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LOURDESEND 01/11/2010 6 52 PM

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2008
Open to Public Inspection

Internal Revenue	Service The organization may have to use a copy of this return to satisfy	state reporting require	ments.	Inspection
A For the 200		0/09		
B Check if applica		OOL	D Employ	er identification number
Address change	e label or ENDOWMENT FUND		J	
Name change	print or Doing Business As		47-0	<u>0661406</u>
Initial return	type. Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telepho	ne number
==	See 412 SECOND AVENUE		402-	<u>-87</u> 3-6154
Termination	Instruc- City or town, state or country, and ZIP + 4		G Gross receip	ts \$ 498,07
Amended return	n tions. NEBRASKA CITY NE 68410	=	j	
Application pen	ding F Name and address of principal officer		H(a) Is this a	group return for
			affiliates	
			H(b) Are all at included	
			If "No," a	ittach a list (see instructions)
I Tax-exempt			_	
J Website:			H(c) Group ex	cemption number
Type of organiz		L Year of formation	N	State of legal domicile
Part I	Summary			
1 Brief	ly describe the organization's mission or most significant activities:			
p) P)	ROVIDE INCOME FOR PAROCHIAL SCHOOL			
Activities & Governance & Activities & Governance & Gover				
Ĕ			ļ	
2 Chec	ck this box 🕨 🔲 if the organization discontinued its operations or disposed of more	train 25% of its assets		
ა <mark>ნ</mark> 3 Num	ber of voting members of the governing body (Part VI, line 1a)	၂၇	3	5
<u>ខ្ល</u> 4 Num	ber of independent voting members of the governing body (Part VI, line	2 1 2010 SO-SX	4	5
5 Total	I number of employees (Part V, line 2a)	\$ 4 KUID 13	5	0
달 6 Total	I number of volunteers (estimate if necessary)	<u> </u>	6	5
7a Total	I gross unrelated business revenue from Part VIII, line 12, column (C) UGL	DEN, UT	7a	
b Netu	unrelated business taxable income from Form 990-T, line 34		7b	
		Prior Y		Current Year
⊕ 8 Cont	ributions and grants (Part VIII, line 1h)	3	3,506	41,37
를 9 Prog	ram service revenue (Part VIII, line 2g)			···
9 Prog	stment income (Part VIII, column (A), lines 3, 4, and 7d)	24	4,427	26,18
11 Othe	r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
	revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		7,933	67 , 55
13 Gran	its and similar amounts paid (Part IX, column (A), lines 1-3)	13	0,500	115,45
14 Bene	efits paid to or for members (Part IX, column (A), line 4)			
a I	ries, other compensation, employee benefits (Part IX, column (A), lines 5–10)			
ខ្លុំ 16a Profe	essional fundraising fees (Part IX, column (A), line 11e)			
b Total	fundraising expenses (Part IX, column (D), line 25)			
17 0010	r expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		8,139	16,62
18 Total	expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,639	132,07
	enue less expenses Subtract line 18 from line 12		9,294	-64,51
200		Beginning		End of Year
<u>8.9</u>	assets (Part X, line 16)	2,54	5,939	2,479,67
5 21	liabilities (Part X, line 26)		2,350	- 450 65
	assets or fund balances. Subtract line 21 from line 20		3,589	2,479,67
Part II	Signature Block			
	Under penalties of perjury, I declare that I have examined this return, including accompanying scherand belief, it is true, correct, and complete, Declaration of preparary (other than officer) is based on a			
	and belief, it is true, correct, and complete Decidination of property (office trial officer) is based on a	as information of which pre	· . / ·	_
Sign	Command McCare	_ 	<u>IX</u> G	1-15-10
Here	Signature of officer		Date	
Sign Here	Fr. Michael G. Mc Cabe			
	Type or print name and title		······································	
	Preparer's Da		if _	Preparer's identifying number (see instructions)
		1/11/10 self-	yed ▶ ∐	P00281267
reparer's	VANDERVEEN & GORACKE LLC		EIN	47-082236
Jse Only	Firm's name (or yours of self-employed), P.O. BOX 39 1720 S. 11TH STR	EET	Phone	
	address, and ZIP+4 NEBRASKA CITY, NE 68410-0039			402-873-602
fourthe IDS dis	scuss this return with the preparer shown above? (see instructions)		110	Yes N
iav uie iKS dis	ocuss uns return with the preparer snown above? (see instructions)			res

	LOURDES CENTRAL I		0661406	Page
		ice Accomplishments (see instruction	ns)	
	nbe the organization's mission: INCOME FOR PAROC	HINI SCHOOL		
FROVIDE	income for timoc	IIIAH BCIIOOH		
			77	
2 Did the organ	nization undertake any significant p	rogram services during the year which were not	isted on	
· ·	m 990 or 990-EZ?			Yes X No
	cribe these new services on Sched			
B Did the organ services?	inization cease conducting, or make	significant changes in how it conducts, any prog	ram	
	cribe these changes on Schedule C).		∐ Yes X N
		each of the organization's three largest program	services by expenses.	
Section 501((c)(3) and 501(c)(4) organizations a	nd section 4947(a)(1) trusts are required to report	t the amount of grants and	
allocations to	o others, the total expenses, and re	venue, if any, for each program service reported.		
PAYMENTS	CENTRAL HIGH SCH	OOL, NEBRASKA CITY, NE (IN DEFRAYING COSTS OF E	115,450)(Revenue \$ 58410 DUCATION	
b (Code:) (Expenses \$	including grants of \$) (Revenue \$	
c (Code:) (Expenses \$	including grants of \$) (Revenue \$	
d Other				
d Other progra (Expenses	ım services. (Describe in Schedule \$ incl		(Revenue \$)

1.4	artive Checkhat of Required Schedules			
		۲	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3_	ļ	<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
_	Schedule C, Part II	4	ļ	<u>X</u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	 	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
_	Schedule D, Part I	6	L	<u>X</u> _
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"		1	
	complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11		<u>X</u>
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			••
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			**
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	١		3.5
4 -	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	77	<u>X</u>
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			v
	Schedule J	23		<u>X</u>
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? If "Yes," answer questions			v
	24b–24d and complete Schedule K. If "No," go to question 25.	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	١.,		
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			v
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	\vdash	<u>X</u>
þ	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			v
	person from a prior year? If "Yes," complete Schedule L, Part I	25b	-	<u>X</u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			v
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			v
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<u>X</u>

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			ĺ
	Part IV .	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		Х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	_30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
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? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part			
	VI	37		X

Form **990** (2008)

1a Enter the number reported in Box 3 of Form 1090, Annual Summary and Transmettal of Up. 1	Pe	iff V Statements Regarding Other IRS Filings and Tax Compliance		 _	_		
U.S. Information Returns. Enter -0- If not applicable □ Dit the crognozation comply with backup withholding rules for reportable payments to vendors and reportable gaming (pamiling) withing to prote winners? □ Enter the number of amphyees reported on Form W-3. Transmittal of Wage and Tax Statements, fleet of the calendar year ending with or within the year covered by this return □ If all least one is reported on fine 2a. did the organization file all required identi employment tax returns? Note. If the sum of lines 1s and 2 as greater than 250, you may be required to e-file this return. (see instructions) □ If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. □ If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. □ If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. □ If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. □ If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. □ If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. □ If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. □ If the organization is not the property of years of the organization of the organization have an interest in, or a signature or other authority over, a financial account in a foregro country. □ If the organization organization and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. □ If the organization and the property of the organization that it was or is a party to a prohibited tax shelter transaction? □ If the organization and the organization interest in organization and expense statement that such contributions or grist the organization set of t	4_	False the number reported in Pay 2 of Farm 1000. Assure Ourses and Taylor Maller				Yes	_No
Enter the number of Forms W-20 included in his 1s Enter -0-18 rot applicable 10 0 1 1 1 1 1 1 1	та		4.	0			
bit the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (pamiling) entire vite prize withors? 25 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Sistements, lief of the Calendar year ending with or within the year covered by this return. 26 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return, (see instructions). 37 If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. 38 If the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. 39 If "Yes," has a fill did Form 990-T for this year? If "No," provide an explanation in Schedule O. 30 If "Yes," has the file of Form 990-T for this year? If "No," provide an explanation in Schedule O. 30 If "Yes," and the did a Form 990-T for this year? If "No," provide an explanation in Schedule O. 30 If "Yes," and the did a Form 990-T for this year? If "No," provide an explanation in Schedule O. 31 If yes, a supplication of the foreign country. 32 If yes, a supplication of the foreign country. 33 If yes, a supplication of the foreign country. 34 If yes, a supplication of the foreign country. 35 If yes, a supplication of the foreign country. 36 If yes, a supplication of the foreign country. 36 If yes, a supplication of the foreign country. 39 If yes, a supplication of year year year year year. 30 If yes, a supplication of year year year year year. 30 If yes, a supplication of year year year year year. 31 If yes, a supplication year year year year year. 32 If year year year year year year year year	h						
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2a Enter the number of employees reported on Form W-3, Transmitted of Wage and Tax Statements, life for the celerator year anding with or within the year covered by this return by If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return, (see instructions) about the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. by If "Yes," has a filed a Form 990-17 for this year? If "No," provide an explanation in Schedule O At any film during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; a foreign country (auch as a bank account, securities account, or other financial accounts and film requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. by If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. by If "Yes," and and Accounts. by If yes, and the organization in the foreign country: See Did any textible party notify the organization that It was or is a party to a prohibited tax shelter transaction? by If yes, to question Sao or Sb, did the organization the Form 8886-1, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? c) If "Yes," and the organization shelt were not tax deductable? d) If "Yes," and the organization include with every solicitation an express sistement that such contributions or gifts were not tax deductable? To Organizations that may receive deductible contributions under section 170(c). b) If yes, and the organization notify the donor of the value of the goods or services provided? To Under the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To Under the org	•		abic		10		v
Statements, field for the calendar year ending with or within the year covered by this return. Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a X If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a X If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) By If Yes, shall filed a Form 990-T for this year? If TNo," provide an explanation in Schedule O By If Yes, shall filed a Form 990-T for this year? If TNo," provide an explanation in Schedule O By If Yes, shall filed a Form 990-T for this year? If TNo," provide an explanation in Schedule O By If Yes, shall filed a Form 990-T for this year? If TNO," provide an explanation in Schedule O By If Yes, shall filed a Form 990-T for this year? If TNO," provide an explanation in Schedule O By If Yes, enter the name of the foreign country (switch as a bank account, sourties account, or other financial accounts. By If Yes, shall filed a Form acceptance and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. By If Yes, shall penty norify the organization that it was or is a party to a prohibited tax sheller transaction? By If Yes, the penty norify the organization that it was or is a party to a prohibited tax sheller transaction? By If Yes, the the organization file is that the were not tax deductible? By If Yes, the organization solid we organization that it was or is party to a prohibited tax sheller transaction? By If Yes, the organization solid we combination that were not tax deductible? By If Yes, the organization solid we combinate that were not tax deductible? By If Yes, the organization s	2a				10		
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Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3 If "Fires," has it filled a Form 990-T for this year? If "No," provide an explanation in Schedule O 3 If "Fires," has it filled a Form 990-T for this year? If "No," provide an explanation in Schedule O 3 If "Fires," has it filled a Form 990-T for this year? If "No," provide an explanation in Schedule O 3 If "Fires," that it filled a Form 990-T for this year? If "No," provide an explanation in Schedule O 3 If "Fires," either the name of the foreign country. ▶ 3 If "Yes," either the name of the foreign country. ▶ 3 If "Yes," either the name of the foreign country. ▶ 3 If "Yes," either the name of the foreign country. ▶ 3 If "Yes," or yeaston so of So, did the organization that it was or is a party to a prohibited tax shelter transaction? 4 If "Yes," or yeaston Sa or So, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 If "Yes," odd the organization shelt art year on tax deductable? 5 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductable? 5 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductable? 6 If "Yes," of the organization provide goods or services mechange for any quid pro quo contribution of more than \$75? 7 If yes," of the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7 If yes," of the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7 If yes, "Indicate the number of Forms 8282 filed during the year. 5 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was requir	b				2 _b		
3a		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see					
this return? All 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) (such as a bank account, securities account, or other financial account) (such as a bank account, securities account, or other financial account) (such as a bank account, securities account, or other financial account) (such as a bank account, securities account, or other financial account) (such as a bank account, securities account, or other financial account) (such as a bank account, securities account, or other financial accounts) (such as a bank account, securities account, or other financial accounts) (such as a such account) (such a		instructions)					
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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		•	11b				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a	•	41?		12a		
	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Form 990 (2008) LOURDES CENTRAL HIGH SCHOOL 47-0661406 Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions. 1a Enter the number of voting members of the governing body Enter the number of voting members that are independent 5 b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 5 6 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members 7a of the governing body? 7a Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a b Each committee with authority to act on behalf of the governing body? X 8b 9a Does the organization have local chapters, branches, or affiliates? 9a If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 9b 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 Х 10 11 Is there any officer, director or 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 in Schedule O Х Section B. Policies Yes No Does the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c 13 Does the organization have a written whistleblower policy? 13 Does the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? 15a Х Other officers or key employees of the organization? 15b Describe the process in Schedule O. (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a X with a taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply Another's website X Upon request Own website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the VANDERVEEN & GORACKE, LLC 1720 S. 11TH STREET organization:

402-873-6022

68410

NEBRASKA CITY

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if the or	rganization did not compen	sate	any o	office	er, dı	recto	r, tru	istee, or key employee		
(A) Name and Title	(B) Average	Posi	tion (checl	C) call ti	hat ap	ply)	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
DEROY HARSHM	AN	1,,								
PRESIDENT MIKE HENG		Х		├		├	┝	0	0	0
VICE PRESIDE		x						o	0	0
LEO HENG										
BOARDMEMBER		X						0	0	0
FR MICHAEL M	CCABE	١								
SEC/TRES		X		_				0	0	. 0
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			DES CENTRA								47-066				F	Page 8
.Part	VII Secti	ion A.	Officers, Directors,	, Trust	tees	, Ke	y En	plo	yees	and	d Highest Compensated E	mployees (continued)				
Ņ	(A) lame and title		(B) Average				check	C) all ti	nat ap		(D) Reportable	(E) Reportable	I	(F) Estima		
	•		hours per week		Individi or direc	Instituti	Officer	Key en	Highes	Former	compensation from the	compensation from related		amoun othe	er	
					Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee		organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	OI a	from to rganiza and rela rganiza	the ation ated	
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				-												
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		-														
1b To	otal									<u> </u>						
2 To			luals (including thos	e in 1a	a) wh	no re	ceive	ed m	ore t	han	\$100,000 in reportable con	pensation from the				
										loye	e, or highest compensated				Yes	No
4 Fc	or any individu	al liste		um of	repo	ortab	le co	mpe	ensat		and other compensation from complete Schedule J for su		-	3		X
ind 5 Di	dividual d any person	listed o	on line 1a receive or	accru	е со	mpe	nsatı	on fi	rom a	iny ι	unrelated organization for			5		X
	n B. Independ		ne organization? If " ontractors	res, c	ЮПІ	лече	SCIII	euui	9 3 10	ı Su	cii persoii					
			e organization.		sate	d inc	lepe	nder	nt cor	trac	tors that received more tha				(C)	
			(A) Name and business addre	SS	_	-	_	-			Descrip	(B) tion of services		<u>Co</u>	(C) mpensa	tion
	_ ,															
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	- · · - · <u>- · · · ·</u>															
			endent contractors (e organization ►	includi	ing t	hose	in 1) wh	o rec	eive	ed more than \$100,000 in			0		
DAA														Com	990	12008

P	<u>irt V</u>	til Stater	nent of Rev	enue						
	•	3					(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
20 00	1a	Federated car	nnaigns	1a		***************************************		revenue	,	512, 513, or 514
and Lund	h	Membership d		1b						
声	ء ا	Fundraising ev		1c						
ifs ra	ء ا	_		1			•			
2.5	u	Related organ		1d						
sir	e	Government grants		1e			ŀ			
PE	T	All other contribution and similar amounts	ns, gitts, grants, s not included above			41 252				
풀				1f		41,370				
글	g		ns included in lines 1	a-1f \$						
	n	Total. Add line	es 1a-1f				41,370	***************************************		
Program Service Revenue Contributions, gifts, grants and other similar amounts						Busn. Code				
eve	2a									
	b									
Σ̈́	С									
Se	d									
гап	е									
ō	f	All other progr		enue						
<u>п</u>		Total. Add line								
	3		ome (including	dividen	ds, interes	t, and				
		other similar a					137,555	137,555		
	4		vestment of tax	x-exemp	t bond pro	ceeds				
	5	Royalties							***************************************	
			(ı) Real		(II) P	ersonal				
	6a	Gross Rents								
	b	Less rental exps								
	С	Rental inc or (loss)								
		Net rental inco Gross amount from			1					
		sales of assets	(ı) Secuntı		(11)	Other	!			
		other than inventory	319	087	<u> </u>	65				
	þ	Less cost or other								
		basis & sales exps	_	,524	ļ					
		Gain or (loss)		,437	<u> </u>	65	:			
ı		Net gain or (los	•	1		<u> </u>	-111,372	-111,372		
	8a	Gross income fro	om fundraising eve	ents						
nue		(not including \$								
Š			eported on line 1d	;)						
<u>"</u>		See Part IV, line		а						
Other Reven		Less: direct ex	•	b		_				
0		Net income or		- 1	events	<u> </u>				
	9a	Gross income fro								
		See Part IV, line		a						
		Less direct ex	•	. b						
ļ		Net income or		ווחg acti 1	vities	<u> </u>				
1	TUA	Gross sales of								
	_	returns and alle		a			-			
		Less: cost of g		b						
ł	C	Net income or	ellaneous Revenu	_	entory	Busn. Code				
ŀ	11a	WIISC				Dusii. Code		1		
	b					<u> </u>				
	q	All other reven	ш							
	d	Total. Add line								
				20 2 4	E 64 71	90				
ļ	12	Total Revenue		∠y, ડ, 4	, ɔ, ɒɑ, /d	, oc, •	C7 CC3	26 103	ړ	^
		9c, 10c, and 1			_		67,553	26,183		0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

			are not required to compr		
	not include amounts reported on lines 6b, 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 governments and			11-11-11-11-11-11-11-11-11-11-11-11-11-	
•	organizations in the U.S. See Part IV, line 21	115,450	115 450		
2	Grants and other assistance to individuals in	113,430	115,450		
-	the U.S. See Part IV, line 22				
_	•				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				\
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees		_		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
-	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
	Management				
a	<u>−</u>				
b	Legal	2,200	1 000	1 000	
C	Accounting	2,200	1,200	1,000	
d	Lobbying				
_	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а	INVESTMENT ADVISORY FEES	14,421	7,210	7,211	
b					
С					_
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	132,071	123,860	8,211	
26	Joint Costs. Check here if following				
	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation	<u> </u>			

1 Casim-non-interest bearing 22 1 27 27 27 27 27 27	, P	art >	Balance Sheet		<u></u>			<u></u>	10 1	
2 Savings and temporary cash eventments 3 Paledoss and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, hustees, key emptyces, or other related parties. Complete Part II of Schedule L 6 Receivables from current and former officers, directors, hustees, key emptyces, or other related parties. Complete Part II of Schedule L 7 Receivables from other dequalities persons (as defined under section 49580f(Y1)) and persons described in section 4958(x(3)(8). Complete Part II of Schedule L 7 Notes and floars receivable, net 8 Part II of Schedule L 9 Prepared symmetrs and deferred charges 10a Land, buildings, and equipment: cost basis 1 Less accumulated depreciation. Complete Part VI of Schedule D 11 Interestments—other securities, See Part IV, line 11 12 Interestments—other securities, See Part IV, line 11 13 Interestments—opporare-related. See Part IV, line 11 14 Interaple assets 1 Total assets. See Part IV, line 11 15 Total assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 19 Deferred reviews 10 Deferred reviews 11 Deferred reviews 12 Deferred reviews 12 Deferred reviews 13 Deferred reviews 14 Deferred reviews 15 Deferred reviews 16 Defer										
2 Savings and temporary cash investments 1.5 , 1.01 2		1	Cash—non-interest bearing			227	1		97	
3 Redges and grants receivable, net 3 4 Accounts receivable, net 4 4		2	Savings and temporary cash investments			15,101	2			
Secretables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part I of Schedule 1.		3	Pledges and grants receivable, net				3			
empkyess, or other related parties. Complete Part I to 7 Schedule L 8 Reconsides from other decided parties. Complete Part I to 7 Schedule L 9 Repaired Spensons described in section 4658(c)(3)(8). Complete Part I to 7 Schedule L 10 Investments and selected charges 10 Less: accumulated depreciation. Complete Part V of Schedule D 10 Investments—other securities. See Part IV, line 11 11 Investments—other securities. See Part IV, line 11 12 Investments—other securities. See Part IV, line 11 13 Investments—other securities. See Part IV, line 11 14 Inlangble assets 15 Cither assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accorde expenses 18 Grants payable 19 Deferred revenue 19 Tescenomy thord liabilities 20 Tescenomy thord liabilities 21 Eacrow account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, fursions, key empkyees, highest compensated empkyees, and disqualified persons. Complete Part IV of Schedule D 21 Secured mortgages and notes payable to unrelated third parties 22 Tescenomy thord liabilities 23 Complete Part IV of Schedule D 24 Payables to current and former officers, directors, fursions, key empkyees, highest compensated empkyees, and disqualified persons. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, fursions, key empkyees, highest compensated empkyees, and disqualified persons. Complete Part IV of Schedule D 23 Tescenomy to see the payable to unrelated third parties 24 Unrescribed ones and loans payable to unrelated third parties 25 Other liabilities. Add hines 17 through 25 Accounted the Part IV of Schedule D 26 Tested stock or rust principal, or current funds 27 Tested earning, endownent, accumulated income, or other funds 28 Part Tested earning, endownent, accumulated income, or other fund		4	Accounts receivable, net				4			
Receivables from other disqualified persons (as defined under section 4958(r(1)) and persons descended in section 4958(r(3)(8). Complete Part It of Schedule I. 7 Notes and basin secket-valve, net investments of sale or use investments of sale or use investments of sale or use investments of the sale or use investments—protection. Complete Part It of Schedule D 11 Investments—protection. Complete Part IV, line 11 investments—protection. See Part IV, line 11 investments—protect		5	Receivables from current and former officers, directors, tru	ustees, key		-				
## 458KI(II) and persons described in section 4958(c)(3)(8). Complete Part It of Schedule I. Part It of Schedule II. Part		ŀ	employees, or other related parties. Complete Part II of So	chedule L			5			
Part I of Schedule		6	Receivables from other disqualified persons (as defined un	nder section						
Notes and loans receivable, net			4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete						
Inventores for sale or uses			Part II of Schedule L				6			
10a	ţ	7					7			
10a	Se	8					8			
b Less: accumulated depreciation. Complete 10b	ğ	9	Prepaid expenses and deferred charges				9			
Part VI of Schedule D		10a	Land, buildings, and equipment: cost basis	10a						
Investments—publicly traded securities 2,530,611 11 2,432,522 12 Investments—program-related. See Part IV, line 11 13 14 16 16 16 16 17 16 17 16 17 17		b	Less: accumulated depreciation. Complete							
12 Investments—other securiles. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Total sastes. Add lines 17 through 12 17 Accounts payable and accrued expenses 18 Grants payable 18 Bestree devenue 19 Deferred revenue			Part VI of Schedule D	10b			10c			
13 Invastments—program-related. See Part IV, line 11 14 Intangible assets 14 Intangible assets 15 Other assets. See Part IV, line 11 15 15 15 15 15 15 15		11	Investments—publicly traded securities		-	2,530,611	11	2,432,5	22	
14 Intangible assets 14 15 15 15 15 15 15 15		12	Investments—other securities. See Part IV, line 11				12			
15 Other assets. See Part IV, line 11 17 Total assets. Add lines 1 through 15 (must equal line 34) 2,545,939 16 2,479,674 17 Accounting nayable and accrued expenses 17 18 19 19 19 19 19 19 19		13	Investments—program-related. See Part IV, line 11				13			
16 Total assets. Add lines 1 through 15 (must equal line 34)		14	•		į		14			
The control payable and accrued expenses 17		15	Other assets. See Part IV, line 11				15			
18 Grants payable 18 19 Deferred revenue 19 Deferred revenue 19 Deferred revenue 19 19 19 19 19 19 19 1						2,545,939	16	2,479,6	74	
19 Deferred revenue 19 Tax-exempt bond liabilities 20 Tax-exempt bond liability. Complete Part IV of Schedule D 21			Accounts payable and accrued expenses		ļ		17			
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the Single Audit Act and OMB Circular A-133?	3a		•		•					
								3a	X	
	b		_	lits?						

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

LOURDES CENTRAL HIGH SCHOOL

Employer identification number

				OWMEN											-066140	16	
P	art I	Reas	on for F	Public C	harity	Statu	us (All organiza	ations	must c	omplete	this p	art.) (s	see in	structi	ons)		
The	orga	nızation is not	a private fo	oundation	because	ıt is: (Please check only	one org	anization.)							
1		A church, cor	nvention o	f churches	, or asso	ciation	of churches descr	ribed in	section 1	70(b)(1)(/	A)(i).						
2		A school des	cribed in s	ection 17	0(b)(1)(A)(ii). (Attach Schedule E.	.)									
3		A hospital or	a coopera	tive hospit	al service	e orga	nization described	in secti	on 170(b)	(1)(A)(iii)	. (Attach	Schedu	ıle H.)				
4							junction with a hos							ne hospi	ıtal's name,		
		city, and state												•			
5		An organizati	on operate	ed for the t	enefit of	a coll	ege or university ov	vned or	operated	by a gove	ernmenta	ı! unit de	scribed	in			
		section 170(
6		A federal, sta	te, or loca	l governm	ent or go	vernm	ental unit describe	d ın sec	tion 170(b)(1)(A)(v	·).						
7							itial part of its supp					n the ge	neral pu	iblic			
		described in s							•			ŭ	•				
8	\Box						I)(A)(vi). (Complete	e Part II.	.)								
9	П	_					than 33 1/3 % of its		•	ntribution	s. memb	ership fo	ees. and	daross			
	_						tions—subject to co										
							ated business taxa										
							. See section 509(,						
10		An organization	on organiz	ed and op	erated ex	clusiv	ely to test for public	c safety	. See sec	tion 509(a	a)(4). (se	e instru	ctions)				
11	X						ely for the benefit o	-									
		purposes of o	ne or mor	e publicly :	supporte	d orga	nızations described	in sect	ion 509(a)(1) or sec	ction 509)(a)(2). S	See sec	tion			
		509(a)(3). Ch	eck the bo	x that des	cribes the	e type	of supporting orga	nization	and com	plete lines	11e thre	ough 11	h.				
		a Type	1 1	ь 🛛 ту	pe II		c 🔲 Type III–Fu	ınctiona	lly Integra	ted	d	🗌 Тур	e III–Ot	her			
е	X	By checking t	his box, I d	certify that	the orga	nizatio	n is not controlled	directly	or indirect	ly by one	or more	 disquali	fied				
		persons other	r than foun	ndation ma	nagers a	nd oth	er than one or mor	e public	ly suppor	ted organi	izations	describe	d in sec	ction			
		509(a)(1) or s	ection 509	9(a)(2).													
f		If the organiza	ation recei	ved a writt	en deten	nınatı	on from the IRS tha	it it is a	Туре І, Ту	pe II, or T	ype III s	upportin	g				
		organization,	check this	box													
g		Since August	17, 2006,	has the or	ganızatio	on acc	epted any gift or co	ntributio	on from a	ny of the							
		following per	sons?														
		(i) A persor	who direc	ctly or indir	ectly con	trols,	either alone or toge	ther wit	h persons	describe	d in (ii)					Yes	No
		and (iii) t	elow, the	governing	body of	the su	pported organization	n?							11g(i)		_X_
		(ii) A family	member o	f a person	describe	ed in (i) above?								11g(iı)		_X
		(Iii) A 35% c	ontrolled e	entity of a p	erson de	scribe	ed in (i) or (ii) above	?							11g(iii)		X
h		Provide the f	ollowing in	formation	about the	e orga	nizations the organ	ization s	supports.								
(i)	Name	of supported		(ii) EIN			(iii) Type of organizati	on	(iv) Is the c	organization	(v) Did y	ou notify	(vi)	ls the	(vil) Am	ount of	
(-)		anization		(,			(described on lines 1-	-9	in col (i) li	sted in your	the organ	nzation in	organizat		supp		
							above or IRC section		governing	document?		of your xort?	(i) organi U	zed in the			
							(see instructions)	,	Yes	No	Yes	No	Yes	No			
Τ.	חווס	DEC CEN	ייים אד.	нтсн	SCHO	OT.	NEBRASKA	CIT									
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

Sche	edule A (Form 990 or 990-EZ) 2008 LOI	JRDES CENT	TRAL HIGH	SCHOOL	47	<u>7-06</u> 61406	Page 2
P	art II Support Schedule for O	rganizations D	escribed in So	ections 170(b)	(1)(A)(iv) and	170(b)(1)(A)(vi))
	(Complete only if you che	ecked the box	<u>on line 5, 7, or</u>	8 of Part I.)			•
	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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 1-3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	*					
6	Public support. Subtract line 5 from line 4				.,,		
	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4				<u> </u>		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)				12	·
13	First five years. If the Form 990 is for the	organization's first,	second, third, fourth	n, or fifth tax year a	as a section 501(c)(3)	
	organization, check this box and stop here						<u> </u>
Sec	tion C. Computation of Public Su	· · · · · · · · · · · · · · · · · · · 					
14	Public support percentage for 2008 (line 6,	column (f) divided l	by line 11, column ((f))		14	%_
15	Public support percentage from 2007 Sche	dule A, Part IV-A, li	ne 26f			15	<u></u>
16a	33 1/3 % support test-2008. If the organi	ization did not checl	k the box on line 13	, and line 14 is 33	1/3 % or more, che	eck this box	
	and stop here. The organization qualifies a	as a publicly suppor	ted organization				▶ ∐
b	33 1/3 % support test—2007. If the organi	ization did not checl	k a box on line 13 c	r 16a, and line 15	is 33 1/3 % or more	e, check this	
	box and stop here. The organization qualif	ies as a publicly su	pported organizatio	n			▶ ∐
17a	10%-facts-and-circumstances test—200	8. If the organization	n did not check a be	ox on line 13, 16a,	or 16b, and line 14	ıs 10% or	
	more, and if the organization meets the "fac	cts-and-circumstand	ces" test, check this	box and stop he	re. Explain in Part l'	V how the	
	organization meets the "facts-and-circumst	ances" test. The org	ganization qualifies	as a publicly supp	orted organization		▶ ∐
b	10%-facts-and-circumstances test—200	7. If the organization	n did not check a be	ox on line 13, 16a,	16b, or 17a, and lir	ne 15 is 10% or	
	more, and if the organization meets the "fac	cts-and-circumstand	ces" test, check this	box and stop he	re. Explain in Part l'	V how the	, _
	organization meets the "facts-and-circumst	ances" test. The org	ganization qualifies	as a publicly supp	orted 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 in	structions	▶ ⊔

Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008

18

%

18

19a

Investment income percentage from 2007 Schedule A, Part IV-A, line 27h

33 1/3 % support tests—2008. 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 33 1/3 % support tests—2007. 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

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

Page 4

Schedule A (Form 990 or 990-EZ) 2008 LOURDES CENTRAL HIGH SCHOOL 47-0661406

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

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SCHEDULE (Form 990)

Grants and Other Assistance to Organizations,

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Governments, and Individuals in the U.S.

Open to Public Inspection OMB No 1545-0047 2008

% ⊠ Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (h) Purpose of grant GENERAL SUBSIDY or assistance Yes Employer identification number non-cash assistance (g) Description of 47-0661406 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (d) Amount of cash grant (e) Amount of non-cash assistance ► Attach to Form 990. 115,450 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section f applicable LOURDES CENTRAL HIGH SCHOOL General Information on Grants and Assistance (p) EIN the selection criteria used to award the grants or assistance? NE 68410 ENDOWMENT FUND (a) Name and address of organization LOURDES CENTRAL HIGH SCHOOL Department of the Treasury Internal Revenue Service Name of the organization NEBRASKA CITY 412 2ND AVE Parti

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

Enter total number of section 501(c)(3) and government organizations

Enter total number of other organizations

Schedule I (Form 990) 2008

Schedule I (Fo	Schedule (Form 990) 2008 LOURDES CENTRAL HIGH SCHOOL	TRAL HIGH SCHO		47-0661406		Page 2
Part III	Grants and Other Assistance to Individuals in the United S Use Schedule I-1 (Form 990) if additional space is needed.	to Individuals in the	e United States. Co needed.	mplete if the organiza	Inited States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. seded.	rm 990, Part IV, line 22.
٦	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	omplete this part to	provide the informat	ion required in Part I,	line 2, and any other additi	onal information.

Schedule I (Form 990) 2008

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

LOURDES CENTRAL HIGH SCHOOL ENDOWMENT FUND

Employer identification number 47-0661406

FORM 990, PART V, LINE 3B - FORM 990-T NOT FILED EXPLANATION
DID NOT HAVE UNRELATED BUSINESS INCOME

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990 FORM 990 IS REVIEW BY SIGNING OFFICER. COPY OF FORM 990 IS SUBMITTED TO THE BOARD FOR THEIR REVIEW AND APPROVAL.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL NO COMPENSATION OF BOARD MEMBERS OR OFFICERS.

LOURDESEND LOURDES CENTRAL HIGH SCHOOL 47-0661406 Federal Statements

47-0661406

1/11/2010 6:51 PM

FYE: 6/30/2009

Taxable Dividends from Securities

Description	 Amount	Unrelated Business Code	Exclusion Code	Postal Code
DIVIDEND INCOME INTEREST INCOME	\$ 137,087 468			
TOTAL	\$ 137,555			