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

OMB No 1545-0052 2019

Internal	Revenue Se	ervice No	te: The foundate	on may	be able to use a copy of	this return to s	atisfy state	reporting requirements	<u> </u>
For c	alendar	year 2009, or	tax year begi	nning		, 2009,	and endi	ing	, 20
_		that apply	Initial retur		Initial return of	of a former p	ublic chai	rity	Final return
			Amended	return	Addres	ss change		Name change	
		Name of found	dation					A Employer identifi	cation number
Use	the IRS								
la	abel.	PHILLIP A	AND TERRI	SCHRA	AGER FOUNDATION			23-	7184025
Oth	erwise,	Number and s	treet (or P O box	number	mail is not delivered to street	address)	Room/su	Ite B Telephone number (see	page 10 of the instructions)
•	orint					1			
	type.	4405 SOUT	гн 96тн sт	REET		1		(40	2) 505-6300
	Specific uctions.	City or town, s	state, and ZIP coo	de .	•			C If exemption applica	
mstr	ucuons.							pending, check here D 1 Foreign organizat	
		OMAHA, NE	E 68127					2 Foreign organiza	
H Ch	neck type	e of organization		on 5016	c)(3) exempt private f	oundation		85% test, check h	ere and attach
\Box	• •	-	exempt chantable		Other taxable pri		ion	computation -	
		et value of all a			unting method X Ca			E If private foundation	►
		om Part II, col (ther (specify)	2011 7.00	, uui	under section 507(b	
	year (//e 5) ► \$	10,729			column (d) must be on	cash basis)			in a 60-month termination (1)(1)(B), check here
			ue and Expens	L			· T		(d) Disbursements
	total d	of amounts in col	umns (b), (c), and	d (d)	(a) Revenue and expenses per	(b) Net inve		(c) Adjusted net	for charitable
	may i	not necessanly e nn (a) (see page	qual the amounts 11 of the instruct	s in hons))	books	incom	e	income	purposes (cash basis only)
1					281,520.			- · · · · · · · · · · · · · · · · · · ·	(Guoir Busis Grity)
1		If the fou	c , received (attach sch undation is not requ	ured to					
2	Check	attach of	ch B		90.		90.		ATCH 1
3		•	emporary cash inves		13,168.	1	3,168.		ATCH 2
4			t from securities			_			111011 2
			· · · · · · · · · · · · · · · · · · ·				-		
		•)		452,689.				
	b Gross s	sales pnce for all	le of assets not on l 934	,578.					
>		on line 6a —				4.5	2,689.		
υ 7 Ε		_	ne (from Part IV, I						
8		•	gain						
∄.8		e modifications ales less returns							
7		owances · · ·							
. 1.		ost of goods sold							
- 1			attach schedule)				-		-
≵ !!			schedule)		747,467.	46	5,947.	_	
12			ough 11		32,471.		•		
9.3	Compe	employee select	, directors, trustees,		,		-		
# . ·	Donor	employee salan	es and wages .		8,030.		0.	0.	0
は、	rensid	on plans, employ	ree benefits						
M 10	a Legali	employee saland on plans, employ fees (attach sche nting fees (attach estimatives attach schedule) (s clation (attach salancy	edule) ch schedule) ATC		2,563.		0.	0.	0
	Othor	HINT CES (ALIAC	ar scriedule)	 a					
≧	Interes	"Keerive	s (attach schedul	<i>=)</i>	-			· · · · · · · · · · · · · · · · · · ·	-
	COL.	attach school-le)	see page of the insi		2,563.		Ō.	0.	0
ĔIJ			chedule) and de	niacions)					
E	2Debie	ciation (attacms	Schedile and de	pielion.		_			
₹ 20	Tan	ancy	ASCHOOL STORE		625.		0.	0.	0
			~ · · · · · · · · · · · · · · · · · · ·						
g 22	Cindle	ig and publicate	h schedule) AT(Сн 5	20.	_	0.	0.	0
23 24			n schedule) administrative ex					<u> </u>	
<u>۳</u> ا					46,272.		О.	0.	0
ור		-	23 rants paid		368,105.			· · · · · ·	368,105
25 26					414,377.		0.	0.	368,105
27		penses and disburse act line 26 from	ements Add lines 2 line 12	→ ailU <u>2</u> 5	.,,			· ·	
- 1			enses and disburseme	ante	333,090.				
- 1			nses and disbursemente. ne (if negative, er			4 6	5,947.	·	
- 1			(if negative, enter				·	-0-	
L_	v najus	rea ner mcome	(11 Heyative, enter	· -u-). ·	<u> </u>				

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. 9E1410 1 000 94140S 2XCG 5/5/2010 5:07:48 PM V 09-6

JSA ** ATCH 4

Part II	Balance Sheets description column should be for end-of-year	Beginning of year	End of ye	- <u> </u>
	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	20,705.	143,203.	143,203
2	Savings and temporary cash investments	20,703.	143,203.	143,203
3	Accounts receivable			
	Less allowance for doubtful accounts ▶			
4	Pledges receivable			
	Less allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see page 16 of the instructions)			
7	Other notes and loans receivable (attach schedule)			
-	Less allowance for doubtful accounts ▶			
<u>v</u> 8	Inventories for sale or use			
Assets 0 0 0 a	Prepaid expenses and deferred charges			·-
8 10 a	Investments - U S and state government obligations (attach schedule)			
	Investments - corporate stock (attach schedule) ATCH 6 . [2,622,957.	2,834,489.	10,586,010
С	Investments - corporate bonds (attach schedule)			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12	(attach schedule)			
13	Investments ather (attach schedule)			
14	Land, buildings, and			
	equipment basis Less accumulated depreciation (attach schedule)			
15	Other assets (describe			
16	Total assets (to be completed by all filers - see the			
."	instructions Also, see page 1, item I)	2,643,662.	2,977,692.	10,729,213
17	Accounts payable and accrued expenses		·	
18	Grants payable			
1	Deferred revenue			
Liabilities 0 2 1	Loans from officers, directors, trustees, and other disqualified persons			
10 21	Mortgages and other notes payable (attach schedule)			
تا 22	Other liabilities (describe			
**	Other habilities (describe >			
23	Total liabilities (add lines 17 through 22)			
	Foundations that follow SFAS 117, check here ▶			
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	Unrestricted			
E 25	Temporarily restricted			
E 26	Permanently restricted			
<u> </u>	Foundations that do not follow SFAS 117,			
<u>וַבֿו</u>	check here and complete lines 27 through 31. ► X			
or Fund Balanc 26 27 27	Capital stock, trust principal, or current funds	2,643,662.	2,977,692.	
	Paid-in or capital surplus, or land, bldg , and equipment fund			
Net Assets	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
Y 30	Total net assets or fund balances (see page 17 of the			
i e	, , -	2,643,662.	2,977,692.	
31	Instructions)		<u> </u>	
"	of the instructions)	2,643,662.	2,977,692.	
Part I	Analysis of Changes in Net Assets or Fund B			
	net assets or fund balances at beginning of year - Part II,		agree with	
	of-year figure reported on prior year's return)		- 1	2,643,662
				333,090
2 046	er amount from Part I, line 27a er increases not included in line 2 (itemize) ▶ATTACH	 MENT 7		940
	1 4 0 10		1 4 1	2,977,692
	lines 1, 2, and 3		· · · · · · · 	2,511,052
	reases not included in line 2 (itemize)		Jan 20	2,977,692
<u>6 lota</u>	I net assets or fund balances at end of year (line 4 minus l	<u>ine 5) - Paπ II, column (5),</u>	line 30 6	Eorm 990-PF (2009)

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
(a) List and 2-story br	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a SEE PART IV SCHE	DULE				
<u>b</u>					
<u>c</u>					
_d			-		<u>-</u>
e (e) Gross sales price	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini		
a		<u> </u>			
b					<u>. </u>
С		<u> </u>			
d		-			
e Complete and for accets of		and his the foundation on 12/21/60	<u> </u>		
Complete only for assets si	nowing gain in column (h) and own (i) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g (k), but not less t	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any	55.	Losses (from co	
a	· -	<u> </u>			
b				 	
С		-			
d			<u> </u>		
е			ļ		
2 Capital gain net income or	(net capital loss) {	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2 452,689.		
, ,	or (loss) as defined in sections 12	``			
-	line 8, column (c) (see pages 13 a	· · · · · · · · · · · · · · · · · · ·			
If (loss), enter -0- in Part I, I	ine 8		3		
	der Section 4940(e) for Reduce private foundations subject to the			>	
	leave this part blank the section 4942 tax on the distrib not qualify under section 4940(e)		ase period	d? □	Yes X No
1 Enter the appropriate amo	ount in each column for each year,	see page 18 of the instructions be	efore mak	ing any entries	
(a)	(b)	(c)		(d) Distribution re	atio
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	/ col (c))
2008	671,545.	13,712,382.			0.048974
2007	610,100. 401,657.	12,025,961. 11,988,837.	-		0.050732
2006	393,321.	9,621,206.			0.040881
2004	540,947.	10,371,483.	 		0.052157
	310,317.	10,3,1,103.			0.002107
2 Total of line 1, column (d)			2		0.226247
	for the 5-year base period - divide	the total on line 2 by 5, or by the			
	dation has been in existence if less		3		0.045249
4 Enter the net value of non	charitable-use assets for 2009 from	m Part X, line 5	4	10,	135,844.
5 Multiply line 4 by line 3	5		458,637.		
	nt income (19/ of Part I line 27h)				4,659.
	nt income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		463,296.
8 Enter qualifying distribution If line 8 is equal to or gree Part VI instructions on page	ns from Part XII, line 4	n Part VI, line 1b, and complete t	8 hat part	using a 1% ta	368,105. x rate See the
				-	

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	ie ins	truction	ons)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here					
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)					
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check		9,3	19.		
	here and enter 1% of Part I, line 27b					
С	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-) 2					
3	Add lines 1 and 2		_ 9,3	19.		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		9,3	19.		
6	Credits/Payments					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1, 290.					
b	Exempt foreign organizations-tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868) 6c 0.					
d	Backup withholding erroneously withheld					
7	Total credits and payments Add lines 6a through 6d		1,2	90.		
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		8,0	29.		
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 ▶ 0 · Refunded ▶ 11					
Par	t VII-A Statements Regarding Activities					
1 a	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		<u>X</u>		
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)?	1 b		X		
	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					
C	Did the foundation file Form 1120-POL for this year?	1 c		X		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation ▶\$(2) On foundation managers ▶\$					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers \$.,		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X		
	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		X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b		;-		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	\vdash	X		
	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		l ,			
	conflict with the state law remain in the governing instrument?	<u>6</u> 7	X			
7	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					
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) \triangleright NE ,					
b						
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	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	L '	X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses	10		Х		

	Contained togethering techniques			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u> X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13_	_ X	
	Website address N/A	E - 63	~~~	
14	The books are in care of ▶ PHILLIP G. SCHRAGER Located at ▶ 4405 SOUTH 96TH STREET OMAHA, NE ZIP+4 ▶ 68127	5-63	- -	-
	Located at ►4403 5001H 961H 51REE1 OMAHA, NE ZIP+4 ► 06127	- -		7
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	·
Do	and enter the amount of tax-exempt interest received or accrued during the year			
Pal	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Т	T.,	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	Tes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(1) Engage in the case of exertange, or leading or property mind dioqualities percent.	-		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1		
	disquamed person?	1		
	(3) Furnish goods, services, or racinities to (or accept them from) a disquantied person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	the benefit of disc of a disqualmed person,			
	(6) Agree to pay money or property to a government official? (Exception Check "No" if			}
	the foundation agreed to make a grant to or to employ the official for a penod after termination of government service, if terminating within 90 days)			
_	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
D	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	16		
	Organizations relying on a current notice regarding disaster assistance check here			
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
·	were not corrected before the first day of the tax year beginning in 2009?	1 c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			!
_	6e, Part XIII) for tax year(s) beginning before 2009?		1	1
	If "Yes," list the years ▶			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	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			
	foundation had excess business holdings in 2009)	3 b	_	 ,,
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 4a	 	X
þ	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?		 90-PF	X X
		0		12000

1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).								
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances				
ATTACHMENT 8		32,471.	8,030.	0				
2. Companyation of five highest paid ampleyage (at	har than those inc	ludad on line 1 oc	o page 22 of the incl	ructions)				

	1		1	_
2 Compensation of five highest-paid employees (ot If none, enter "NONE."	her than those inc	luded on line 1 - se	ee page 23 of the ins	tructions).
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
				_

Total number of other employees paid over \$50,000

Part VIII	and Contractors (continued)	ioyees,
Five high	est-paid independent contractors for professional services (see page 23 of the instructions). If non	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
IONE		
otal number	er of others receiving over \$50,000 for professional services	▶ NONE
Part IX-A	Summary of Direct Charitable Activities	
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number ons 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) two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	two largest program-related investments made by the localidation during the tax year on lines it and 2	Amount
1		-
		-
2		
		-
All other pro	gram-related investments. See page 24 of the instructions	
3 NONE		_ [
		-
Cotal Add I	ines 1 through 3	▶ !

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see page 24 of the instructions.)	ign foundat	ions,
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	10,249,726.
b	Average of monthly cash balances	1b	40,471.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	10,290,197.
е	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	10,290,197.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the construction of	4	154,353.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	10,135,844.
6	Minimum investment return. Enter 5% of line 5	6	506,792.
Pa	foundations and certain foreign organizations check here Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privately foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	506,792.
2 a	Tax on investment income for 2009 from Part VI, line 5 2a 9,319.		
b	Income tax for 2009 (This does not include the tax from Part VI) 2b	1	
C		2c	9,319.
3	Distributable amount before adjustments Subtract line 2c from line 1		497,473.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	1 _ 1	497,473.
6	Deduction from distributable amount (see page 25 of the instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	497,473.
Pa	art XII Qualifying Distributions (see page 25 of the instructions)	1 - 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	Т Т	
' a		1a	368,105.
b	Program related investments, total from Part IX-B		0.
	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	10	
2	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а		3a	0.
b	Cash distribution test (attach the required schedule)	3 b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	368,105.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)		N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	368,105.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v qualifies for the section 4940(e) reduction of tax in those years	whether the f	oundation

Pa	Part XIII Undistributed Income (see page 26 of the instructions)							
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009			
•	line 7				497,473.			
2	Undistributed income, if any, as of the end of 2009			. =	<u> </u>			
a	Enter amount for 2008 only	İ						
b	Total for pnor years 20 07 .20 06 .20 05							
3	Excess distributions carryover, if any, to 2009			 				
	From 2004 14,765.		·					
b	From 2005 0.							
С								
d	From 2006							
0	From 2008							
f	Total of lines 3a through e	26,945.						
4	Qualifying distributions for 2009 from Part XII, line 4 > \$ 368,105.							
а	Applied to 2008, but not more than line 2a							
b	Applied to undistributed income of prior years (Election 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				368,105.			
e	Remaining amount distributed out of corpus	0.			06.045			
5 6	Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as	26,945.			26,945.			
	indicated below:							
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5							
b	Prior years' undistributed income Subtract							
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.							
d	Subtract line 6c from line 6b Taxable							
е	amount - see page 27 of the instructions Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions							
f	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010.				102,423.			
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	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)		_					
9	Excess distributions carryover to 2010.							
	Subtract lines 7 and 8 from line 6a							
	Analysis of line 9							
	Excess from 2005							
b								
C					1			
d e	Excess from 2008 Excess from 2009							
	EA0000 HOIN 2000]				i			

Pa	n 990-PF (2009)			23-7	7184025	_ Page
	rt XIV Private Oper	ating Foundations	(see page 27 of the	instructions and P	art VII-A, question 9)	NOT APPLICA
а	If the foundation has r	eceived a ruling or o	determination letter the	at it is a private ope	rating	
_	foundation, and the ruling					
h	Check box to indicate who)(3) or 4942(j)
b	Check box to indicate will		a private operating roun	·	1 4342(),	(3) 01 [4942(<u>)</u> 1
а	Enter the lesser of the ad-	Tax year	_	Prior 3 years		(e) Total
	justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
	or the minimum investment return from Part X for each					
	year listed			 -		
þ	85% of line 2a	_		 		<u> </u>
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct					
e	of exempt activities		_			
•	directly for active conduct of exempt activities Subtract line					
	2d from line 2c					
	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 qualifying under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-					
	enter 2/3 of minimum invest-	1				
	ment return shown in Part X,	1			}	
_	line 6 for each year listed					
•	"Support" alternative test - enter	1				
	(1) Total support other than gross investment income	1				
	(interest, dividends, rents,	i				
	payments on securities loans (section 512(a)(5)),	i				
	or royalties)					
	(2) Support from general					
	public and 5 or more exempt organizations as		1			
	provided in section 4942					
	(j)(3)(B)(iii)					
	port from an exempt					
	organization					
	(4) Gross investment income		 -4- 4	ante if the form	detion had \$5 000	
- e		. •	e page 28 of the in		dation had \$5,000	or more in ass
_	Information Regarding		<u> </u>	<u> </u>		
а	List any managers of	the foundation who I	have contributed mo			ed by the foundat
	before the close of any	tax year (but only if t	hey have contributed	more than \$5,000) (See section 507(d)(2))	
	PHILLIP G.		400/	E Abo attraff		Jane
D	List any managers of					large portion of
-	ownership of a partner	ship or other entity) o	n which the foundation	ir nas a 10% or greate	si interest	
	MANIE					
	NONE	O a marity sales as O a se	4 0:64 1 0-1-1	bla sta Dascesses		
	NONE Information Regarding	Contribution, Gran	t, Gift, Loan, Scholars	hip, etc., Programs:		
	Information Regarding Check here ► X if the transposition of the transp	he foundation only or funds If the four	makes contributions adation makes gifts,	to preselected cha grants, etc (see pag	ritable organizations a ge 28 of the instructio	
	Information Regarding Check here ► X If the	he foundation only or funds If the four	makes contributions adation makes gifts,	to preselected cha grants, etc (see pag		
	Information Regarding Check here ► X if the transposition of the transp	he foundation only or funds If the four her conditions, compl	makes contributions indation makes gifts, lete items 2a, b, c, and	to preselected cha grants, etc (see pag d d	ge 28 of the instruction	
a	Information Regarding Check here ► X if the state of the	he foundation only or funds If the four her conditions, compl nd telephone number	makes contributions ndation makes gifts, lete items 2a, b, c, and of the person to who	to preselected cha grants, etc (see pag d d m applications should	ge 28 of the instruction	
a	Information Regarding Check here ► X if the state of the	he foundation only or funds If the four her conditions, compl nd telephone number	makes contributions ndation makes gifts, lete items 2a, b, c, and of the person to who	to preselected cha grants, etc (see pag d d m applications should	ge 28 of the instruction	
a b	Information Regarding Check here ► X if the state of the	he foundation only or funds. If the four her conditions, compl nd telephone number lications should be su	makes contributions ndation makes gifts, lete items 2a, b, c, and of the person to who	to preselected cha grants, etc (see pag d d m applications should	ge 28 of the instruction	
a	Information Regarding Check here ► X if the transposition of transposi	he foundation only or funds. If the four her conditions, compl nd telephone number lications should be su	makes contributions ndation makes gifts, lete items 2a, b, c, and of the person to who	to preselected cha grants, etc (see pag d d m applications should	ge 28 of the instruction	
a b	Information Regarding Check here ► X if the transposition of transposi	he foundation only or funds. If the four her conditions, completed the four her conditions, completed the four her conditions should be suppleted to the four her conditions.	makes contributions ndation makes gifts, lete items 2a, b, c, and of the person to who ibmitted and informat	to preselected cha grants, etc (see pag d d m applications should ion and materials the	pe 28 of the instruction be addressed y should include	ns) to individuals
a b c	Information Regarding Check here ► X if the submission deadles Any restrictions or lie	he foundation only or funds. If the four her conditions, completed the four her conditions, completed the four her conditions should be suppleted to the four her conditions.	makes contributions ndation makes gifts, lete items 2a, b, c, and of the person to who ibmitted and informat	to preselected cha grants, etc (see pag d d m applications should ion and materials the	pe 28 of the instruction be addressed y should include	ns) to individuals

3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
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)	or substantial contributor	recipient	Contribution	<u> </u>
a Paid during the year				
ATTACHMENT 9		ı		
ATTACHMENT 9				
		!		
]		
		1		
				l
Total			▶ 3a	368,105.
b Approved for future payment				•
		:		
		<u>L</u>		
Total	<u>.</u> <u></u>	<u></u>	<u>▶</u> 3b	- 000 PE (000

r gross amounts u	nless otherwise indicated		ated business income	Excluded by	section 512, 513, or 514	(e) Related or exemp function income
rogram service rev	enue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
·						
·						
' 						.
	its from government agencies					<u> </u>
	and assessments		_	14	90.	
_	est from securities			14	13,168.	
	r (loss) from real estate					
	property					
	ed property					
	(loss) from personal property					
Other investment in	ncome					
ain or (loss) from sa	les of assets other than inventory			18	452,689.	
let income or (loss) from special events					
•	s) from sales of inventory					
_						
						····-
	(1)				465.947	
	nns (b), (d), and (e)				465,947.	
Subtotal Add column otal. Add line 12, worksheet in line rt XVI-B Rel	columns (b), (d), and (e)	to venfy calc	ulations)	xempt Purp	oses	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e) 13 instructions on page 28	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	465,9
otal. Add coluntotal. Add line 12, worksheet in line rt XVI-B Rel e No. Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	465,9
otal. Add coluntotal. Add line 12, worksheet in line rt XVI-B Rel e No. Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	465,9
otal. Add coluntotal. Add line 12, worksheet in line rt XVI-B Rel e No. Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	465,9
otal. Add coluntotal. Add line 12, worksheet in line rt XVI-B Rel e No. Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	465,9
otal. Add line 12, worksheet in line rt XVI-B Rel e No. Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	465,9
otal. Add line 12, worksheet in line rt XVI-B Rel e No. Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	465,9
otal. Add coluntotal. Add line 12, worksheet in line rt XVI-B Rel e No. Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9
otal. Add coluntotal. Add line 12, worksheet in line rt XVI-B Rel e No. Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E	ed in column (other than b	oses (e) of Part XVI-A con	465,9
otal. Add line 12, worksheet in line rt XVI-B Rel e No. Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e) 13 instructions on page 28 ationship of Activities below how each activities complishment of the form	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e) 13 instructions on page 28 ationship of Activities below how each activities complishment of the form	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9
Subtotal Add colunt otal. Add line 12, worksheet in line rt XVI-B Rel Explain the ac	columns (b), (d), and (e) 13 instructions on page 28 ationship of Activities below how each activities complishment of the form	to verify calco	ulations) complishment of E ch income is report exempt purposes	ed in column (other than b	oses (e) of Part XVI-A con	465,9

	990-PF						23-710402					ge 13
Pai	t XVII	Information Exempt Orga		nsfers To and	Transac	tions	and Relation	onships \	With No	oncl	harit 	able
1	in sec	ne organization directly	ode (other than s	ection 501(c)(3) org	janizations)						Yes	No
а	Transi	zations? fers from the reporting f	oundation to a nonc	harıtable exempt orgaı	nization of				1			
	(1) Ca	ash							1	1a(1)		X
		ther assets							1	1a(2)		X
Ь		transactions	1.1.1	-1								х
		ales of assets to a nonch										$\frac{x}{x}$
		urchases of assets from ental of facilities, equipm								1b(2) 1b(3)	_	X
		eimbursement arrangeme										X
		pans or loan guarantees							I .			Х
		erformance of services of										Х
C	Sharır	ng of facilities, equipmen	it, mailing lists, other	assets, or paid emplo	yees				L	<u>1c</u>		X
d		answer to any of t		•	-				=			
		of the goods, other	•	•	•							
	value	in any transaction or	sharing arrangen	nent, show in colu	mn (d) th	e value	of the goods	s, other ass	sets, or s	ervice	s rec	eived
(a) i	ine no	(b) Amount involved	(c) Name of non-	charitable exempt organi	zation	(d) Des	cription of transfe	ers, transactions	s, and shann	ig arrai	ngemer	nts
		N/A				N/A						
	_											
												
				_								
							· · · · · · · · · · · · · · · · · · ·					
	_											
2 2	ls the	foundation directly or	Indirectly affiliated	with or related to	one or m	ore tay-	exempt organiz	ations descr	ihed in			
		n 501(c) of the Code (oth	· · · · · · · · · · · · · · · · · · ·					ations acsor		Ye	s 🗀	₹ _{No}
b		s," complete the following										
		(a) Name of organization	n	(b) Type of orga	anızatıon		(c) Description	of relationsh	ıp		
									_			
				 								
		 -										
												
		penalties of perjury, I decl										
		it is true, correct, and com										
		Janer & S	Giben		1	5-15	-10 L	Direc	tor			
<u>e</u>	Sı	gnature of officer or trustee				Date		Title				
Sign Here			1 ,		Date		Check if		reparer's id umber (See			n
gu	ž Ž	Preparer's	$A I_{\Lambda}$		J_ ¬		self-employe		age 30 of th			
S	Paid Preparer's Use Only	signature	179/L	COMPANY DC	5-/	-10		17	-06250	16		
	Paid Preparer's Use Only	Firm's name (or yours if self-employed), address		COMPANY, PC IRACLE HILLS	DB #	100		EIN ▶ 4 /	-06258	10		
	_	and ZIP code	OMAHA,	NE	DV., #		154-4418	Phone no	402-49	6-8	800	
Į.		ł .	Oth Hilly			- 0	1 1 1 0	I HONE HO		- 0		

Schedule B

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

Department of the Treasury
Internal Revenue Service
Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization		Employer identification number
PHILLIP AND TERRI	SCHRAGER FOUNDATION	23-7184025
Organization type (check or	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private fou	ndation
	501(c)(3) taxable private foundation	
	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,0 y one contributor. Complete Parts I and II	00 or more (in money or
Special Rules		
sections 509(a)(1	(c)(3) organization filing Form 990 or 990-EZ that met the 331/3% support and 170(b)(1)(A)(vi), and received from any one contributor, during the 2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ	year, a contribution of the greater
the year, aggrega	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received fricte contributions of more than \$1,000 for use exclusively for religious, charasses, or the prevention of cruelty to children or animals. Complete Parts I, I	table, scientific, literary, or
the year, contributed aggregate to more year for an exclusive applies to this org	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received fractions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these e than \$1,000. If this box is checked, enter here the total contributions that evely religious, charitable, etc., purpose. Do not complete any of the parts of particular transfer of the parts of th	contributions did not it were received during the inless the General Rule ntributions of \$5,000 or more
990-EZ, or 990-PF), but it m or on line 2 of its Form 990- 990-PF)	at is not covered by the General Rule and/or the Special Rules does not finds answer "No" on Part IV, line 2 of its Form 990, or check the box on line-PF, to certify that it does not meet the filing requirements of Schedule B (e H of its Form 990-EZ, Form 990, 990-EZ, or
For Privacy Act and Paperwork Refor Form 990, 990-EZ, or 990-PF.	eduction Act Notice, see the Instructions Sched	ule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

PHILLIP AND TERRI SCHRAGER FOUNDATION

Employer identification number 23-7184025

Part I Contributors (see instructions)	
--	--

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ESTATE OF JACK J. SCHRAGER 4405 S. 96TH STREET OMAHA, NE 68127	_ \$	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
2	ESTATE OF JACK J. SCHRAGER 4405 S. 96TH STREET OMAHA, NE 68127	- \$\$ 156,921.	Person X Payroll X Noncash X (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)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
No.	Name, address, and ZIP + 4	Aggregate contributions - \$	Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4	-	Person Payroll Noncash (Complete Part II if there is
(a)		- \$ - (c)	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)		- \$(c) Aggregate contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is

Name of organization PHILLIP AND TERRI SCHRAGER FOUNDATION

Employer identification number 23-7184025

D 4 II	Managah Dagaa	y (see instructions)
	Noncash Proben	v (see instructions)
		. y (000o., ao.,o.,o,

. Git u	(coo monatorio)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	57 SHARES BERKSHIRE HATHAWAY CLASS B	_	
			03/20/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

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

JSA 9E1254 1 000

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

PHILLIP AND TERRI SCHRAGER FOUNDATION
FORM 990-PF - PART IV

CAPITAL G	<u>AINS AND LO</u>	JOSES FUI	K IAX UN	INVE21	IVI IPI		<u> </u>
Kind of Property		Desc	ription		or Or	Date acquired	Date sold
Gross sale Depreciation price less allowed/ expenses of sale allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
CASC. IOSO ST. CAIGO WILLIAM			STRIBUTIONS	uu, 200.0		831.	
	1	NERAL ELECTI			P	01/06/2009	02/03/2009
12,235.	17,443.	PE: SECURI	1165			-5,208.	
	2000 HOME I	DEPOT INC	מדדכ		P	08/15/2008	04/09/2009
51,552.	54,635.	PE: SECURI	1163			-3,083.	
	I	ROQUEST ENI			P	05/05/2009	12/04/2009
11,119.	7,307.	FE. SECORI	1165			3,812.	
		RSOLL-RAND			Р	10/20/2008	VARIOUS
18,171.	19,150.	FE. SECORT	1155			-979.	
		RE HATHAWAY			D	12/12/1990	12/15/2009
496,527.	2,354.	.FE. SECORI				494,173.	
	i i	NAHER CORPORTER SECURI'			P	VARIOUS	VARIOUS
281,382.	316,660.	TE. SECORT	1155			-35,278.	
	1335 SH US	BANCORP (PE: SECURI)	TT F C		P	11/29/2007	06/05/2009
25,183.	43,175.	TE. SECORI	1110			-17,992.	
	I	GERSOLL-RAN			Р	10/20/2008	12/04/2009
37,578.	21,165.	TII. BECOM	1110			16,413.	
TOTAL GAIN(LOSS)			• • • • • • • • • • •			452,689.	

9E1730 1 000 94140S 2XCG 5/5/2010 5:07:48 PM V 09-6

ATTACHMENT 1

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	68.	•06
REVENUE AND EXPENSES PER BOOKS	68.	90
		TOTAL
DESCRIPTION	FIRST NATIONAL BANK RAYMOND JAMES	

DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF, PART I -

NET INVESTMENT	INCOME	13,168.
REVENUE AND EXPENSES	PER BOOKS	13,168.
		រួន
	DESCRIPTION	RAYMOND JAMES

13,168.

13,168.

TOTAL

ATTACHMENT 2

ı	١	•	•
	E		
	•		L

REVENUE AND EXPENSES PER BOOKS 2,563.	UE NET SES INVESTMENT SES INCOME 2,563. 0.
	NET INVESTMENT INCOME 0.
ATTACHMENT 3 ADJUSTED NET CI INCOME 0.	

ATTACHMENT 3

ATTACHMENT

FORM 990PF, PART I - TAXES

CHARITABLE	.0	0
ADJUSTED NET INCOME	.0	0
NET INVESTMENT INCOME	.0	0
REVENUE AND EXPENSES PER BOOKS	2,563.	2,563.
		TOTALS
DESCRIPTION	PAYROLL TAXES	

OTHER EXPENSES

PART I

FORM 990PF,

PAGE 23

ATTACHMENT 5

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ATTACH		ATTACHMENT

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ATTACHMENT 5

	CHARITABLE	PURPOSES	.0	0
6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	ADJUSIED NET	INCOME	0	0.
E	INVESTMENT	INCOME	.0	0
REVENUE	AND EXPENSES	PER BOOKS	20.	20.
				TOTALS
		DESCRIPTION		

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	ATTACHMENT	4
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PHILLIP AND TERRI SCHRAGER FOUNDATION

CORPORATE STOCK

PART

FORM 990PF,

ENDING <u>FMV</u>	9,424,000. 295,781. 0. 171,387. 187,302. 108,180. 127,800. 127,800.	10,586,010.
ENDING BOOK VALUE	1,557,147. 422,044. 0. 195,708. 156,921. 107,362. 123,860. 105,062.	2,834,489.
DESCRIPTION	BERKSHIRE HATHAWAY, INC. CL A US BANCORP DANAHER CORPORATION HOME DEPOT INC WELLS FARGO & COMPANY INGERSOLL-RAND COMPANY BERKSHIRE HATHAWAY, INC. CL B DEERE & COMPANY EMERSON ELECTRIC COMPANY GENERAL ELECTRIC COMPANY VERIZON COMMUNICATIONS INC	TOTALS

9

ATTACHMENT

ATTACHMENT 7

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

940. CURRENT YEAR QUID PRO QUO CONTRIBUTIONS

> 940. TOTAL

9790

ATTACHMENT 8

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EXPENSE ACCT AND OTHER ALLOWANCES						
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	Ö	. 0	,	.0	.0	ó
COMPENSATION	ò	°	.0	Ö	ó	ó
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR	PRESIDENT	SECRETARY/DIRECTOR	TREASURER/DIRECTOR	DIRECTOR	VICE PRESIDENT
NAME AND ADDRESS	PHILLIP G. SCHRAGER 4405 SOUTH 96TH STREET OMAHA, NE 68127	TERRI L. SCHRAGER 4405 SOUTH 96TH STREET OMAHA, NE 68127	RICHARD A. SCHRAGER 10039 FREDERICK STREET OMAHA, NE 68124	HARLEY SCHRAGER 4405 SOUTH 96TH STREET OMAHA, NE 68127	TIMOTHY SCHRAGER 4660 STELLA DRIVE NW ATLANTA, GA 30327	JEFFREY SCHRAGER 302 SOUTH 56TH STREET OMAHA, NE 68132

9790

7:15:09 AM V 09-6.1

5/17/2010

94140S 2XCG

ATTACHMENT 8 (CONT'D)

EXPENSE ACCT AND, OTHER ALLOWANCES

TO EMPLOYEE BENEFIT PLANS CONTRIBUTIONS

COMPENSATION

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8,030.

32,471.

8,030.

32,471.

0

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0

s, directors, and trustees	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR	EXECUTIVE DIRECTOR	GRAND TOTALS	9 AM V 09-6.1 9790
I - LIST OF OFFICERS,	TI	IIG	EXI		5/17/2010 7:15:09
FORM 990PF, PART VIII	NAME AND ADDRESS	ANGELA GOLDMAN 1760 MERTON RD. NE ATLANTA, GA 30306	JANET FARBER 4405 SOUTH 96TH STR OMAHA, NE 68127		94140S 2XCG 5

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PAGE 27

ATTACHMENT 9

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ATTACHMENT 9 (CONT'D)

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			ATTACHMENT 9 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CHILDREN'S HOSPITAL FOUNDATION OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	200
CHILDREN'S MUSEUM OMAHA, NE	NONE	EXEMPT CHARITABLE PURPOSES	200
CHILDREN'S RESPITE CARE CENTER OMAHA, NE	NONE	EXEMPT CHARITABLE PURPOSES	200
CHINATI FOUNDATION OMAHA, NE	NONE	EXEMPT CHARITABLE PURPOSES	2,000
COOL GIRLS, INC OMAHA, NE	NONE	EXEMPT CHARITABLE PURPOSES	1,000
DURHAM MUSEUM OMAHA, NE	NONE	EXEMPT CHARITABLE PURPOSES	200

23-7184025

ATTACHMENT 9 (CONT'D)

YEAR	
THE	
DURING	
PAID	
WANTS AND CONTRIBUTIONS PAID DURING	
AND	
GRANTS	
>	l
PART XV	
990PF,	
FORM	

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT AMOUNT AMOUNT	EXEMPT CHABITABLE PUBPOSES	0	NONE EXEMPT CHARITABLE PURPOSES 250.	ANONE EXEMPT CHARITABLE PURPOSES 225 PUBLIC	NONE EXEMPT CHARITABLE PURPOSES PUBLIC	NONE EXEMPT CHARITABLE PURPOSES 5,250 PUBLIC	NONE EXEMPT CHARITABLE PURPOSES 250 PUBLIC
۰ «		PUBLIC	NONE	NONE	NONE	NONE PUBLIC	NONE PUBLIC
PROTPIENT NAME AND ADDRESS	RECIATION FOUNDATION		FONTENELLE NATURE ASSOCIATION OMAHA, NE	FRIENDS FOREVER OMAHA, NE	FULFILLMENT FUND OMAHA, NE	GIRLS INC OMAHA, NE	HENRY DOORLY 200 OMAHA, NE

ATTACHMENT 9 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
INSTITUTE FOR HOLOCAUST EDUCATION OMAHA, NE	NONE	EXEMPT CHARITABLE PURPOSES	1,000
JCC MACCABI GAMES OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	8,000
JEWISH FEDERATION OF OMAHA OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	65,000
KANEKO OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	200
LAURITZEN GARDENS OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	200
MD ANDERSON CANCER CENTER OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	200

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
NATURE CONSERVANCY, NEBRASKA CHAPTER OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	1,000
NEBRASKA HUMANE SOCIETY OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	20
OMAHA COMMUNITY FOUNDATION OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	10,000
OMAHA PERFORMING ARTS OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	200
OMAHA SYMPHONY OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	200
OPEN DOOR MISSION OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	250

ATTACHMENT 9 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
OPERA OMAHA OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	2,500
PHILLIP AND TERRI SCHRAGER SUPPORTING FOUNDATION OMAHA, NE	NONE	EXEMPT CHARITABLE PURPOSES	20,000
PREVENT BLINDNESS NE OMAHA, NE	NONE	EXEMPT CHARITABLE PURPOSES	200
PROJECT HARMONY OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	10,000
RONALD MCDONALD HOUSE OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	200
SALVATION ARMY OMAHA, NE	NONE PUBLIC	EXEMPT CHARITABLE PURPOSES	200

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ATTACHMENT 9 (CONT'D)

AMOUNT	102,448.	200	15,000	8,300	750	100
PURPOSE OF GRANT OR CONTRIBUTION	EXEMPT CHARITABLE PURPOSES	EXEMPT CHARITABLE PURPOSES	EXEMPT CHARITABLE PURPOSES	EXEMPT CHARITABLE PURPOSES	EXEMPT CHARITABLE PURPOSES	EXEMPT CHARITABLE PURPOSES
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE	NOME
	PUBL.IC	PUBLIC	PUBLIC	PUBLIC	PUBLIC	PUBLIC
RECIPIENT NAME AND ADDRESS	TEMPLE ISRAEL	THEATRE ASPEN	UNITED WAY	UNIVERSITY OF NEBRASKA FOUNDATION	UNIVERSITY OF WISCONSIN FOUNDATION	UNO WOMEN'S WALK
	OMAHA, NE	OMAHA, NE	OMAHA, NE	OMAHA, NE	MADISON, WI	OMAHA, NE

9790

23-7184025

			ATTACHMENT 9 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
WESTSIDE COMMUNITY CLUB OMAHA, NE	NONE	EXEMPT CHARITABLE PURPOSES	100
WESTSIDE FOUNDATION OMAHA, NE	NONE	EXEMPT CHARITABLE PURPOSES	21,250

368, 105
TOTAL CONTRIBUTIONS PAID

ATTACHMENT 9 PAGE 36

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9-60 A

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SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

Employer identification number Name of estate or trust 23-7184025 PHILLIP AND TERRI SCHRAGER FOUNDATION Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (b) Date acquired (c) Date sold (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (see page 4 of the the entire year (d) Sales price (mo , day, yr) (mo, day, yr) Subtract (e) from (d) instructions) 1a 1b -5,458. b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, -5,458. column (3) on the back. Long-Term Capital Gains and Losses - Assets Held More Than One Year Part II (f) Gain or (loss) for (e) Cost or other basis (b) Date acquired (a) Description of property (c) Date sold the entire year Subtract (e) from (d) (see page 4 of the instructions) (d) Sales price (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) 6a 457,316. **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b. 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 831. 9 Capital gain distributions 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, 458,147. column (3) on the back Schedule D (Form 1041) 2009 For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

JSA 9F1210 2 000

Sche	dule D (Form 1041) 2009						Page 2
Pai	Summary of Parts I and II Caution: Read the instructions before completing this	part		eficiaries' page 5)	(2) Esta or trus		(3) Total
13	Net short-term gain or (loss)	13					-5,458.
14	Net long-term gain or (loss):						
а	Total for year	14a					458,147.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)						
1 E	28% rate gain	14c					452,689.
Note	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fort V, and do not complete Part IV. If line 15, column (3), is a net loss, complete I	rm 990					n (2), are net gains, go
Pai	t IV Capital Loss Limitation				· ·		
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T,	Part I, I	ne 4c, if a t	rust), the sr	naller of		
а	The loss on line 15, column (3) or b \$3,000 :: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag				[16 ()
Note	e: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag over Worksheet on page 7 of the instructions to figure your capital loss carryove	je 1, lir. er	ne 22 (or Fo	orm 990-T, li	ne 34), is a l	oss, con	nplete the Capital Loss
Pai							
	n 1041 filers. Complete this part only if both lines 14a and 15 in col		2) are gair	s, or an an	nount is ent	ered in	Part I or Part II and
there Cause	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mo tion: Skip this part and complete the worksheet on page 8 of the instru other line 14b, col (2) or line 14c, col (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero	re tha	n zero	•			
	n 990-T trusts. Complete this part only if both lines 14a and 15 a	re gair	ns, or qua	lified divide	ends are in	cluded	in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this partine 14b, col. (2) or line 14c, col. (2) is more than zero.	art and	complete	e the work	sheet on pa	age 8 c	of the instructions if
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line	34) .	17				
18	Enter the smaller of line 14a or 15 in column (2)						
	but not less than zero						
19	Enter the estate's or trust's qualified dividends						
	from Form 1041, line 2b(2) (or enter the qualified						
	dividends included in income in Part I of Form 990-T) 19		\dashv \mid				
20	Add lines 18 and 19						
21	If the estate or trust is filing Form 4952, enter the						
22	amount from line 4g, otherwise, enter -0 ▶ 21 Subtract line 21 from line 20 If zero or less, enter -0						
22 23	Subtract line 22 from line 17 If zero or less, enter -0-		— — 				
23	Subtract line 22 from line 17 in 2ero of less, enter -05	• • •	23	· · · · -			
24	Enter the smaller of the amount on line 17 or \$2,300		24				
25	Is the amount on line 23 equal to or more than the amount on line 2						
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" bo						
	No. Enter the amount from line 23		25				
26	Subtract line 25 from line 24		26				
27	Are the amounts on lines 22 and 26 the same?						
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or	ine 22	27				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28				
29	Subtract line 28 from line 27						
30	Multiply line 29 by 15% (15)					30	- <u>-</u>
31	Figure the tax on the amount on line 23 Use the 2009 Tax Ra						
	(see the Schedule Ginstructions in the instructions for Form 1041)					31	
20	Add lines 20 and 24					,	
32 33	Add lines 30 and 31					32	
JJ	(see the Schedule Ginstructions in the instructions for Form 1041).					33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33						
J -7	G, line 1a (or Form 990-T, line 36)					34	

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SCHEDULE D-1 (Form 1041)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule D (Form 1041)

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

2009

Employer identification number Name of estate or trust PHILLIP AND TERRI SCHRAGER FOUNDATION 23-7184025 Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (b) Date (f) Gain or (loss) Subtract (e) from (d) (c) Date sold (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (see page 4 of the acquired (mo, day, yr) instructions) (mo day, yr) 1a 1045 SH GENERAL ELECTRIC 01/06/2009 02/03/2009 12,235. 17,443. -5,208. CO 2000 HOME DEPOT INC 08/15/2008 04/09/2009 51,552. 54,635. -3,083. 2000 SH PETROQUEST ENERGY 7,307 05/05/2009 12/04/2009 11,119. 3,812. INC -979. 950 SH INGERSOLL-RAND CO 10/20/2008 VARIOUS 18,171. 19,150.

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b.

-5,458.

Schedule D-1 (Form 1041) 2009

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

		s Held More Tha		(a) Cost as other bear	
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales pnce (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (
5 SH BERSHIRE HATHAWAY CL A	12/12/1990	12/15/2009	496,527.	2,354.	494,17
4000 SH DANAHER CORPORATION	VARIOUS	VARIOUS	281,382.	316,660.	-35,27
1335 SH US BANCORP	11/29/2007	06/05/2009	25,183.	43,175.	-17,99
1050 SH INGERSOLL-RAND	10/20/2008	12/04/2009	37,578.	21,165.	16,41
					
· · · · · · · · · · · · · · · · · · ·					_
					<u>-</u>
Total. Combine the amounts in colum					450.00