
9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed		9	0
10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid		10	15,531
11 Enter the amount of line 10 you want: Credited to 2023 estimated tax Refunded		11	15,531

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

	Yes	No
1 At any time during the 2022 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here		X
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$		
4 Enter available pre-2018 NOL carryovers here \$ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5 Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
Business Activity Code	Available post-2017 NOL carryover	
	\$	
	\$	
	\$	
	\$	
6a Did the organization change its method of accounting? (see instructions)		X
b If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V		

Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

Sign Here	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 taxpayer) is based on all information of which preparer has any knowledge.				May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer	Date	Executive Director		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature		Date	Check <input type="checkbox"/> if self-employed PTIN
	Jessica P Sayles				P01530213
	Firm's name	Firm's EIN			
	Houldsworth, Russo & Company, P.C	88-0374623			
	Firm's address	Phone no.			
	8675 S Eastern Ave Ste A	702-269-9992			
	Las Vegas, NV 89123				

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Other Depreciation:											
19	Land	12/31/99	51,450				51,450	0	-- Land	0	0
26	Furniture	2/01/00	11,110				11,110	10	MO S/L	11,110	0
27	Furniture	3/16/00	2,459				2,459	10	MO S/L	2,459	0
28	Desk and file cabinet	5/08/00	828				828	10	MO S/L	828	0
29	Furniture	7/24/00	901				901	10	MO S/L	901	0
31	Desk	8/16/00	958				958	10	MO S/L	958	0
55	Office Furniture	11/08/01	13,646				13,646	10	MO S/L	13,646	0
59	Video Camera	5/24/02	765				765	5	MO S/L	765	0
64	Desk and Bookcase	1/07/02	1,367				1,367	10	MO S/L	1,367	0
65	File Cabinet	2/27/01	677				677	10	MO S/L	677	0
66	Bookcase	10/17/02	1,077				1,077	10	MO S/L	1,077	0
67	3 Vertical File Cabinets	1/01/02	987				987	10	MO S/L	987	0
68	Lateral File Cabinet	5/28/02	1,074				1,074	10	MO S/L	1,074	0
70	Desk and Bookcase	11/19/02	1,393				1,393	10	MO S/L	1,393	0
71	Desk, Chair, Bookcase	12/18/02	542				542	10	MO S/L	542	0
95	2 Book Cases	4/14/03	718				718	10	MO S/L	718	0
96	3 File Cabinets	7/11/03	2,097				2,097	10	MO S/L	2,097	0
98	2 Desks	10/22/03	1,526				1,526	10	MO S/L	1,526	0
99	Desk	11/12/03	719				719	10	MO S/L	719	0
100	3 Drawer File Cabinet	10/30/03	656				656	10	MO S/L	656	0
101	DV Executive Desk	3/10/03	1,414				1,414	10	MO S/L	1,414	0
103	2 Guest Chairs	5/22/03	528				528	10	MO S/L	528	0
110	Lateral file cabinet	1/10/03	573				573	7	MO S/L	573	0
111	Cabinet, chairs book shelf	4/27/04	1,882				1,882	7	MO S/L	1,882	0
130	Toyota Matrix 2005	8/19/05	15,728				15,728	5	MO S/L	15,728	0
141	Legal Files	10/13/05	1,047				1,047	7	MO S/L	1,047	0
142	Drawers Lateral Files	10/13/05	1,411				1,411	7	MO S/L	1,411	0
143	Chairs	9/21/05	835				835	7	MO S/L	835	0
144	Bookcase & Lateral files	9/21/05	605				605	7	MO S/L	605	0
145	Drawer Lat File	2/17/05	729				729	7	MO S/L	729	0
146	R Return Desk	8/19/05	665				665	7	MO S/L	665	0
149	Guest Chairs	9/12/05	1,506				1,506	7	MO S/L	1,506	0
155	4 Drawer Lateral File	3/07/06	832				832	7	MO S/L	832	0
157	Furnituer for Shiltz	4/05/06	1,664				1,664	7	MO S/L	1,664	0
158	Bookcase	4/27/06	518				518	7	MO S/L	518	0
161	Drawer Files & Chairs	10/24/06	2,682				2,682	7	MO S/L	2,682	0
166	Office Furniture	3/01/06	3,437				3,437	7	MO S/L	3,437	0
168	Office Furniture	10/11/06	839				839	7	MO S/L	839	0
175	Appraisal Fees	12/31/06	4,500				4,500	0	-- Land	0	0
176	Escrow Deposit	10/31/06	50,000				50,000	0	-- Land	0	0
179	Lateral File	10/03/07	1,018				1,018	7	MO S/L	1,018	0
180	Furniture	2/08/07	1,267				1,267	7	MO S/L	1,267	0
181	Conference Table & Chairs	9/17/07	1,667				1,667	7	MO S/L	1,667	0
182	Desks	6/17/07	2,018				2,018	7	MO S/L	2,018	0
183	Furniture	9/03/07	2,151				2,151	7	MO S/L	2,151	0
184	Lateral File	4/10/07	3,843				3,843	7	MO S/L	3,843	0
211	Land	11/15/07	3,106,232				3,106,232	0	-- Land	0	0
231	4 drawer lateral file	10/20/08	1,314				1,314	7	MO S/L	1,314	0
232	2CAP desks	10/20/08	2,603				2,603	7	MO S/L	2,603	0
233	2 desks for CAP	11/07/08	1,998				1,998	7	MO S/L	1,998	0
240	Printer/Fax	3/09/09	3,305				3,305	5	MO S/L	3,305	0
241	MS Office Upgrade	3/09/09	1,565				1,565	3	MO S/L	1,565	0
242	Computers	4/13/09	7,457				7,457	5	MO S/L	7,457	0
244	Computers for New Office	9/11/09	15,031				15,031	5	MO S/L	15,031	0
245	Computer Equipment	11/19/09	6,138				6,138	5	MO S/L	6,138	0
247	Computer Equipment	12/09/09	4,635				4,635	5	MO S/L	4,635	0
254	Desks for Forclosure Attorneys	1/29/09	2,278				2,278	7	MO S/L	2,278	0
255	Right Return Desks for CAP Attorneys	2/12/09	1,180				1,180	7	MO S/L	1,180	0
256	4 Drawer File Cabinet	3/02/09	1,155				1,155	7	MO S/L	1,155	0
258	3 TV	5/19/09	1,217				1,217	5	MO S/L	1,217	0
259	Right Return Desk CAP Attorney	7/15/09	1,179				1,179	7	MO S/L	1,179	0
260	4 Right Return Desks for 610	9/17/09	4,346				4,346	7	MO S/L	4,346	0
261	6 Sec Desks for 610	9/18/09	3,480				3,480	7	MO S/L	3,480	0
262	Sign for 610	9/29/09	1,400				1,400	7	MO S/L	1,400	0
263	4 Bookcases	9/29/09	1,000				1,000	7	MO S/L	1,000	0
265	27 Guest Chairs	9/29/09	2,942				2,942	7	MO S/L	2,942	0
266	Desk for Anne	10/23/09	1,038				1,038	7	MO S/L	1,038	0
276	Computers and Monitors	2/22/10	5,872				5,872	5	MO S/L	5,872	0

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
277	Computer Equipment for Upgrade	3/11/10	25,052			25,052	5 MO S/L	25,052	0
278	Computer Equipment	3/12/10	881			881	5 MO S/L	881	0
279	Printers and CPU's	4/12/10	2,258			2,258	5 MO S/L	2,258	0
280	Computer Equipment	5/13/10	567			567	5 MO S/L	567	0
281	Computer Equipment	7/16/10	2,440			2,440	5 MO S/L	2,440	0
283	Computers	8/05/10	2,721			2,721	5 MO S/L	2,721	0
284	Printers	9/10/10	1,258			1,258	5 MO S/L	1,258	0
285	Scanner, Cables, Printers CPU's	12/21/10	7,370			7,370	5 MO S/L	7,370	0
287	Bookcases	1/10/10	679			679	7 MO S/L	679	0
288	8 Guest Chairs and 1 Bookcase	2/12/10	1,237			1,237	7 MO S/L	1,237	0
292	Computer Equip; PC Mall, Office Depot	5/15/11	3,978			3,978	5 MO S/L	3,978	0
293	5 Computers	6/09/11	3,200			3,200	5 MO S/L	3,200	0
295	Adobe Systems	9/16/11	1,212			1,212	3 MO S/L	1,212	0
296	CPU's and Monitors	11/03/11	5,586			5,586	5 MO S/L	5,586	0
302	Capitalized Interest	3/15/13	659,082			659,082	40 MO S/L	145,547	16,477
303	2 Printers and ports	2/14/12	2,346			2,346	5 MO S/L	2,346	0
304	Computers and Scanners	3/13/12	9,045			9,045	5 MO S/L	9,045	0
305	Computers IT	4/12/12	797			797	5 MO S/L	797	0
306	CPU and Printers	8/09/12	4,393			4,393	5 MO S/L	4,393	0
307	Amicus Attorney 2012 Premium Addition	8/31/12	50,553			50,553	3 MO S/L	50,553	0
308	In-kind software -Microsoft Office & Syma	12/31/12	4,246			4,246	3 MO S/L	4,246	0
310	Printers & equipment	9/18/12	2,290			2,290	5 MO S/L	2,290	0
311	Building	3/15/13	7,082,932			7,082,932	40 MO S/L	1,564,147	177,074
313	File Storage for new building	12/31/12	919			919	7 MO S/L	919	0
314	Network cables	3/21/13	576			576	5 MO S/L	576	0
315	CPU upgrade	4/12/13	8,829			8,829	5 MO S/L	8,829	0
316	Computer Equipment	6/11/13	8,639			8,639	5 MO S/L	8,639	0
317	Shoretel telephone system	6/14/13	111,330			111,330	7 MO S/L	111,330	0
318	Copier	6/17/13	7,804			7,804	5 MO S/L	7,804	0
319	Computer equipment	7/09/13	4,414			4,414	5 MO S/L	4,414	0
320	Computer equipment	8/09/13	5,264			5,264	5 MO S/L	5,264	0
321	Computer equipment	9/11/13	3,142			3,142	5 MO S/L	3,142	0
323	Furniture for new building	3/15/13	200,796			200,796	10 MO S/L	177,370	20,079
324	Filing system for new building	3/15/13	48,683			48,683	10 MO S/L	43,003	4,869
325	Filtered water system and installation	3/15/13	1,600			1,600	7 MO S/L	1,600	0
326	Cat 6 wiring	3/15/13	46,467			46,467	10 MO S/L	41,046	4,647
327	COR 167	5/08/13	20,750			20,750	10 MO S/L	17,983	2,075
328	Furniture	5/13/13	10,827			10,827	10 MO S/L	9,383	1,083
329	Electrical outlets	6/04/13	1,173			1,173	7 MO S/L	1,173	0
330	Lobby table	6/04/13	1,350			1,350	7 MO S/L	1,350	0
331	Furniture	6/11/13	2,732			2,732	7 MO S/L	2,732	0
332	Side flair chair	7/15/13	11,267			11,267	10 MO S/L	9,577	1,126
333	Interior lobby signage	6/25/13	4,497			4,497	10 MO S/L	3,822	450
334	Round conference table	7/29/13	1,217			1,217	7 MO S/L	1,217	0
335	PB workspace	10/29/13	741			741	10 MO S/L	605	74
336	Building	3/15/13	1,969,991			1,969,991	40 MO S/L	435,040	49,249
337	Parking Garage CIP	1/20/14	3,560,000			3,560,000	39 MO S/L	722,650	91,282
338	Parking garage CIP on AP	1/20/14	162,162			162,162	39 MO S/L	32,918	4,158
339	Donated Art Collection	1/01/14	35,050			35,050	0 -- Memo	0	0
340	Donor Wall	4/03/14	14,481			14,481	15 MO S/L	7,482	965
341	Garage directional signage	4/21/14	2,741			2,741	10 MO S/L	2,101	275
342	Photo-cell addition to stairwells	3/31/14	2,359			2,359	10 MO S/L	1,828	236
343	Macho Shade channel install	4/03/14	2,012			2,012	10 MO S/L	1,559	201
344	Building improvements	7/10/14	3,900			3,900	15 MO S/L	1,950	260
345	Classroom Wall design	7/22/14	1,900			1,900	10 MO S/L	1,409	190
346	Additional mirrors - Garage	8/08/14	966			966	10 MO S/L	716	97
347	Angle iron gutter for garage	9/21/14	1,662			1,662	10 MO S/L	1,205	166
348	Spam Firewall	2/07/14	2,511			2,511	3 MO S/L	2,511	0
349	Computer equipment	4/10/14	18,828			18,828	5 MO S/L	18,828	0
350	Computer equipment	5/16/14	12,475			12,475	5 MO S/L	12,475	0
351	UTM Total Protect	12/31/14	1,924			1,924	3 MO S/L	1,924	0
352	Copier	3/07/14	94,523			94,523	5 MO S/L	94,523	0
353	Furniture & Fixture	6/18/14	2,225			2,225	7 MO S/L	2,225	0
354	Furniture & Fixture	12/23/14	962			962	7 MO S/L	962	0
355	Parking Garage	1/20/14	37,058			37,058	39 MO S/L	7,523	950
356	Software	4/10/14	1,527			1,527	3 MO S/L	1,527	0
357	Parking Garage	1/01/15	31,585			31,585	39 MO S/L	5,669	810
358	Desks	1/16/15	4,095			4,095	7 MO S/L	4,046	49
359	Computers and Printers	9/09/15	28,299			28,299	5 MO S/L	28,299	0
360	Desks	5/21/15	6,885			6,885	7 MO S/L	6,476	409
361	Sophos SG310 UIM	11/01/17	2,193			2,193	5 MO S/L	1,828	365

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
362	15" Apple Macbook Pro	11/07/17	1,858			1,858	5 MO S/L	1,548	310
363	Access Control Locks	4/19/17	3,666			3,666	10 MO S/L	1,711	366
364	Endowment wall signage	9/08/17	12,366			12,366	10 MO S/L	5,359	1,236
365	Boyd wall signage	9/08/17	9,192			9,192	10 MO S/L	3,983	919
366	Plaques - wall	9/08/17	4,130			4,130	10 MO S/L	1,790	413
368	Garage gate	5/18/18	28,883			28,883	10 MO S/L	10,350	2,888
369	New blower motor	5/30/18	2,035			2,035	10 MO S/L	729	204
370	Two fan motors and compressor	6/29/18	4,390			4,390	10 MO S/L	1,537	439
371	CAP Building - General Construction	5/01/19	345,450			345,450	39 MO S/L	23,621	8,857
372	CAP Office Construction - DIRT	5/01/19	507,472			507,472	10 MO S/L	135,326	50,747
373	CAP Alarm	5/01/19	3,300			3,300	10 MO S/L	880	330
374	Alarm	11/07/19	14,457			14,457	10 MO S/L	3,132	1,446
375	Endowment Wall Signage	11/07/19	20,800			20,800	10 MO S/L	4,507	2,080
376	CAP Copier	5/01/19	28,340			28,340	5 MO S/L	15,115	5,668
377	CAP Mitel Telephone System	5/01/19	34,245			34,245	5 MO S/L	18,264	6,849
378	Postage Machine	7/01/19	6,915			6,915	5 MO S/L	3,457	1,383
379	CAP Furniture & Fixtures	5/01/19	186,006			186,006	7 MO S/L	70,859	26,573
380	CAP Lutron Shades	5/01/19	5,315			5,315	7 MO S/L	2,025	759
381	CAP Ice Maker	5/01/19	2,482			2,482	7 MO S/L	946	354
382	VSRC Office Furniture	12/31/19	16,983			16,983	7 MO S/L	4,852	2,426
383	VSRC Tables and Chairs	12/31/19	7,111			7,111	7 MO S/L	2,032	1,016
384	Land - 801 E. Charleston Blvd.	7/31/20	441,975			441,975	0 -- Land	0	0
385	Building - 801 E. Charleston Blvd.	7/31/20	662,962			662,962	0 -- Memo	0	0
386	VSRC -Wiring, surveillance and access con	1/03/20	20,677			20,677	10 MO S/L	4,135	2,068
387	VSRC Alarm	1/16/20	2,200			2,200	10 MO S/L	422	220
388	Water heater	11/30/20	2,350			2,350	10 MO S/L	255	235
389	FLSHC HP Printer	2/15/20	2,745			2,745	5 MO S/L	1,052	549
390	Thinkpad	6/25/20	2,212			2,212	5 MO S/L	664	442
391	APC (battery backup system) for network	10/15/20	5,447			5,447	5 MO S/L	1,362	1,089
392	VSRC Mitel Telephone System	1/03/20	22,207			22,207	5 MO S/L	8,883	4,441
393	Mitel Voice Switch	3/27/20	6,413			6,413	5 MO S/L	2,244	1,283
394	VSRC Copier	1/10/20	7,863			7,863	5 MO S/L	3,145	1,573
395	Copier - Reception	2/06/20	7,563			7,563	5 MO S/L	2,899	1,513
396	Copier - Admin	8/06/20	7,563			7,563	5 MO S/L	2,143	1,512
397	SHC Acrylic Partitions	11/19/20	1,546			1,546	7 MO S/L	239	221
398	801 E Charleston Architecture	12/31/20	23,400			23,400	0 -- Memo	0	0
399	CAP - Security Screens	5/11/21	13,695			13,695	10 MO S/L	913	1,369
400	VSRC - Hydroxyl Generator	4/01/21	2,037			2,037	5 MO S/L	306	407
401	CAP - Hydroxyl Generator	4/01/21	2,037			2,037	5 MO S/L	306	407
402	Admin - Hydroxyl Generator	4/01/21	2,037			2,037	5 MO S/L	306	407
403	CAP - Copier	10/04/21	7,300			7,300	5 MO S/L	365	1,460
404	CAP - Desks and bookcases for upstairs offi	11/04/21	14,294			14,294	7 MO S/L	340	2,042
405	Architect fees	12/31/21	900			900	0 -- Land	0	0
406	New Servers	1/01/22	17,516			17,516	5 MO S/L	0	3,503
407	ACR Mechanical	2/03/22	7,529			7,529	10 MO S/L	0	690
408	Computers	1/07/22	10,541			10,541	5 MO S/L	0	2,108
409	Computer equipment	3/03/22	1,600			1,600	5 MO S/L	0	267
410	Computer equipment	4/08/22	8,467			8,467	5 MO S/L	0	1,270
411	Computer equipment	5/10/22	17,228			17,228	5 MO S/L	0	2,297
412	Computer equipment	6/09/22	17,400			17,400	5 MO S/L	0	2,030
413	Computer equipment	7/07/22	17,234			17,234	5 MO S/L	0	1,723
414	Computer equipment	8/04/22	1,336			1,336	5 MO S/L	0	111
415	Computer equipment	10/07/22	2,072			2,072	5 MO S/L	0	104
416	Office equipment	2/03/22	3,950			3,950	5 MO S/L	0	724
417	Office equipment	4/08/22	1,000			1,000	5 MO S/L	0	150
418	Office equipment	5/10/22	491			491	5 MO S/L	0	66
419	Ford Audio Vidoe	5/13/22	39,239			39,239	5 MO S/L	0	5,232
420	Office equipment	9/09/22	139			139	5 MO S/L	0	9
421	Office equipment	10/07/22	4,397			4,397	5 MO S/L	0	220
422	Office equipment	11/10/22	450			450	5 MO S/L	0	15
423	CAP Guest Chairs	4/01/22	5,290			5,290	7 MO S/L	0	567
424	CIP	12/31/22	85,900			85,900	0 -- Memo	0	0
Total Other Depreciation			<u>20,501,726</u>			<u>20,501,726</u>		<u>4,206,749</u>	<u>535,203</u>
Total ACRS and Other Depreciation			<u>20,501,726</u>			<u>20,501,726</u>		<u>4,206,749</u>	<u>535,203</u>

Federal Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
	Grand Totals		20,501,726			20,501,726		4,206,749	535,203
	Less: Dispositions and Transfers		0			0		0	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>20,501,726</u>			<u>20,501,726</u>		<u>4,206,749</u>	<u>535,203</u>

Bonus Depreciation Report

Form 990, Page 1

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
407	ACR Mechanical	2/03/22	7,529		0	0	0	7,529
Grand Total			<u>7,529</u>		<u>0</u>	<u>0</u>	<u>0</u>	<u>7,529</u>

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
There are no assets that meet the criteria of this report						

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
19	Land	12/31/99	51,450	0	0
26	Furniture	2/01/00	11,110	0	0
27	Furniture	3/16/00	2,459	0	0
28	Desk and file cabinet	5/08/00	828	0	0
29	Furniture	7/24/00	901	0	0
31	Desk	8/16/00	958	0	0
55	Office Furniture	11/08/01	13,646	0	0
59	Video Camera	5/24/02	765	0	0
64	Desk and Bookcase	1/07/02	1,367	0	0
65	File Cabinet	2/27/01	677	0	0
66	Bookcase	10/17/02	1,077	0	0
67	3 Vertical File Cabinets	1/01/02	987	0	0
68	Lateral File Cabinet	5/28/02	1,074	0	0
70	Desk and Bookcase	11/19/02	1,393	0	0
71	Desk, Chair, Bookcase	12/18/02	542	0	0
95	2 Book Cases	4/14/03	718	0	0
96	3 File Cabinets	7/11/03	2,097	0	0
98	2 Desks	10/22/03	1,526	0	0
99	Desk	11/12/03	719	0	0
100	3 Drawer File Cabinet	10/30/03	656	0	0
101	DV Executive Desk	3/10/03	1,414	0	0
103	2 Guest Chairs	5/22/03	528	0	0
110	Lateral file cabinet	1/10/03	573	0	0
111	Cabinet, chairs book shelf	4/27/04	1,882	0	0
130	Toyota Matrix 2005	8/19/05	15,728	0	0
141	Legal Files	10/13/05	1,047	0	0
142	Drawers Lateral Files	10/13/05	1,411	0	0
143	Chairs	9/21/05	835	0	0
144	Bookcase & Lateral files	9/21/05	605	0	0
145	Drawer Lat File	2/17/05	729	0	0
146	R Return Desk	8/19/05	665	0	0
149	Guest Chairs	9/12/05	1,506	0	0
155	4 Drawer Lateral File	3/07/06	832	0	0
157	Furnituer for Shiltz	4/05/06	1,664	0	0
158	Bookcase	4/27/06	518	0	0
161	Drawer Files & Chairs	10/24/06	2,682	0	0
166	Office Furniture	3/01/06	3,437	0	0
168	Office Furniture	10/11/06	839	0	0
175	Appraisal Fees	12/31/06	4,500	0	0
176	Escrow Deposit	10/31/06	50,000	0	0
179	Lateral File	10/03/07	1,018	0	0
180	Furniture	2/08/07	1,267	0	0
181	Conference Table & Chairs	9/17/07	1,667	0	0
182	Desks	6/17/07	2,018	0	0
183	Furniture	9/03/07	2,151	0	0
184	Lateral File	4/10/07	3,843	0	0
211	Land	11/15/07	3,106,232	0	0
231	4 drawer lateral file	10/20/08	1,314	0	0
232	2CAP desks	10/20/08	2,603	0	0
233	2 desks for CAP	11/07/08	1,998	0	0
240	Printer/Fax	3/09/09	3,305	0	0
241	MS Office Upgrade	3/09/09	1,565	0	0
242	Computers	4/13/09	7,457	0	0
244	Computers for New Office	9/11/09	15,031	0	0
245	Computer Equipment	11/19/09	6,138	0	0
247	Computer Equipment	12/09/09	4,635	0	0
254	Desks for Forclosure Attorneys	1/29/09	2,278	0	0
255	Right Rerturn Desks for CAP Attorneys	2/12/09	1,180	0	0
256	4 Drawer File Cabinet	3/02/09	1,155	0	0
258	3 TV	5/19/09	1,217	0	0
259	Right Return Desk CAP Attorney	7/15/09	1,179	0	0
260	4 Right Return Desks for 610	9/17/09	4,346	0	0
261	6 Sec Desks for 610	9/18/09	3,480	0	0
262	Sign for 610	9/29/09	1,400	0	0
263	4 Bookcases	9/29/09	1,000	0	0
265	27 Guest Chairs	9/29/09	2,942	0	0
266	Desk for Anne	10/23/09	1,038	0	0

Asset	Description	Date In Service	Cost	Tax	AMT
276	Computers and Monitors	2/22/10	5,872	0	0
277	Computer Equipment for Upgrade	3/11/10	25,052	0	0
278	Computer Equipment	3/12/10	881	0	0
279	Printers and CPU's	4/12/10	2,258	0	0
280	Computer Equipment	5/13/10	567	0	0
281	Computer Equipment	7/16/10	2,440	0	0
283	Computers	8/05/10	2,721	0	0
284	Printers	9/10/10	1,258	0	0
285	Scanner, Cables, Printers CPU's	12/21/10	7,370	0	0
287	Bookcases	1/10/10	679	0	0
288	8 Guest Chairs and 1 Bookcase	2/12/10	1,237	0	0
292	Computer Equip; PC Mall, Office Depot	5/15/11	3,978	0	0
293	5 Computers	6/09/11	3,200	0	0
295	Adobe Systems	9/16/11	1,212	0	0
296	CPU's and Monitors	11/03/11	5,586	0	0
302	Capitalized Interest	3/15/13	659,082	16,477	0
303	2 Printers and ports	2/14/12	2,346	0	0
304	Computers and Scscanner	3/13/12	9,045	0	0
305	Computers IT	4/12/12	797	0	0
306	CPU and Printers	8/09/12	4,393	0	0
307	Amicus Attorney 2012 Premium Addition	8/31/12	50,553	0	0
308	In-kind software -Microsoft Office & Symantec	12/31/12	4,246	0	0
310	Printers & equipment	9/18/12	2,290	0	0
311	Building	3/15/13	7,082,932	177,073	0
313	File Storage for new building	12/31/12	919	0	0
314	Network cables	3/21/13	576	0	0
315	CPU upgrade	4/12/13	8,829	0	0
316	Computer Equipment	6/11/13	8,639	0	0
317	Shoretel telephone system	6/14/13	111,330	0	0
318	Copier	6/17/13	7,804	0	0
319	Computer equipment	7/09/13	4,414	0	0
320	Computer equipment	8/09/13	5,264	0	0
321	Computer equipment	9/11/13	3,142	0	0
323	Furniture for new building	3/15/13	200,796	3,347	0
324	Filing system for new building	3/15/13	48,683	811	0
325	Filtered water system and installation	3/15/13	1,600	0	0
326	Cat 6 wiring	3/15/13	46,467	774	0
327	COR 167	5/08/13	20,750	692	0
328	Furniture	5/13/13	10,827	361	0
329	Electrical outlets	6/04/13	1,173	0	0
330	Lobby table	6/04/13	1,350	0	0
331	Furniture	6/11/13	2,732	0	0
332	Side flair chair	7/15/13	11,267	564	0
333	Interior lobby signage	6/25/13	4,497	225	0
334	Round conference table	7/29/13	1,217	0	0
335	PB workspace	10/29/13	741	62	0
336	Building	3/15/13	1,969,991	49,250	0
337	Parking Garage CIP	1/20/14	3,560,000	91,282	0
338	Parking garage CIP on AP	1/20/14	162,162	4,158	0
339	Donated Art Collection	1/01/14	35,050	0	0
340	Donor Wall	4/03/14	14,481	966	0
341	Garage directional signage	4/21/14	2,741	274	0
342	Photo-cell addition to stairwells	3/31/14	2,359	236	0
343	Macho Shade channel install	4/03/14	2,012	202	0
344	Building improvements	7/10/14	3,900	260	0
345	Classroom Wall design	7/22/14	1,900	190	0
346	Additional mirrors - Garage	8/08/14	966	97	0
347	Angle iron gutter for garage	9/21/14	1,662	166	0
348	Spam Firewall	2/07/14	2,511	0	0
349	Computer equipment	4/10/14	18,828	0	0
350	Computer equipment	5/16/14	12,475	0	0
351	UTM Total Protect	12/31/14	1,924	0	0
352	Copier	3/07/14	94,523	0	0
353	Furniture & Fixture	6/18/14	2,225	0	0
354	Furniture & Fixture	12/23/14	962	0	0
355	Parking Garage	1/20/14	37,058	950	0
356	Software	4/10/14	1,527	0	0
357	Parking Garage	1/01/15	31,585	810	0
358	Desks	1/16/15	4,095	0	0
359	Computers and Printers	9/09/15	28,299	0	0
360	Desks	5/21/15	6,885	0	0

Asset	Description	Date In Service	Cost	Tax	AMT
361	Sophos SG310 UIM	11/01/17	2,193	0	0
362	15" Apple Macbook Pro	11/07/17	1,858	0	0
363	Access Control Locks	4/19/17	3,666	367	0
364	Endowment wall signage	9/08/17	12,366	1,237	0
365	Boyd wall signage	9/08/17	9,192	920	0
366	Plaques - wall	9/08/17	4,130	413	0
368	Garage gate	5/18/18	28,883	2,888	0
369	New blower motor	5/30/18	2,035	203	0
370	Two fan motors and compressor	6/29/18	4,390	439	0
371	CAP Building - General Construction	5/01/19	345,450	8,858	0
372	CAP Office Construction - DIRTT	5/01/19	507,472	50,747	0
373	CAP Alarm	5/01/19	3,300	330	0
374	Alarm	11/07/19	14,457	1,446	0
375	Endowment Wall Signage	11/07/19	20,800	2,080	0
376	CAP Copier	5/01/19	28,340	5,668	0
377	CAP Mitel Telephone System	5/01/19	34,245	6,849	0
378	Postage Machine	7/01/19	6,915	1,383	0
379	CAP Furniture & Fixtures	5/01/19	186,006	26,572	0
380	CAP Lutron Shades	5/01/19	5,315	759	0
381	CAP Ice Maker	5/01/19	2,482	355	0
382	VSRC Office Furniture	12/31/19	16,983	2,426	0
383	VSRC Tables and Chairs	12/31/19	7,111	1,015	0
384	Land - 801 E. Charleston Blvd.	7/31/20	441,975	0	0
385	Building - 801 E. Charleston Blvd.	7/31/20	662,962	0	0
386	VSRC -Wiring, surveillance and access control	1/03/20	20,677	2,068	0
387	VSRC Alarm	1/16/20	2,200	220	0
388	Water heater	11/30/20	2,350	235	0
389	FLSHC HP Printer	2/15/20	2,745	549	0
390	Thinkpad	6/25/20	2,212	443	0
391	APC (battery backup system) for network	10/15/20	5,447	1,090	0
392	VSRC Mitel Telephone System	1/03/20	22,207	4,442	0
393	Mitel Voice Switch	3/27/20	6,413	1,282	0
394	VSRC Copier	1/10/20	7,863	1,572	0
395	Copier - Reception	2/06/20	7,563	1,512	0
396	Copier - Admin	8/06/20	7,563	1,513	0
397	SHC Acrylic Partitions	11/19/20	1,546	221	0
398	801 E Charleston Architecture	12/31/20	23,400	0	0
399	CAP - Security Screens	5/11/21	13,695	1,370	0
400	VSRC - Hydroxyl Generator	4/01/21	2,037	408	0
401	CAP - Hydroxyl Generator	4/01/21	2,037	408	0
402	Admin - Hydroxyl Generator	4/01/21	2,037	408	0
403	CAP - Copier	10/04/21	7,300	1,460	0
404	CAP - Desks and bookcases for upstairs office	11/04/21	14,294	2,042	0
405	Architect fees	12/31/21	900	0	0
406	New Servers	1/01/22	17,516	3,504	0
407	ACR Mechanical	2/03/22	7,529	753	0
408	Computers	1/07/22	10,541	2,108	0
409	Computer equipment	3/03/22	1,600	320	0
410	Computer equipment	4/08/22	8,467	1,694	0
411	Computer equipment	5/10/22	17,228	3,446	0
412	Computer equipment	6/09/22	17,400	3,480	0
413	Computer equipment	7/07/22	17,234	3,447	0
414	Computer equipment	8/04/22	1,336	268	0
415	Computer equipment	10/07/22	2,072	414	0
416	Office equipment	2/03/22	3,950	790	0
417	Office equipment	4/08/22	1,000	200	0
418	Office equipment	5/10/22	491	98	0
419	Ford Audio Vidoe	5/13/22	39,239	7,848	0
420	Office equipment	9/09/22	139	28	0
421	Office equipment	10/07/22	4,397	879	0
422	Office equipment	11/10/22	450	90	0
423	CAP Guest Chairs	4/01/22	5,290	756	0
424	CIP	12/31/22	85,900	0	0
	Total Other Depreciation		<u>20,501,726</u>	<u>515,548</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>20,501,726</u>	<u>515,548</u>	<u>0</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
	Grand Totals		<u>20,501,726</u>	<u>515,548</u>	<u>0</u>

Form 990	Two Year Comparison Report	2021 & 2022
For calendar year 2022, or tax year beginning _____, ending _____		

Name

Taxpayer Identification Number

Legal Aid Center of Southern Nevada
88-0072562

		2021	2022	Differences
Revenue	1. Contributions, gifts, grants	4,887,117	2,973,361	-1,913,756
	2. Membership dues and assessments			
	3. Government contributions and grants	12,760,445	12,377,752	-382,693
	4. Program service revenue	4,280,513	3,577,072	-703,441
	5. Investment income	658,914	479,616	-179,298
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory		60,772	60,772
	8. Net income or (loss) from fundraising events			
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory			
	11. Other revenue	1,847,900		-1,847,900
	12. Total revenue. Add lines 1 through 11	24,434,889	19,468,573	-4,966,316
Expenses	13. Grants and similar amounts paid			
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	410,436	438,747	28,311
	16. Salaries, other compensation, and employee benefits	14,846,377	16,833,910	1,987,533
	17. Professional fundraising fees			
	18. Other professional fees	259,979	154,060	-105,919
	19. Occupancy, rent, utilities, and maintenance	767,825	719,732	-48,093
	20. Depreciation and Depletion	512,103		-512,103
	21. Other expenses	857,692	1,586,684	728,992
	22. Total expenses. Add lines 13 through 21	17,654,412	19,733,133	2,078,721
	23. Excess or (Deficit). Subtract line 22 from line 12	6,780,477	-264,560	-7,045,037
Other Information	24. Total exempt revenue	24,434,889	19,468,573	-4,966,316
	25. Total unrelated revenue			
	26. Total excludable revenue	6,787,327	4,117,460	-2,669,867
	27. Total assets	66,332,477	63,638,482	-2,693,995
	28. Total liabilities	1,020,742	1,234,359	213,617
	29. Retained earnings	65,311,735	62,404,123	-2,907,612
	30. Number of voting members of governing body	14	16	
	31. Number of independent voting members of governing body	14	16	
32. Number of employees	216	232		
33. Number of volunteers	600	625		

Form 990	Tax Return History	2022
Name Legal Aid Center of Southern Nevada		Employer Identification Number 88-0072562

	2018	2019	2020	2021	2022	2023
Contributions, gifts, grants	22,993,799	19,214,726	16,929,887	17,647,562	15,351,113	
Membership dues						
Program service revenue	256,902	2,320,963	3,309,086	4,280,513	3,577,072	
Capital gain or loss	8,291	14,998	-78,674		60,772	
Investment income	155,560	317,203	323,622	658,914	479,616	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue		8,741	2,691	1,847,900		
Total revenue	23,414,552	21,876,631	20,486,612	24,434,889	19,468,573	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.	587,597	411,277	405,994	410,436	438,747	
Other compensation	9,867,194	11,919,474	14,055,059	14,846,377	16,833,910	
Professional fees	710,088	367,226	202,490	259,979	154,060	
Occupancy costs	423,755	530,716	676,484	767,825	719,732	
Depreciation and depletion	436,183	482,111	517,730	512,103		
Other expenses	700,610	855,707	745,533	857,692	1,586,684	
Total expenses	12,725,427	14,566,511	16,603,290	17,654,412	19,733,133	
Excess or (Deficit)	10,689,125	7,310,120	3,883,322	6,780,477	-264,560	
Total exempt revenue	23,414,552	21,876,631	20,486,612	24,434,889	19,468,573	
Total unrelated revenue						
Total excludable revenue	420,753	2,661,905	3,556,725	6,787,327	4,117,460	
Total Assets	43,385,899	53,473,445	60,274,886	66,332,477	63,638,482	
Total Liabilities	869,777	736,029	2,883,242	1,020,742	1,234,359	
Net Fund Balances	42,516,122	52,737,416	57,391,644	65,311,735	62,404,123	

Form 990T	Tax Return History	2022
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Name Legal Aid Center of Southern Nevada	Employer Identification Number 88-0072562
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* Income shown net of expenses

	2018	2019	2020	2021	2022	2023
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
Total trade or business income.						
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
Interest and Dividend Income	\$ 479,616		14			
Total	<u>\$ 479,616</u>					

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
Other Professional Fees	\$ 119,060	\$ 109,595	\$ 9,060	\$ 405
Total	<u>\$ 119,060</u>	<u>\$ 109,595</u>	<u>\$ 9,060</u>	<u>\$ 405</u>

Federal Statements

Schedule A, Part II, Line 1(e)

<u>Description</u>	<u>Amount</u>
Federal financial assistance	\$ 4,014,565
Clark County Filing Fees	8,363,187
Contributions and grants	<u>2,973,361</u>
Total	<u>\$ 15,351,113</u>

Schedule A, Part II, Line 5 - Excess Gifts

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
Englestad Foundation	\$ 6,819,971	\$ 4,901,344
Total	<u>\$ 6,819,971</u>	<u>\$ 4,901,344</u>

Federal Statements

Schedule A, Part II, Line 8(e)

<u>Description</u>	<u>Amount</u>
Interest and Dividend Income	\$ 479,616
Total	\$ 479,616

Schedule A, Part II, Line 12 - Current year

<u>Description</u>	<u>Amount</u>
Attorney Fees	\$ 3,577,072
Total	\$ 3,577,072