

Department of the Treasury Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For calendar year 2024 or tax year beginning and ending

Name of foundation: UFC FOUNDATION
Employer identification number: 86-1853067
Telephone number: (702) 588-5520
Address: 6650 S TORREY PINES DR, LAS VEGAS, NV 89118
G Check all that apply: Initial return, Final return, Address change
H Check type of organization: Section 501(c)(3) exempt private foundation
I Fair market value of all assets at end of year: \$116,328
J Accounting method: Cash

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12) and Operating and Administrative Expenses (13-27).

For Paperwork Reduction Act Notice, see instructions.

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing	269,579.	116,328.	116,328.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts _____			
	4	Pledges receivable _____			
		Less: allowance for doubtful accounts _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) _____			
		Less: allowance for doubtful accounts _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments - U.S. and state government obligations (attach schedule). .			
	b	Investments - corporate stock (attach schedule)			
	c	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment: basis _____ Less: accumulated depreciation (attach schedule) _____			
12	Investments - mortgage loans				
13	Investments - other (attach schedule)				
14	Land, buildings, and equipment: basis _____ Less: accumulated depreciation (attach schedule) _____				
15	Other assets (describe _____)				
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	269,579.	116,328.	116,328.	
Liabilities	17	Accounts payable and accrued expenses	39,842.	44,125.	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons . .			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe _____ STMT 3)	25,860.	8,545.	
	23	Total liabilities (add lines 17 through 22)	65,702.	52,670.	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30 <input type="checkbox"/>				
	24	Net assets without donor restrictions			
	25	Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30 <input checked="" type="checkbox"/>				
	26	Capital stock, trust principal, or current funds			
	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
	28	Retained earnings, accumulated income, endowment, or other funds . .	203,877.	63,657.	
29	Total net assets or fund balances (see instructions)	203,877.	63,657.		
30	Total liabilities and net assets/fund balances (see instructions)	269,579.	116,327.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	203,877.
2	Enter amount from Part I, line 27a	2	-140,220.
3	Other increases not included in line 2 (itemize) _____	3	
4	Add lines 1, 2, and 3	4	63,657.
5	Decreases not included in line 2 (itemize) _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	63,657.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.				(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8	{ If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 }		3

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)	1	NONE
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	
3	Add lines 1 and 2	3	NONE
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	NONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	NONE
6	Credits/Payments:		
a	2024 estimated tax payments and 2023 overpayment credited to 2024	6a	
b	Exempt foreign organizations - tax withheld at source	6b	NONE
c	Tax paid with application for extension of time to file (Form 8868)	6c	NONE
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	NONE
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	NONE
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be: Credited to 2025 estimated tax Refunded	11	

Part VI-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?
c Did the foundation file Form 1120-POL for this year?
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments?
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?
4b If "Yes," has it filed a tax return on Form 990-T for this year?
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
7 Did the foundation have at least \$5,000 in assets at any time during the year?
8a Enter the states to which the foundation reports or with which it is registered.
8b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G?
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2024 or the tax year beginning in 2024?
10 Did any persons become substantial contributors during the tax year?
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)?
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
14 The books are in care of SHANE KAPRAL Telephone no. 702-588-5520 Located at 6650 S TOREY PINES DR LAS VEGAS, NV ZIP+4 89118
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year.
16 At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Table with columns for question ID, Yes, and No. Rows include questions 1a through 4b regarding disqualifying activities, disaster assistance, and business holdings.

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
5a During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		
8 Is the foundation 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?		X

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 4		NONE	NONE	NONE

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 NONE

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services NONE

Part VIII-A Summary of Direct Charitable Activities

	Expenses
1 NONE	
2	
3	
4	

Part VIII-B Summary of Program-Related Investments (see instructions)

	Amount
1 NONE	
2	
All other program-related investments. See instructions.	
3 NONE	
Total. Add lines 1 through 3	

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	164,433.
c	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	164,433.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	164,433.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	2,466.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	161,967.
6	Minimum investment return. Enter 5% (0.05) of line 5.	6	8,098.

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part IX, line 6.	1	8,098.
2a	Tax on investment income for 2024 from Part V, line 5.	2a	NONE
b	Income tax for 2024. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b.	2c	NONE
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	8,098.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	8,098.
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1.	7	8,098.

Part XI Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	358,490.
b	Program-related investments - total from Part VIII-B	1b	NONE
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	358,490.

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2023	(c) 2023	(d) 2024
1 Distributable amount for 2024 from Part X, line 7				8,098.
2 Undistributed income, if any, as of the end of 2024:				
a Enter amount for 2023 only.			NONE	
b Total for prior years: 20 22 ,20 21 ,20 20				
3 Excess distributions carryover, if any, to 2024:				
a From 2019				
b From 2020				
c From 2021				
d From 2022				59,752.
e From 2023				375,437.
f Total of lines 3a through e	435,189.			
4 Qualifying distributions for 2024 from Part XI, line 4: \$ 358,490.				
a Applied to 2023, but not more than line 2a . . .			NONE	
b Applied to undistributed income of prior years (Election required - see instructions).				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2024 distributable amount.				8,098.
e Remaining amount distributed out of corpus. . .	350,392.			
5 Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	785,581.			
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount - see instructions				
e Undistributed income for 2023. Subtract line 4a from line 2a. Taxable amount - see instructions			NONE	
f Undistributed income for 2024. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2025.				NONE
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2019 not applied on line 5 or line 7 (see instructions) . . .				
9 Excess distributions carryover to 2025. Subtract lines 7 and 8 from line 6a	785,581.			
10 Analysis of line 9:				
a Excess from 2020 . . .				
b Excess from 2021 . . .				
c Excess from 2022 . . .				59,752.
d Excess from 2023 . . .				375,437.
e Excess from 2024 . . .				350,392.

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9) NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2024, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

Table with 5 columns: (a) 2024, (b) 2023, (c) 2022, (d) 2021, (e) Total. Rows include 2a (Adjusted net income), 2b (85% of line 2a), 2c (Qualifying distributions from Part XI), 2d (Amounts included in line 2c not used directly for active conduct of exempt activities), 2e (Qualifying distributions made directly for active conduct of exempt activities), 3 (Alternative tests: Assets, Endowment, Support).

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

N/A

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here [] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

SEE STATEMENT 7

b The form in which applications should be submitted and information and materials they should include:

SEE STATEMENT 8

c Any submission deadlines:

SEE STATEMENT 9

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE STATEMENT 10

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year SEE STATEMENT 11				332,799.
Total				3a 332,799.
b Approved for future payment				
Total				3b

**Schedule B
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

**Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

Name of the organization

Employer identification number

UFC FOUNDATION

86-1853067

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, 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 33 1/3% 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).

Name of organization <p style="text-align: center;">UFC FOUNDATION</p>	Employer identification number <p style="text-align: center;">86-1853067</p>
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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	PRIME HYDRATION LLC 2858 FRANKFORT AVE LOUISVILLE, KY 40206	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	LAS VEGAS ARENA OWNER LLC 112 NORTH CURRY STREET CARSON CITY, NV 89703	\$ 26,700.	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.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

UFC FOUNDATION

Employer identification number

86-1853067

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization <p style="text-align:center;">UFC FOUNDATION</p>	Employer identification number <p style="text-align:center;">86-1853067</p>
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Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ _____
 Use duplicate copies of Part III if additional space is needed.

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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

FORM 990PF, PART I - OTHER INCOME
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DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	ADJUSTED NET INCOME -----
RAFFLE AND FUNDRAISING ACTIVITIES	116,570.	116,570.
TOTALS	116,570. =====	116,570. =====

FORM 990PF, PART I - OTHER EXPENSES
 =====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	CHARITABLE PURPOSES -----
MISCELLANEOUS G&A	5,992.	5,992.
SUBSCRIPTIONS	400.	400.
SECURITY	745.	745.
PUBLIC RELATIONS	2,000.	2,000.
	-----	-----
TOTALS	9,137.	9,137.
	=====	=====

FORM 990PF, PART II - OTHER LIABILITIES

=====

DESCRIPTION -----	ENDING BOOK VALUE -----
CONTRACTOR TAX W/HELD	6,756.
ACCRUED EXPENSES - OTHER	1,789.

TOTALS	8,545.
	=====

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:
LAWRENCE EPSTEIN

ADDRESS:
6650 S TORREY PINES DR

LAS VEGAS, NV 89118

TITLE:
PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

OFFICER NAME:
SHANE KAPRAL

ADDRESS:
6650 S TORREY PINES DR

LAS VEGAS, NV 89118

TITLE:
TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:
FRANK LAMICELLA

ADDRESS:
6650 S TORREY PINES DR

LAS VEGAS, NV 89118

TITLE:
SECRETARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

OFFICER NAME:
CHRIS BELLITTI

ADDRESS:
6650 S TORREY PINES DR

LAS VEGAS, NV 89118

TITLE:
VICE PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:
BRIAN SMITH

ADDRESS:
6650 S TORREY PINES DR

LAS VEGAS, NV 89118

TITLE:
OPERATIONS DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

TOTAL COMPENSATION: NONE
=====

TOTAL CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS: NONE
=====

EXPENSE ACCOUNT AND OTHER ALLOWANCES: NONE
=====

FORM 990PF, PART XIV - NAME, ADDRESS, PHONE AND E-MAIL FOR APPLICATIONS
=====

UFC FOUNDATION
6650 S TORREY PINES DR
LAS VEGAS, NV 89118
702-588-5520

990PF, PART XIV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS
=====

NONE

990PF, PART XIV - SUBMISSION DEADLINES
=====

NONE

990PF, PART XIV - RESTRICTIONS OR LIMITATIONS ON AWARDS
=====

NONE

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
CANDLELIGHTERS CHILDHOOD CANCER FOUNDATION
ADDRESS:
8990 SPANISH RIDGE AVENUE, SUITE 100

LAS VEGAS, NV 89148

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,000.

RECIPIENT NAME:
FBI ACADEMY
ADDRESS:
PO BOX 230684

LAS VEGAS, NV 89105-0684

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,250.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

THE ABILITY CENTER

ADDRESS:

7755 WEST OQUENDO ROAD

LAS VEGAS, NV 89113

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,500.

RECIPIENT NAME:

HENDERSON BENEVOLENT FIREFIGHTERS ASSOCIATION

ADDRESS:

145 PANAMA STREET

HENDERSON, NV 89015

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
CATHOLIC CHARITIES OF SOUTHERN NEVADA
ADDRESS:
1501 LAS VEGAS BLVD.

NORTH LAS VEGAS, NV 89101
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 1,850.

RECIPIENT NAME:
THE FOLDED FLAG FOUNDATION
ADDRESS:
1550 S. PAVILION CENTER DRIVE

LAS VEGAS, NV 89135
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 2,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

THE GENTLEMAN'S LEAGUE

ADDRESS:

6671 S. LAS VEGAS BLVD. STE. 210

LAS VEGAS, NV 89119

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 2,000.

RECIPIENT NAME:

REFUGE FOR WOMEN LAS VEGAS

ADDRESS:

1000 N. GREEN VALLEY PKWY. #440-299

HENDERSON, NV 89074

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 2,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

BEHIND THE BLUE FOUNDATION

ADDRESS:

8461 FARM ROAD, STE. 120-340

LAS VEGAS, NV 89131

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 2,500.

RECIPIENT NAME:

KLINE VETERANS FUNDS

ADDRESS:

7881 W. CHARLESTON BLVD. STE. 165

LAS VEGAS, NV 89117

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 2,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
ROSEMAN UNIVERSITY MEDIAL CENTER
ADDRESS:
11 SUNSET WAY

HENDERSON, NV 89014
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 2,500.

RECIPIENT NAME:
WISE WOMEN IN SPORTS
ADDRESS:
848 N. RAINBOW BLVD. STE. 1552

LAS VEGAS, NV 89107
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 2,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

VEGAS ELITE BASKETBALL

ADDRESS:

4141 MEADOWS LN

LAS VEGAS, NV 89107

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 2,500.

RECIPIENT NAME:

MAXX CROSBY FOUNDATION

ADDRESS:

2239 CHATSWORTH CT.

HENDERSON, NV 89074

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 3,300.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
SOUTHERN NEVADA SPORTS HALL OF FAME
ADDRESS:
9030 W. SAHARA AVE. STE. 457

LAS VEGAS, NV 89117

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 4,000.

RECIPIENT NAME:
AMERICAN CANCER SOCIETY OF SOUTHERN NEVADA
ADDRESS:
PO BOX 231359

LAS VEGAS, NV 89105

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

BABY'S BOUNTY

ADDRESS:

4495 WEST RENO AVENUE

LAS VEGAS, NV 89118

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

RECIPIENT NAME:

BALLER DREAM FOUNDATION

ADDRESS:

PO BOX 26358

SCOTTSDALE, AZ 85255-6358

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

BOYS & GIRLS CLUB OF SOUTHERN NEVADA

ADDRESS:

10900 SOUTHERN HIGHLANDS PKWY.

LAS VEGAS, NV 89141

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

RECIPIENT NAME:

CASA DE LUZ

ADDRESS:

PO BOX 3188

SAN DIEGO, CA 92163

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
CHILDREN'S FOUNDATION OF LAS VEGAS
ADDRESS:
4045 S. BUFFALO DR.

LAS VEGAS, NV 89147
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

RECIPIENT NAME:
LVMPD FOUNDATION
ADDRESS:
110 N CITY PKWY SUITE 420

LAS VEGAS, NV 89106
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
FRIENDSHIP CIRCLE OF LAS VEGAS
ADDRESS:
1261 S. ARVILLE STREET

LAS VEGAS, NV 89102
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

RECIPIENT NAME:
LAS VEGAS SUN
ADDRESS:
PO BOX 94018

LAS VEGAS, NV 89193
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

LAW ENFORCEMENT ASSISTANCE FUND

ADDRESS:

9330 WEST LAKE MEAD BLVD. #200

LAS VEGAS, NV 89134-8345

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

RECIPIENT NAME:

PROJECT REAL NEVADA

ADDRESS:

7175 BERMUDA RD

LAS VEGAS, NV 89119

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
RONALD MCDONALD HOUSE OF GREATER LAS VEGAS
ADDRESS:
2323 POTOSI ST.

LAS VEGAS, NV 89146
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

RECIPIENT NAME:
TEACH FOR AMERICA NEVADA
ADDRESS:
701 E. BRIDGER AVE. UNIT 750

LAS VEGAS, NV 89101
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
NEVADA WRESTLING CHAMPIONSHIPS
ADDRESS:
1188 VICTORIAN PLAZA CIRCLE

SPARKS, NV 89431
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 6,000.

RECIPIENT NAME:
NOAH'S ANIMAL HOUSE
ADDRESS:
1 W. OWENS ST.
NORTH LAS VEGAS, NV 89030

RELATIONSHIP:
NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 6,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
SILVER STATE EQUALITY
ADDRESS:
4780 WEST ANN ROAD #5357

NORTH LAS VEGAS, NV 89031
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 6,000.

RECIPIENT NAME:
UNLV FOUNDATION
ADDRESS:
PO BOX 451006
4504 S. MARYLAND PKWY.
LAS VEGAS, NV 89154-1006
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 9,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

VEGAS PET RESCUE

ADDRESS:

10040 W. CHEYENNE AVE. APT. 170-157

LAS VEGAS, NV 89129

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 9,899.

RECIPIENT NAME:

RAIDERS FOUNDATION

ADDRESS:

1475 RAIDERS WAY

HENDERSON, NV 89052

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
THREE SQUARE FOODBANK
ADDRESS:
4190 N. PECOS ROAD

LAS VEGAS, NV 89115
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:
COMMUNITIES IN SCHOOLS NEVADA
ADDRESS:
2080 E. FLAMINGO RD. STE. 225

LAS VEGAS, NV 89119
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

CROHN'S AND COLITIS FOUNDATION OF SOUTHERN NEVADA

ADDRESS:

7320 S. RAINBOW BLVD. #102-250

LAS VEGAS, NV 89139

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:

GRANT-A-GIFT AUTISM FOUNDATION

ADDRESS:

630 S. RANCHO DRIVE SUITE A

LAS VEGAS, NV 89106

RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
HELP OF SOUTHERN NEVADA
ADDRESS:
1640 E. FLAMINGO RD. #100

LAS VEGAS, NV 89119
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:
LEUKEMIA & LYMPHOMA SOCIETY OF SOUTHERN NEVADA
ADDRESS:
6280 S. VALLEY VIEW BLVD., STE. 342

LAS VEGAS, NV 89118
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
SUPERHEROES 4 SULLY FOUNDATION
ADDRESS:
8367 W. FLAMINGO RD

LAS VEGAS, NV 89147
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:
VEGAS GOLDEN KNIGHTS FOUNDATION
ADDRESS:
1550 S. PAVILION CENTER DRIVE

LAS VEGAS, NV 89135
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 12,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
TITLE IX FOUNDATION
ADDRESS:
5871 MOUNTAIN VISTA STREET

LAS VEGAS, NV 89120
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 15,000.

RECIPIENT NAME:
ZO'S BRAVEHEARTS FOUNDATION
ADDRESS:
8930 WEST TROPICANA AVE. STE. 10

LAS VEGAS, NV 89147
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 15,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
FIGHTING FOR THE FUTURE FOUNDATION
ADDRESS:
3071 S. VALLEY VIEWS. BLVD.

LAS VEGAS, NV 89102-7889
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:
MAKE-A-WISH OF SOUTHERN NEVADA
ADDRESS:
9950 COVINGTON CROSS DR.

LAS VEGAS, NV 89144
RELATIONSHIP:

NO RELATIONSHIP

PURPOSE OF GRANT:

UNRESTRICTED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 50,000.

TOTAL GRANTS PAID: 332,799.
=====

FORM 990-PF, PART XV-A - ANALYSIS OF OTHER REVENUE

=====

DESCRIPTION -----	BUSINESS CODE ----	AMOUNT -----	EXCLUSION CODE ----	AMOUNT -----	RELATED OR EXEMPT FUNCTION INCOME -----
RAFFLE AND FUNDRAISING ACTIVITIES					116,570.
TOTALS		-----		-----	116,570.
		=====		=====	=====