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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation on may be able to use a copy of this return to satisfy state region.

OMB No 1545-0052 2009

		enue Ser				be able to use a copy of the				g requirements	
				r tax year begin		I lastial satura	<u>-</u>	and endi			, 20
G	nec	K all tr	at apply.	Initial return			of a former pu	ıblic charit T	<u> </u>		J Fınal return
			Name of four	Amended r	elurn	X Addre	ess change	l.	-17	lame change	leation ourst
11.	_ 4L -	LEC	ivanie di louf	iualiuii						A Employer identifi	cation number
Us	e the labe	IRS	DIMOM E	האאדוע ייםווכי	r					20	0005072
Ot	herv			Street (or B.O. box		mail is not delivered to stree	addroce)	Room/su	ıto.		0905873
٠.	prir		Number and	Street (of FO box)	iumber ii	maii is not delivered to stree	address)	Roomisu	ile	B Telephone number (see	page 10 of the instructions)
C	or ty	pe.	PO BOX 8	11997				İ		140	2) 475-2611
	-	ecific		state, and ZIP cod	le		<del></del>	<u> </u>		C If exemption applicat	
Ins	truc	ions.	,,							pending, check here	····· [H
			LINCOLN.	NE 68501						<ul> <li>D 1. Foreign organizat</li> <li>2 Foreign organizat</li> </ul>	· —
H (	her	k type	of organizat		on 501(	c)(3) exempt private fo	undation			85% test, check h	ere and attach
	٦.		-	exempt charitable		Other taxable p		on		computation .	
T F				assets at end	•	unting method: X		crual		E If private foundation	status was terminated
			m Part II, coi			Other (specify)				F If the foundation is in	,
	-	▶ \$	,, ·	2,179.		, column (d) must be o	n cash basis )			under section 507(b)	
	_	Analy		nue and Expens		(a) Povenue and	T				(d) Disbursements
				columns (b), (c), an equal the amounts		(a) Revenue and expenses per	(b) Net inve		(4	c) Adjusted net income	for chantable
				equal the amounts te 11 of the instruct		books	incon				purposes (cash basis only)
T	1	Contributi	ons, gifts, grants, e	etc , received (attach sch	edule) .	34,500					
-   :		Check ]	If the fo	oundation is not req	uired to						
:	3	Interest		temporary cash inves							
.	4	Dividen	nds and interes	st from secunties			ļ				
L	5 a	Gross r	rents								
	<b>b</b> Net rental income or (loss)										
<b>₩</b>	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all  ⇒ assets on line 6a  ↑ Capital gain net income (from Part IV, line 2)  ■ 8 Net short-term capital gain  ■ 9 Income modifications  ■ 10 a Gross sales less returns										
5€	U		n line 6a							<del>, , , , , , , , , , , , , , , , , , , </del>	
<b>\$</b>	7	Capital	gain net incor	me (from Part IV, li	ne 2) .		ļ				
字	8		ort-term capita	•			<del> </del>			<u> </u>	
₹	9 )a	Income Gross sa	e modifications ales less returns			· · · · · · · · · · · · · · · · · · ·	<del> </del>				
6	_	and allo	wances · · ·	• •							
SCANNED	b		ost of goods solo	,		-					
惫	C 4			(attach schedule)			<del></del>				
₹	1		ncome (attach		<del>;</del> ·	34,500					
<b>X</b>	<u> </u>	Comp.	Add lines it in	Outin IV		34,300	_			<del>.</del>	
الراب 1			ALI.		JOI .		1			<del> </del>	· · · · · · · · · · · · · · · · · · ·
s la	<del>-</del> 5	Pensin	ninane Amar	nes and wages . pyeebeneegth	8.						
BE .		l enal f	ees (attach sc	poduje)	3		<del></del>				
Operating and Administrative Expense					[다.	800		0.		0.	. 800
ω   ω	c	Othera	nting lees (atte	oc tattach schellul	e)						
≝  <sub>1</sub>			t								
g la				) (see page 14 of the inst	ructions)						
<u>:≝</u>  1	9	Depred	ciation (attach	schedule) and dep	letion .						
통 2	0	Occupa	ancy								
<b>५</b>  2	1	Travel,	conferences,	and meetings							
E 2				ions					ļ		
	3	Other e	expenses (atta	ach schedule) 👫 🏋	CH 2.	320	<del></del>		ļ		320
<u>ह</u>   2	4	Total o	perating and	administrative ex	penses.			_			
ğ			es 13 through			1,120		0.	<u> </u>	0	1,120
2			outions, gifts, g	•		49,175			<u> </u>		49,175
$\neg$				rsements. Add lines 2	4 and 25	50,295	<del>- </del>	0.	-	0.	50,295
2	7		ct line 26 from			15 705					
				xpenses and disbursen		-15,795	+		<u> </u>	<del></del>	
				me (if negative, e	-		<del> </del>	-0-	_		
				e (if negative, enter		see page 30 of the instr			SA	-0-	. I Form <b>990-PF</b> (2009

r 4

Р	art II	Balance Sheets description column should be for end-of-year	Beginning of year	End o	of year
_		amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	17,474.	2,179.	2,179.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶	500.		
	4	Pledges receivable			
-		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	U	disqualified persons (attach schedule) (see page 16 of the instructions)			
	-	Other notes and loans receivable (attach schedule)			· · · · · · · · · · · · · · · · · · ·
	7				
	_	Less allowance for doubtful accounts			<del></del>
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			<del></del>
Ä		Investments - U S and state government obligations (attach schedule)	T .		
-		Investments - corporate stock (attach schedule)			
	11 C	Investments - corporate bonds (attach schedule)			
		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)			
		(attach schedule)			<del></del>
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the	17 074	0 170	
_		instructions Also, see page 1, item I)	17,974.	2,179.	2,179.
	17	Accounts payable and accrued expenses			_
	18	Grants payable			
es	19	Deferred revenue			]
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			]
æ	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe )			]
					]
	23	Total liabilities (add lines 17 through 22)			
_		Foundations that follow SFAS 117, check here			1
		and complete lines 24 through 26 and lines 30 and 31.			
Ś	24	Unrestricted			
ances	25				-
	l	Temporanily restricted			1
ä	26	Permanently restricted			-
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
乓		•			
ō	27	Capital stock, trust principal, or current funds			4
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	17.074	0 170	4
SS	29	Retained earnings, accumulated income, endowment, or other funds	17,974.	2,179.	4
) te	30	Total net assets or fund balances (see page 17 of the			
ž		ınstructions)	17,974.	2,179.	. <u>.</u>
	31	Total liabilities and net assets/fund balances (see page 17			
_		of the instructions)	17,974.	2,179.	
G	art I	Analysis of Changes in Net Assets or Fund	Balances		
1	Tota	al net assets or fund balances at beginning of year - Part II, co	olumn (a), line 30 (must ag	gree with	
	end-	-of-year figure reported on prior year's return)		1	17,974.
2		an amazonat forma Dant L luna 07-		_	-15,795.
3				· · · · · · · · · · · · · · · ·	
_		lines 4.0 and 0		· <del></del>	2,179.
5		and the state of t		5	<del>                                     </del>
_		reases not included in line 2 (itemize) ►al net assets or fund balances at end of year (line 4 minus line	5) - Part II, column (b) III		2,179.
×	. 5.6	The state of the state of the or your time 4 miles into			- 000 DE (0000)

	and Losses for Tax on Inv		(b) How	(a) Data	Г
(a) List and	acquired P-Purchase	(c) Date acquired	(d) Date sold (mo , day, yr )		
<del></del>	ick warehouse, or common stock, 200 s	sns MLC Co )	D-Donation	(mo , day, yr )	( / 22), ). /
la	<del></del>				<u> </u>
<u>b</u>			<del> </del>		-
d d			<del> </del>		<del> </del>
e			<b> </b>		
	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (le	oss)
(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) mini	
a					
b					
С		_			
d					
е					
Complete only for assets show	wing gain in column (h) and owned	T'		Gains (Col (h) g	
(I) F M V as of 12/31/69	(J) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co	
a					
<b>b</b>					
C					
d					
<u>e</u>			<del> </del>		
2 Capital gain net income or (		f gain, also enter in Part I, line 7	,		
3 Net short-term capital gain o	or (loss) as defined in sections 122	f (loss), enter -0- in Part I, line 7	2		
	ine 8, column (c) (see pages 13 an		1		
<del>-</del>	ine 8	•	3		
		ced Tax on Net Investment Inc	<del></del>		
	ne section 4942 tax on the distribut	table amount of any year in the base	period?	🗆	Yes X No
	ot qualify under section 4940(e). D	see page 18 of the instructions before	o makina	any entree	<del></del>
(a)	(b)	T in the second	e making	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	İ	Distribution ra (col (b) divided by	
2008	168,278.	14,275.			1.788301
2007	85,083.	12,151.	† · · · · ·		7.002140
2006	104,940.	4,858.		2	1.601482
2005		580,138.			
2004		538,316.	ļ,.		
			1 1		
2 Total of line 1, column (d)			2	4	10.391923
~	or the 5-year base period - divide the				0 070205
number of years the founda	ation has been in existence if less	tnan 5 years	3		8.078385
4 Enter the net value of nonc	charitable-use assets for 2009 from	Port Y line 6	4		10,754.
- Litter the het value of hone	Mantable-use assets for 2009 from	Trait A, inte 5	+		10,734.
5 Multiply line 4 by line 3			5		86,875.
· manuply into 1 by into 0					00,0,0
6 Enter 1% of net investmen	t income (1% of Part I, line 27b)		6		
	, ,				
7 Add lines 5 and 6			7		86,875.
8 Enter qualifying distribution			8		50,295.
If line 8 is equal to or gre Part VI instructions on pag		in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See the

Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	tructi	ons)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	_		
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0.
	here  and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	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-)			
3	Add lines 1 and 2	·		0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on Investment income. Subtract line 4 from line 3 If zero or less, enter -0-			0.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
b	Exempt foreign organizations-tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax   Refunded   11			
Par	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			ļ
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities			
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? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) $\blacktriangleright$ NE,			
b	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?If "No," attach explanation	8b	Х	].
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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	_9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X
			NO DE	(0000)

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3ь

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

enterprise at any time during the year?

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

3a Did the foundation hold more than a 2% direct or indirect interest in any business

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued)	oyees,
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none,	enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	-
Total number of others receiving over \$50,000 for professional services	▶ NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
·	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	
Total. Add lines 1 through 3	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	
	purposes.	
а	Average monthly fair market value of securities	1a
b	Average of monthly cash balances	<b>1b</b> 10,918.
С		1c 0.
d	Total (add lines 1a, b, and c)	1d 10,918.
e	Reduction claimed for blockage or other factors reported on lines 1a and	
	1c (attach detailed explanation)	
2	Acquisition indebtedness applicable to line 1 assets	2 0.
3	Subtract line 2 from line 1d	3 10,918.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25	20,3201
	of the instructions)	4 164.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5 10,754.
6	Minimum investment return. Enter 5% of line 5	6 538.
	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private	
	foundations and certain foreign organizations check here	
1	Minimum investment return from Part X, line 6	1 538.
2а	Tax on investment income for 2009 from Part VI, line 5	
b	Income tax for 2009. (This does not include the tax from Part VI.)	
	Add lines On and Oh	2c 0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 538.
4	Recoveries of amounts treated as qualifying distributions	4
5	Add tipe 2 and 4	5 538.
6	Deduction from distributable amount (see page 25 of the instructions)	6
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	
•	line 1 · · · · · · · · · · · · · · · · · ·	<b>7</b> 538.
_		7 336.
Pa	rt XII Qualifying Distributions(see page 25 of the 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 50,295.
b	December related records and Astal force Dark IV D	<b>1b</b> 0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	0.
-	numacaa	2 0.
3	Amounts set aside for specific charitable projects that satisfy the	
а	Contability test (mains IDC managed as a rise d)	<b>3a</b> 0.
b	Cook distribution to at /attack the constraint orbital to	<b>3b</b> 0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b> 50,295.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	30,293.
•	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5 N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 50,295.
v	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	
	qualifies for the section 4940(e) reduction of tax in those years.	er the fourtdation

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Pai	rt XIII Undistributed Income (see page	26 of the instruction	is)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
•	· F		· · · · · · · · · · · · · · · · · · ·		538.
	Undistributed income, if any, as of the end of 2009			· · · · · · · · · · · · · · · · · · ·	
	Enter amount for 2008 only				
	Total for prior years 20 07 ,20 06 ,20 05			· · · · · · · · · · · · · · · · · · ·	<del></del>
3	Excess distributions carryover, if any, to 2009			· · · · · · · · · · · · · · · · · · ·	
	<b>-</b> 0004		:		
	From 2004				
	From 2006				
	From 2007 84,475.				
	From 2007				
	Total of lines 3a through e	252,039.			
	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 50,295.				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years (Election			- <del></del>	
~	required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				538.
8	Remaining amount distributed out of corpus	49,757.			
5	Excess distributions carryover applied to 2009	. <del></del>			
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	301,796.			
þ	Prior years' undistributed income Subtract				
_	Enter the amount of pnor years' undistributed				<u> </u>
·	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				
е	amount - see page 27 of the instructions Undistributed income for 2008 Subtract line	<del>-</del> ···			
	4a from line 2a Taxable amount - see page				
	27 of the instructions				<b>-</b>
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2010				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				
	instructions)				
9	Excess distributions carryover to 2010.	301 70 <i>6</i>			
46	Subtract lines 7 and 8 from line 6a	301,796.			
10	Analysis of line 9				
	Excess from 2005				
C	Excess from 2006				
d	1.67 564				
_е	Excess from 2009 49,757.			<u> </u>	

Pa	rt XIV Private Oper	ating Foundations (	see page 27 of the	instructions and Par	t VII-A, question 9)	NOT APPLICABLE
	If the foundation has a foundation, and the ruling	received a ruling or d	etermination letter tha			
b	Check box to indicate whe	ther the foundation is a pi	vate operating foundation	n described in section	4942(j	)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	·	(e) Total
	justed net income from Part I or the minimum investment return from Part X for each	(a) 2009	(ь) 2008	(c) 2007	(d) 2006	(5) 1022
b	year listed					
c	Qualifying distributions from Part					
d	XII, line 4 for each year listed  Amounts included in line 2c not used directly for active conduct of exempt activities					
8	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets quatifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test- enter 2/3 of minimum invest- ment return shown in Part X,					
	line 6 for each year listed					
С	"Support" alternative test - enter (1) Total support other than					
	gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)).					
	or royalties) (2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942 (j)(3)(B)(m)					
	(3) Largest amount of sup- port from an exempt organization					
D-	(4) Gross investment income .  art XV Supplement	 any Information (C	omplete this part	only if the found	ation had \$5,000	or more in assets
F	at any time of	during the year - se	e page 28 of the in	structions.)	ation nau \$5,000	or more in assets
1 a	Information Regarding List any managers of before the close of any	the foundation who I	nave contributed mor	e than 2% of the tota more than \$5,000). (S	contributions receive section 507(d)(2).)	red by the foundation
	N/A			<del>_</del> .		
b	List any managers of ownership of a partner					large portion of the
_	N/A	- 40 0		<del> </del>		
2	Information Regarding			•		
	Check here ► X if t unsolicited requests f organizations under ot	for funds If the foun	dation makes gifts, i	grants, etc. (see page	table organizations at 28 of the instruction	and does not accept ons) to individuals or
а	The name, address, an	nd telephone number o	f the person to whom a	applications should be a	addressed.	
b	The form in which appl	ications should be sub	mitted and information	and materials they sho	uld include:	
c	Any submission deadlii	nes·	· · · · - · · · ·	<del></del>		
d	Any restrictions or lifactors	imitations on awards	, such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other

3 Grants and Contributions Paid Durin				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	, <b>.</b>
a Paid during the year		· ·		
EXHIBIT A			GENERAL	49,175.
•				
				•
Total			▶ 3a	49,175.
b Approved for future payment				
		<u> </u>		
Total			▶ 3b	

Part 2	XVI-A Analysis of Income-Produ	ucing Act	ivities			
	ross amounts unless otherwise indicated	1	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
		(a)	(b)	(c)	(d)	function income (See page 28 of
1 Pro	gram service revenue	Business code	Amount	Exclusion code	Amount	the instructions )
а						
b						
C						
d						
e		ļ <u>.</u>				
f						
	Fees and contracts from government agencies			ļ		
2 Mei	mbership dues and assessments					
	rest on savings and temporary cash investments					
	dends and interest from securities					
	rental income or (loss) from real estate		·	<del></del>		
а	Debt-financed property			<del>-  </del>		
	Not debt-financed property					
	rental income or (loss) from personal property			+		
	er investment income					
	n or (loss) from sales of assets other than inventory			<del></del>		
	income or (loss) from special events			<del>-</del>		
	ess profit or (loss) from sales of inventory	<del>                                     </del>		-		
_	er revenue a					
b		· · · · · ·				
C						
d						
12 50	ototal Add columns (b), (d), and (e)			+		
	al. Add line 12, columns (b), (d), and (e)				42	<u> </u>
	orksheet in line 13 instructions on page 28 to					
	XVI-B Relationship of Activities			xempt Puri	ooses	
Line I						ntributed importantly to
	the accomplishment of the fo	oundation's	exempt purposes (	other than	by providing funds for	r such purposes). (See
▼	page 29 of the instructions.)				•	. , , ,
						·
						,
						· · · · ·
			NOT APPLICABI	LΕ		
			<u> </u>			
		·				
						· · · · · · · · · · · · · · · · · · ·
						-

Par	t XVII	Information Exempt Orga		ransfers To	o and Trans	actions	and Relati	onships	With N	lonc	harit	able
1	in sec	ne organization directly	ode (other than	section 501(c	)(3) organizatioi						Yes	No
а	organi, Transf	zations? ers from the reporting fou	indation to a none	chantable exempt	t organization of							
	(1) Cash							1a(1)		X		
	(2) Ot	her assets								1a(2)		X
ь		transactions										<b>.</b> ,
		iles of assets to a noncha										X
		irchases of assets from a								1b(2)		X
		ental of facilities, equipme								1b(3)	<del> </del>	X
		eimbursement arrangeme							• • • • •	1b(4)		X
		eans or loan guarantees erformance of services or								1b(5)		X
•		g of facilities, equipment,										<u>x</u>
		answer to any of	-	-							fair	
_		of the goods, other										
		in any transaction of		•								
		•										
(a) l	ine no	(b) Amount involved	(c) Name of	nonchantable exem	pt organization	(d) Des	cription of transfer	s, transactio	ns, and shan	ng arrar	ngemen	its
		N/A				N/A						·
				<u>.</u>								
								_				
						-		<del>.</del>				
						<del>-</del>						
				<del></del>	<del></del>		-					
						<del>-</del>						
							•					
2a	Is the	foundation directly or	indirectly affilia	ted with, or re	lated to, one or	more tax-	exempt organiz	ations des	scribed in			
	sectio	n 501(c) of the Code (ot	her than section	501(c)(3)) or in s	section 527?					Y	es 🔔	⊠ No
b	If "Yes	s," complete the following		,		1						
		(a) Name of organization	n	(b) T <sub>3</sub>	ype of organization		(	c) Description	n of relations	hib		
					<del></del>		-					
		<del></del>										
							-	<del></del>				
	Under	penalties of penury, I dec	lare that I have ex	amined this return	n including accom	nanving sche	edules and staten	nents and t	n the hest o	of my k	nowled	ne and
	belief,	it is true, correct, and con	plete Declaration	of preparer (other	than taxpayer or	iduciary) is b	ased on all inform	nation of w	hich prepare	rhasa	iny kno	wledge
		Carly I	mari			1 8/12		The	- Carliso			
စ	► ¬	gnature of officer or trustee	- V OP WA			Date		Title	CANAL CO	~		
Sign Here		1	<del>)</del>		Date				Preparer's			
Ľ.	s >	Preparer's	$\langle A A A \rangle$	M1	8	1200	Check if self-employe	ed ▶☐	number (S page 30 of t	ee Sign he instr	ature o	in )
Sig	arer Only	signature	JV271		~	12/10			P01063			
	Paid Preparer's Use Only	Firm's name (or yours i		LLP	γ			EIN ▶ 4	14-0160	260		
	ر ہ	self-employed), address	s, 1248	O STREET.	STE 1040							

Form **990-PF** (2009)

and ZIP code

LINCOLN,

NE

68508-1461 | Phone no 402-473-7600

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury

# **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Internal Revenue Service		
Name of the organization		Employer identification number
DUNCAN FAMILY TRUST		20-0905873
Organization type (check one	r.	1 20 030075
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private for	ındatıon
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	no
	501(c)(3) taxable private foundation	
instructions.  General Rule	(8), or (10) organization can check boxes for both the General Rule and a S	
X For an organization	iling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or r	nore (in money or
	ne contributor. Complete Parts I and II.	
Special Rules		
sections 509(a)(1) a	(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support tend 170(b)(1)(A)(vi), and received from any one contributor, during the year, a 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line	contribution of the greater
the year, aggregate	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any contributions of more than \$1,000 for use exclusively for religious, charitabs, or the prevention of cruelty to children or animals. Complete Parts I, II, and	le, scientific, literary, or
the year, contribution aggregate to more the year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any as for use exclusively for religious, charitable, etc., purposes, but these continuan \$1,000 If this box is checked, enter here the total contributions that were ally religious, charitable, etc., purpose. Do not complete any of the parts unlessization because it received nonexclusively religious, charitable, etc., contribution.	ributions did not received during the s the General Rule tions of \$5,000 or more
Caution. An organization that 990-EZ, or 990-PF), but it must	s not covered by the General Rule and/or the Special Rules does not file Sch st answer "No" on Part IV, line 2 of its Form 990, or check the box on line H o to certify that it does not meet the filing requirements of Schedule B (Form 9	nedule B (Form 990, of its Form 990-EZ,
For Privacy Act and Paperwork Redu for Form 990, 990-EZ, or 990-PF	ction Act Notice, see the Instructions Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)

JSA

Schedule B (Form 550, 550	7-62, 01 330-1 1 ) (2003)			Page or
Name of organization	DUNCAN FAMILY T	TRUST	•	Employer identification numb
				20-0905873
				· · ·

	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	DUNCAN AVIATION  P.O. BOX 81887  LINCOLN, NE 68501	\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b> \$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

JSA

ATTACHMENT

ACCOUNTING FEES	
- ACC	
<b>—</b>	ا
PART	
OPF.	7 = = 7
6	

CHARITABLE <u>PURPOSES</u>	800.	800.
ADJUSTED NET INCOME		0.
NET INVESTMENT INCOME		0
REVENUE AND EXPENSES PER BOOKS	800.	800.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT 1

PART I - OTHER EXPENSES

FORM 990PF,

ATTACHMENT 2

REVENUE AND EXPENSES PER BOOKS 20.

DESCRIPTION SEC OF STATE FEES WEBSITE DESIGN

320.

TOTALS

320.

20. 300.

CHARITABLE PURPOSES

ATTACHMENT 2

65508

ATTACHMENT 3

EXPENSE ACCT
AND OTHER
ALLOWANCES

TO EMPLOYEE BENEFIT PLANS

CONTRIBUTIONS

0

**3** 

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0

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0

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0

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0

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0

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

NAME AND ADDRESS		TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION
J. ROBERT DUNCAN PO BOX 81887 LINCOLN, NE 68501		DIRECTOR 0.00	.0
KAREN K. DUNCAN PO BOX 81887 LINCOLN, NE 68501		DIRECTOR 0.00	.0
D. TODD DUNCAN PO BOX 81887 LINCOLN, NE 68501		DIRECTOR 0.00	·
K. PAIGE DUNCAN PO BOX 81887 LINCOLN, NE 68501		PRESIDENT/DIRECTOR 0.00	·
CINDY MORRIS PO BOX 81887 LINCOLN, NE 68501		TREASURER 0.00	.0
THOMAS B. FISCHER PO BOX 81887 LINCOLN, NE 68501		SECRETARY 0.00	. 0
5794AN K923	8/4/2010	1:53:07 PM V 09-7.1 65	65508

65508

(CONT'D)	EXPENSE ACCT AND OTHER ALLOWANCES	.0	0.
ATTACHMENT 3 (CONT'D)	CONTRIBUTIONS EXPEN TO EMPLOYEE AND BENEFIT PLANS ALLC	·	•0
	CC TC COMPENSATION BE	.0	0.
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	ASST. SECRETARY 0.00	GRAND TOTALS
FORM 990PF, PART VIII - LIS	NAME AND ADDRESS	VICKIE SMITH PO BOX 81887 LINCOLN, NE 68501	

**EXHIBIT A**Grants Paid

### 1/1/2009 through 12/31/2009

Date	Receipient Name	Address	Recipient Status	Amount
1/15/2009	Haydon Art Center	Lincoln, NE	Public Chanty	2,000 00
1/15/2009	Literacy Leadership Inc	Lincoln, NE	Public Chanty	100 00
3/3/2009	Mid America Arts Alliance	Kansas City, MO	Public Charity	5,000.00
5/7/2009	Bemis Center For Contemporary Arts	Omaha, NE	Public Chanty	10,000.00
5/22/2009	Kansas State Foundation	Manhattan, KS	Public Chanty	500 00
5/22/2009	Opera Omaha	Omaha, NE	Public Chanty	500 00
6/10/2009	American Heart Association	Lincoln, NE	Public Charity	1,000 00
6/10/2009	Clinic With a Heart	Lincoln, NE	Public Chanty	250 00
6/10/2009	Lincoln Litercacy Council	Lincoln, NE	Public Chanty	850 00
6/10/2009	Matt Talbot Kitchen	Lincoln, NE	Public Charity	500 00
6/10/2009	Nebraska Center For The Book	Lincoln, NE	Public Chanty	800 00
6/10/2009	Nebraska Humanities Council	Lincoln, NE	Public Chanty	2,000.00
6/10/2009	Pinewood Bowl, Inc	Lincoln, NE	Public Chanty	250.00
6/10/2009	Southeast Community College Educational Foundation	Lincoln, NE	Public Chanty	5,000.00
6/10/2009	NEbraska Childrens & Families Foundation	Lincoln, NE	Public Chanty	500.00
6/10/2009	DeMolay International	Kansas City, MO	Public Charity	250 00
6/10/2009	Lincoln Arts Council	Lincoln, NE	Public Chanty	500.00
7/4/2009	National Lung Cancer Partnership	Madison, WI	Public Charity	500.00
9/17/2009	Friendship Home	Lincoln, NE	Public Charity	1,000.00
10/31/2009	Peoples City Mission	Lincoln, NE	Public Chanty	500 00
10/31/2009	WMUK - Western Michigan University	Kalamzzoo, MI	Public Charity	1,250 00
10/31/2009	Foundation For Lincoln City Libraries	Lincoln, NE	Public Charity	500 00
10/31/2009	Lincoln Action Program	Lincoln, NE	Public Charity	750.00
10/31/2009	Bright Lights Inc	Lincoln, NE	Public Charity	550.00
10/31/2009	Child Advocacy Center	Huntsville, AL	Public Charity	2,500 00
10/31/2009	Nebraska Jazz Orchestra	Lincoln, NE	Public Chanty	500 00
10/31/2009	Center For People In Need	Lincoln, NE	Public Chanty	500 00
10/31/2009	Dawes Goodnich School	Lincoln, NE	Public Chanty	200.00
10/31/2009	City Impact	Lincoln, NE	Public Charity	1,000.00
10/31/2009	Indian Center	Lincoln, NE	Public Charity	1,000 00
10/31/2009	Park Middle School	Lincoln, NE	Public Chanty	425 00
10/31/2009	Junior Achievement	Lincoln, NE	Public Chanty	1,250 00
11/11/2009	NE Department Of Aeronautics	Fairmont, NE	Public Chanty	1,000 00
11/11/2009	Nebraska Chapter Of The Arthritis Foundation	Lincoln, NE	Public Chanty	500 00
11/11/2009	Tabitha Health Care Services	Lincoln, NE	Public Charity	1,250.00
11/23/2009	Alzheimers Association	Lincoln, NE	Public Charity	1,000.00
12/17/2009	Westside Foundation	Omaha, NE	Public Chanty	500 00
12/17/2009	Museum Of Nebraska Art	Lincoln, NE	Public Charity	1,500.00
12/30/2009	International Sculpture Center	Hamilton, NJ	Public Charity	1,000 00

Total Other Contributions (1/1/2009 - 12/31/2009)

49,175.00

## Form 8868

(Rev April 2009)

Department of the Treasury

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

nternal Revenue 3	<del></del>		
-	ing for an Automatic 3-Month Extension, complete only Part I and check this box	0.64.6	<b>⊳</b> [X]
	ing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page te Part II unlessou have already been granted an automatic 3-month extension on a previous		68.
Part I Auto	matic 3-Month Extension of Time. Only submit original (no copies needed).		
A corporation r	equired to file Form 990-T and requesting an automatic 6-month extension - check this box ar	nd complete	. $\square$
Part I only			▶ ∟
	orations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 70 ome tax returns	04 to request	an extension of
Electronic Fili	ng (e-file) Generally, you can electronically file Form 8868 if you want a 3-month auto	matic extension	of time to file
one of the refelectronically in returns, or a co	turns noted below (6 months for a corporation required to file Form 990-T). However (1) you want the additional (not automatic) 3-month extension or (2) you file Forms of consolidated From 990-T Instead, you must submit the fully completed and	er, you cannot 990-BL, 6069, signed page 2	file Form 8868 or 8870, group (Part II) of Form
	e details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for C		
Type or	Name of Exempt Organization	Employer identif	
print	DUNCAN FAMILY TRUST	20-09058	73
File by the	Number, street, and room or suite no If a P O box, see instructions		
due date for filing your	PO BOX 83246		
return See	City, town or post office, state, and ZIP code For a foreign address, see instructions		
nstructions	LINCOLN, NE 68501-3246	<del></del>	
Check type of	return to be filed (file a separate application for each return):		
Form 990	Form 990-T (corporation)	n 4720	
Form 990	-BL Form 990-T (sec 401(a) or 408(a) trust) Form	n 5227	
Form 990	-EZ Form 990-T (trust other than above)	n 6069	
X Form 990	-PF Form 1041-A Form	n 8870	
<ul><li>If the organ</li><li>If this is for</li><li>for the whole is</li></ul>		d attach a list v	▶ ☐ If this is
names and EII	Is of all members the extension will cover.		
until	at an automatic 3-month (6 months for a corporation required to file Form 08/15, 2010 to file the exempt organization return for the organization ganization's return for calendar year 2009 or tax year beginning, and ending	n 990-T) exte	insion of time The extension is
2 If this tax	year is for less than 12 months, check reason: Initial return Final return	Change in acc	counting period
•	oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	-	
	dable credits. See instructions.	3a	\$ 0.
•	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax p	-	
	clude any prior year overpayment allowed as a credit	3b	\$ 0.
	Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		
	D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment Syste	· —	
Instruction		3c	
	ı are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO an	d Form 8879-EO	1
for payment in	· · · · · · · · · · · · · · · · · · ·		
For Privacy A	ct and Paperwork Reduction Act Notice, see Instructions.	Form	8868 (Rev 4-2009)