



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
 (775) 684-5708
 Website: www.nvsos.gov
www.nvsilverflume.gov

Instructions for Initial List/Annual List and State Business License Application

ATTENTION: You may now file your Initial/Annual List and State Business License online at www.nvsilverflume.gov

IMPORTANT: READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORM.

TYPE or PRINT the following information on the Annual List:

1. The **NAME** and **ENTITY NUMBER** of the entity **EXACTLY** as it is registered with this office.
2. The **FILING PERIOD** is the month and year of filing TO the month and year 12 months from that date. Example: if the entity date was 1/12/99 the filing period would be 1/1999 to 1/2000.
3. The names and addresses as required on the list should be entered in the boxes provided on the form.
4. If qualified for a statutory exemption from the State Business License, enter the applicable code in the area provided. If claiming exemption, a Declaration of Eligibility for State Business License Exemption must accompany annual list. Entities claiming exemption cannot file online.
5. The **SIGNATURE**, including signer's title and date signed **MUST** be included in the areas provided at the bottom of the form. Signature may be that of an officer or equivalent or that of another person authorized by the entity to sign the list.
6. Completed **FORM, FEES and applicable PENALTIES** must be returned to the Secretary of State. Pursuant to NRS 225.085, all Initial and Annual Lists must be in the care, custody and control of the Secretary of State by the close of the business on the due date. Lists received after the due date will be returned unfiled, and will require any associated fees and penalties as a result of being late. Trackable delivery methods such as Express Mail, Federal Express, UPS Overnight may be acceptable if the package was guaranteed to be delivered on or before the due date yet failed to be timely delivered.

FILING FEES: The annual filing fee for corporations will be based on the amount represented by the total number of shares provided for in the articles. See fee schedule or contact our office. Annual lists for nonprofit corporations without shares are \$25.00. Nonprofit corporations and corporations sole are not required to maintain a State Business License or pay the additional fee.

ADDITIONAL FORMS may be obtained on our website at www.nvsos.gov or by calling 775-684-5708.

FILE STAMPED COPIES: To receive one file stamped copy, please mark the appropriate check box on the list. Additional copies require \$2.00 per page and appropriate order instructions.

CERTIFIED COPIES: To order a certified copy, enclose an additional \$30.00 and appropriate instructions. A copy fee of \$2.00 per page is required for each copy generated when ordering 2 or more certified copies.

EXPEDITE FEE: Filing may be expedited for an additional \$125.00 fee for 24-hour service, \$500.00 for 2-hour service and \$1000.00 for 1-hour service.

Filing may be submitted at the office of the Secretary of State or by mail at the following addresses:

MAIN OFFICE:
Regular and Expedited Filings

Secretary of State
 Status Division
 202 North Carson Street
 Carson City NV 89701-4201
 Phone: 775-684-5708
 Fax: 775-684-7123

SATELLITE OFFICE:
Expedited Filings Only

Secretary of State – Las Vegas
 Commercial Recordings Division
 555 East Washington Ave, Suite 5200
 Las Vegas NV 89101
 Phone: 702-486-2880
 Fax: 702-486-2888

Pd w/ck 1045 2/2/15

(NONPROFIT) INITIAL/ANNUAL LIST OF OFFICERS AND DIRECTORS OF:

ENTITY NUMBER

FRIENDS OF THE BELMONT COURTHOUSE

E0063012011-3

NAME OF CORPORATION

FOR THE FILING PERIOD OF JAN2014 TO JAN 2016



100204

USE BLACK INK ONLY - DO NOT HIGHLIGHT

****YOU MAY NOW FILE THIS LIST ONLINE AT www.nvsilverflume.gov****

Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. If there are additional officers, attach a list of them to this form. An Officer or other authorized signer must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. Return the completed form with the \$25.00 filing fee, if no capitalization. A \$50.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
3. Make your check payable to the Secretary of State. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
4. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.
5. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.

ABOVE SPACE IS FOR OFFICE USE ONLY

FILING FEE: \$25.00 (IF NO CAPITALIZATION) LATE PENALTY: \$50.00 (if filing late)

Charitable Solicitation - For nonprofit entities formed under NRS Chapters 80 and 82

~ If the nonprofit corporation intends to solicit charitable/tax deductible contributions a "Charitable Solicitation Registration Statement" form is required to be attached. If the answer is no, there is no additional form required.

~ If the nonprofit corporation intends to solicit charitable/tax deductible contributions but meets the exemption requirements, an "Exemption From Charitable Solicitation Registration Statement" form is required to be attached.

~ Failure to include the required statement form will result in rejection of the filing and could result in late fees.

Does Corporation intend to solicit charitable/tax deductible contributions? Yes* No

*If yes, registration statement is required as of January 1, 2014.

Corporation claims exemption pursuant to NRS 82.392(7)(b) or is recognized as a church under Internal Revenue Code 501(c)(3).

Exempt from filing -

If checked, Exemption from Charitable Solicitation Registration Statement form is required as of January, 1, 2014.

For nonprofit entities formed under NRS Chapters 80 and 81: entities without 501(c) nonprofit designation are required to maintain a state business license, the fee is \$200.00. Those claiming an exemption under 501(c) designation must indicate by checking box below and submit Declaration of Eligibility form. Failure to attach the required notarized Declaration of Eligibility will result in a rejection, which could result in late fees.

Pursuant to NRS Chapter 76, this entity is a 501(c) nonprofit entity and is exempt from the business license fee. Exemption code 002

NAME	TITLE(S)	CITY	STATE	ZIP CODE
Donna Motis	PRESIDENT (OR EQUIVALENT OF)	Tonopah	NV	89049
Joni Bastley	SECRETARY (OR EQUIVALENT OF)	Tonopah	NV	89049
Donna Motis	TREASURER (OR EQUIVALENT OF)	Tonopah	NV	89049
	DIRECTOR			

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Donna Motis

Signature of Officer or Other Authorized Signature

Title PRESIDENT

Date 1/20/2015



BARBARA K. CEGAVSKE
 Secretary of State
 202 North Carson Street
 Carson City, Nevada 89701-4201
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ATTACH FORM ONLY IF CLAIMING A
 STATE BUSINESS LICENSE EXEMPTION



270104

**Declaration of Eligibility for State
 Business License Exemption**
 (This form must be notarized)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

This form must accompany the List of Officers only if claiming exemption from the State Business License. Please provide the information requested only for the exemption for which you claim eligibility. Failure to provide the requested information or to notarize this document will result in a rejected filing, which could result in late fees.

Entity Name: Friends of the Belmont Courthouse

NV Business
 I.D. Number: E0063012011-3

001 - Governmental Entity

This entity is an incorporated or unincorporated agency or instrumentality of the United States government or any state government; a corporation wholly owned by the United States government; or county, city, district, or other political subdivision of a state.

002 - 501(c) Nonprofit Entity

This entity is qualified as a 501(c) Nonprofit Entity pursuant to Title 26 U.S.C. Section 501(c). Please provide the Internal Revenue Service (IRS) issued Federal Employer Identification Number (FEIN) 45-1652078

005 - Motion Picture Company

Is the primary purpose of this entity to create or produce motion pictures, as defined in NRS 231.020? Yes No

If yes to above question, does the creation or production of motion pictures occur in Nevada? Yes No

If so, please provide Nevada Film Office registration number.

006 - NRS 680B.020 Insurance Company

Are the activities of this entity regulated through a license or certificate of authority granted by the Division of Insurance pursuant to NRS Title 57?

Yes No

If yes, provide license or certificate of authority number

I declare under penalty of perjury, as a representative authorized by statute to file on behalf of the above named entity, that the declarations indicated above are true and correct.

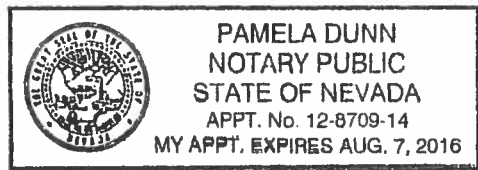
X Donna Motis President 1/20/2015
 Signature Title Date

State of Nevada County of Nye

Subscribed and sworn to before me the 20 of Jan 20 15

by Donna Motis
 (Print name of Signer)

Notary Signature Pamela Dunn





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280102

Charitable Solicitation Registration Statement

(PURSUANT TO NRS CHAPTER 82)

Required for any corporation that intends to solicit charitable/tax deductible contributions. To be filed with Initial/Annual List Forms.

USE BLACK INK ONLY - DO NOT HIGHLIGHT

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1. Names of Nonprofit Corporation: (please complete items a thru c; attach additional page(s) if necessary)	<p>a) Name of nonprofit entity as filed with the Secretary of State's office: Friends of the Belmont Courthouse</p> <p>b) Exact name of nonprofit corporation as registered with the Internal Revenue Service, if different from that registered with the Secretary of State: Friends of the Belmont Courthouse</p> <p>c) Name or names under which nonprofit corporation may or intends to solicit charitable contributions: Friends of the Belmont Courthouse</p>
2. Web Address: (optional *)	*will be listed on public entity search
3. USA PATRIOT ACT certification: (optional)	<p><input checked="" type="checkbox"/> Check here to accept the following certification.</p> <p><small>In compliance with the Uniting and Strengthening America by Providing Appropriate Tools Required to Intercept and Obstruct Terrorism (USA PATRIOT) Act of 2001 and other counterterrorism laws, I hereby certify on behalf of the herein named entity that all funds and donations will be used in compliance with all United States of America anti-terrorist financing and asset control laws, statutes and executive orders.</small></p>
4. Places of Business: (please complete items a and b; attach additional page(s) if necessary)	<p>a) Address and telephone number of the principal place of business of the nonprofit corporation: 775-482-3968 <div style="display: flex; justify-content: space-between;"> 456 Occidental Drive Tonopah NV 89049 USA </div> <small>Address City State Zip Code Country</small></p> <p>b) Address and telephone number of any office in this state OR if none, name, address and telephone number of custodian of its financial records: <div style="display: flex; justify-content: space-between;"> P.O. Box 705 Tonopah NV 89049 USA </div> <small>Address City State Zip Code Country</small> Name of Custodian: Donna Motis <div style="display: flex; justify-content: flex-end;"> 775-482-3968 <small>Telephone Number</small> </div> </p>
5. Exempt Status and Federal Tax ID:	<p>Federal tax exempt status: 501(C)(3) EIN - Federal Tax ID: 45-1652078</p>
6. Names and Addresses of Executive Personnel: (attach additional page(s) if necessary)	<p>Donna Motis President/Treasurer <small>Name Title</small> <div style="display: flex; justify-content: space-between;"> P.O. Box 705 Tonopah NV 89049 USA </div> <small>Address City State Zip Code Country</small></p>
7. Fiscal Year:	<p>Day and month of end of fiscal year of the nonprofit corporation: Day: 31 Month: December</p>
8. Financial Information from IRS Form 990, 990EZ or if no Form 990, a good faith estimate for most recent fiscal year:	<p><input type="checkbox"/> Check here if you file Form 990N or have not filed a Form 990 or 990EZ. If checked, please provide a good faith estimate for its current fiscal year. All others please provide the information from Form 990 or 990EZ for the most recent fiscal year.</p> <p>Total Revenue (line 12, Form 990; line 9, Form 990EZ)..... 54,448.</p> <p>Total Expenses (line 18, Form 990; line 17, Form 990EZ)..... 29,424.</p> <p>Revenue less Expenses (line 19, Form 990; line 18, Form 990EZ)..... 25,024.</p> <p>Total Assets (line 20, Form 990; line 25, Form 990EZ).....</p> <p>Total Liabilities (line 21, Form 990; line 26, Form 990EZ).....</p> <p>Net Assets or Fund Balances (line 22, Form 990; line 27, Form 990EZ).....</p>
9. Signature: (must be signed by an officer of the nonprofit corporation)	<p>I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.</p> <p><u>X Donna Motis</u> President 1/20/2015 <small>Officer Signature Title Date</small></p>