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Department of the Treasury

### **Return of Private Foundation** or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

Interr	nal Reve	enue Service Note The foundation may be able	to use a copy of this retur	rn to satisfy sta	ite reporting	requirements	
For	calend		and ending				
G	Check a	all that apply   Initial return   Initial re	turn of a former public	charity		Final return	
			ress change		change		
Llee	the IR		- Contracting of the Contracting	1 1 1141110		loyer identification num	her
		S Hame of real leading.				-6154399	ibei
	label. Ierwise	KITTY M. PERKINS FOUNDATION	าง				
		,			B leiei	phone number (see page 1	0 of the instructions)
	print type.	Number and street (or P O box number if mail is not delivere	′ 1	Room/suite		<del></del>	
	Specif	304 NELSON ST. PO BOX 20	00			emption application is pend	. —
	ruction	Oily of town, state, and 211 code	60000		D 1. F	oreign organizations, check	k here
		CIEDRIDGE	69022			oreign organizations meeti	
_		ype of organization X Section 501(c)(3) exempt private			85	5% test, check here and at	tach computation 🕨 📗
ئىلىا	Section	1 4947(a)(1) nonexempt charitable trust Other taxable	e private foundation		-	ate foundation status was	
I Fa	aır marl	ket value of all assets at end   J Accounting method	X Cash   Acc	rual	secti	on 507(b)(1)(A), check her	e ▶
of	year (f	from Part II, col. (c), Uther (specify)			F If the	foundation is in a 60-mon	th termination
<u>lin</u>	ie 16) I	▶ \$ 7,603,807 (Part I, column (d) must	be on cash basis)		unde	r section 507(b)(1)(B), che	ck here
Pa	art l	Analysis of Revenue and Expenses (The	(a) Revenue and				(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inv		(c) Adjusted net	for charitable
		the amounts in column (a) (see page 11 of the instructions))	books	inco	me	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					(caoit basis offly)
	2	Check ► X if the foundation is <b>not</b> required to attach Sch B					
	3	Interest on savings and temporary cash investments	26,422		26,422	26,422	
	4	Dividends and interest from securities	178,963		78,963		
	'	Gross rents	178,903		10,903	1/8,963	
	5a		***************************************				
Revenue	b	Net rental income or (loss)	40 504				
en	6a	Net gain or (loss) from sale of assets not on line 10	-40,564				
Š	b	Gross sales price for all assets on line 6a 891,397			***************************************		
œ	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain				23,847	
	9	Income modifications					
	10a	Gross sales less returns & allowances					
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)				<u>-</u>	
	11	Other income (attach schedule) Stmt 1	845		845	845	
	12	Total. Add lines 1 through 11	165,666	2	06,230	230,077	
	13	Compensation of officers, directors, trustees, etc				, , , , , , , , , , , , , , , , , , , ,	
enses	14	Other employee salaries and wages					
Ĕ	15	Pension plans, employee benefits					·
	16a	Legal fees (attach schedule) See Stmt 2	1,430		1,430		
ш	b	Accounting fees (attach schedule) Stmt 3	4,440		4,440		<del></del>
ķ	c	Other professional fees (attach schedule)	7,340		3,330		
ati	1						<del></del>
str	17	Interest RECEIVED					<del></del>
<u>=</u>	18	Taxes (attach schodule) (see page 14 of the nexuctions)		<del></del>			
ΞĒ	19	Depreciation (attach schedule) and depelon					
75	20	ObcapanayAY 1 7 2010					<del></del>
<u>`</u> _	21	Trave, conferences, and meetings		·			
	22	Printing and purple at the ST					
_g	23	Other expenses (att sch) Stmt 4	13,281	ļ:	L3,281		·
₹.	24	Total operating and administrative expenses.					
<u>≅</u> ``		Add lines 13 through 23	19,151	:	19,151		0
عود	25	Contributions, gifts, grants paid	415,000				415,000
<u> ű</u>	26	Total expenses and disbursements. Add lines 24 and 25	434,151		19,151	0	415,000
SCANNEL MAY BACAUMINIStrative Exp	27	Subtract line 26 from line 12					
Ž	а	Excess of revenue over expenses and disbursements	-268,485				
ي	b	Net investment income (if negative, enter -0-)	·····	18	37,079		
"	С	Adjusted net income (if negative, enter -0-)			,	230,077	
				<del></del>			<del></del>

	Dare H	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	E	nd of	year
	Part I	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash—non-interest-bearing	50,852	539,7	26	539,726
	2	Savings and temporary cash investments	2,930,021	1,552,8	57	1,552,857
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶	[			
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶	1		- 1	
	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 (att schedule)			一	
	•	Less allowance for doubtful accounts	İ İ		Ī	
S	8	Inventories for sale or use			_	
Assets	9	Prepaid expenses and deferred charges				
S	10a	Investments—U S and state government obligations (attach schedule) Stmt 5	1,204,900	700,0	00	722,152
	b	Investments—corporate stock (attach schedule)  See Stmt 6	3,848,859	5,049,7		4,789,072
	C	Investments—corporate bonds (attach schedule)  See Stmt 7	82,505	3,043,1		4,105,012
	11	Investments—land, buildings, and equipment basis	02,303	······································		
	11	Less accumulated depreciation (attach sch.)	ĺ			
	12	Investments—mortgage loans			$\dashv$	
	13	Investments—other (attach schedule)				
		Land, buildings, and equipment basis				
ĺ	14		1		ŀ	
	45	Less accumulated depreciation (attach sch.)			-+	
	15	Other assets (describe )			┯╁	<del></del>
	16	Total assets (to be completed by all filers—see the	8,117,137	7,842,3	25	7,603,807
_	17	instructions. Also, see page 1, item I)	8,117,137	1,642,3	23	1,003,807
		Accounts payable and accrued expenses			[	
es	18	Grants payable		$\dashv$		
Liabilities	19	Deferred revenue			$\dashv$	
idi	20	Loans from officers, directors, trustees, and other disqualified persons			$\dashv$	
Ľ	21	Mortgages and other notes payable (attach schedule)			$\dashv$	
	22	Other liabilities (describe )	0		ᅰ	
Τ	23	Total liabilities (add lines 17 through 22)	4		괵	
S		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.				
nces	0.4	Unrestricted				
an	24				-	-
3al	25	Temporarily restricted			$\dashv$	
or Fund Balaı	26	Permanently restricted  Foundations that do not follow SFAS 117, check here ▶				
H		Foundations that do not follow SFAS 117, check here ► X and complete lines 27 through 31.				
L.	27		0 117 127	7,842,3	25	
	27	Capital stock, trust principal, or current funds	8,117,137	7,642,3	23	
Net Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund		<del></del>		
SS	29	Retained earnings, accumulated income, endowment, or other funds	<del></del>		-	
۲	30	Total net assets or fund balances (see page 17 of the	0 117 127	7 040 3	25	
Š		instructions)	8,117,137	7,842,3	23	
	31	Total liabilities and net assets/fund balances (see page 17	0 117 127	7 042 2	25	
_	David 1	of the instructions)	8,117,137	7,842,3	25	
	Part I				Т	
1		net assets or fund balances at beginning of year—Part II, column (a), line 30 (mu	ist agree with			0 117 137
_		of-year figure reported on prior year's return)			1	8,117,137
_		r amount from Part I, line 27a		<u> </u>	2	-268,485
		r increases not included in line 2 (itemize)		<b>├</b> ~	3	7 040 650
_		lines 1, 2, and 3		<del> </del>	4	7,848,652
		eases not included in line 2 (itemize) See Statement 8	(h) line 30	<u> </u>	5	6,327
_	iotal	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (	D), line 30		6	7,842,325

Page	-
Page	-

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income				
(a) List and descrit 2-story brick ware	be the kind(s) of property sold (e.g. real estate chouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date a		(d) Date sold (mo , day, yr )
1a See Worksheet						
<u>b</u>						<u></u>
<u>c</u>			ļ			
d		<del></del>				<del></del>
<u>e</u>	/D December all and	(1)				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	, , ,	r other basis ense of sale		h) Gain (h) (e) plus (f)	, ,
a		·				<del></del>
b					· · <u> </u>	
С						
d			·			
е		l				
Complete only for assets showin	g gain in column (h) and owned by the fo	oundation on 12/31/	69			(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	, , ,	ss of col (i) I (j), if any			ess than -0-) or m col (h))
a						
b				<u>-</u>		
С						
<u>d</u>						
е						
2 Capital gain net income or (net o	If gain, also enter in If (loss), enter -0- in			2		-40,564
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and (6	S)	Ì			
•	, column (c) (see pages 13 and 17 of the	e instructions)				
If (loss), enter -0- in Part I, line 8  Part V Qualification U	nder Section 4940(e) for Reduc		·	3		23,847
	tion 4942 tax on the distributable amoun	• •	base period? 📗 Ye	es 🗓 No		
1 Enter the appropriate amount in	each column for each year, see page 18	of the instructions	before making any en	tries		
(a)  Base penod years  Calendar year (or tax year beginning	(b) Adjusted qualifying distribution	ns Net value	(c) of nonchantable-use ass	ets		(d) bution ratio vided by col (c))
2008	434	,161	8,367,0	068		0.051889
2007	440	,500	9,098,8			0.048413
2006		,000	8,652,			0.047041
2005		,700	8,488,			0.049561
2004		,117	8,580,4	469	1	0.044417
2 Total of line 1, column (d)				2_		0.241321
•	5-year base period—divide the total on I has been in existence if less than 5 years		•	3		0.048264
·						
4 Enter the net value of noncharita	ble-use assets for 2009 from Part X, line	e 5		4	-	7,242,037
5 Multiply line 4 by line 3				5	<del> </del>	349,530
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)			6	<u> </u>	1,871
7 Add lines 5 and 6				7		351,401
8 Enter qualifying distributions from If line 8 is equal to or greater that Part VI instructions on page 18	n Part XII, line 4 In line 7, check the box in Part VI, line 1b	o, and complete that	t part using a 1% tax r	ate See the	e	415,000
						990-DE (2000)

Form	990-PF (2009) KITTY M. PERKINS FOUNDATION 36-6154399		P	<u>age 4</u>		
<u>Pa</u>	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	s)				
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 letter if necessary—see instructions)					
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,	<u>871</u>		
	here ▶ X 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-)			<u> </u>		
3	Add lines 1 and 2		<u>1,</u>	871		
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-		1,	871		
6	Credits/Payments					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 2,340					
b	Exempt foreign organizations—tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868)  6c					
d	Backup withholding erroneously withheld 6d 6d					
7	Total credits and payments Add lines 6a through 6d		2,	<u>340</u>		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u>469</u>		
<u>11</u>	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 469 Refunded ▶ 11					
<u>Pa</u>	rt 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	<u> </u>	Yes	No		
	participate or intervene in any political campaign?	1a		X		
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		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					
С	c Did the foundation file Form 1120-POL for this year?					
d	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 ▶ \$					
е	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?	4a		X		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		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					
	conflict with the state law remain in the governing instrument?	6	X	<u> </u>		
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	X	<u> </u>		
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <b>None</b>					
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	x	Ì		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	00		<del></del>		
•	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	-		<del></del> -		
	names and addresses	10		x		
		Form <b>99</b>	0-PF			
				,/		

Form	990-PF (2009) KITTY M. PERKINS FOUNDATION 36-6154	399			Р	age <b>5</b>
Pa	rt VII-A Statements Regarding Activities (continued)					
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption approximately an exemption approximately an exemption approximately an exemption approximately and exemption approximately	plication?		_13	X	Ļ
	Website address ► N/A					_
14		elephone no	308-6	97-	339	5
	304 NELSON		6000			
4.5	Located at CAMBRIDGE, NE	ZiP+4 ▶	69022	2		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	<b>⊾</b> 1	45			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year  Int VII-B Statements Regarding Activities for Which Form 4720 May Be Requi	rod	15			
F C		ieu		F	V	Na
1a	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  During the year did the foundation (either directly or indirectly)			<del></del>	Yes	No
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		22 140			
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No X No X No			
	(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			
	(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 period after					
	termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Reg	gulations				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)	?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		▶ ∐			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	t	4-			
	were not corrected before the first day of the tax year beginning in 2009?		N/A	1c		
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	П у-	X No			
	6e, Part XIII) for tax year(s) beginning before 2009?	∐ Yes	₩ NO			
b	If "Yes," list the years ► 20 , 20 , 20 , 20  Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(	2)				
J	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)					
	all years listed, answer "No" and attach statement—see page 20 of the instructions )	., 10	N/A	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		,			
	<b>▶</b> 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or	<del>_</del>	_			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by t	he				
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the laps	e 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 )		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable pur			4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardi.					
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning	ın 2009?		4b	0 5=	<u> </u>
			Fo	m 99	U-PF	(2009)

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orn	1990-PF (2009) KITTY M. PERKINS FOUNDATION	36-6	154399			<u>Pa</u>	<u>ige <b>6</b></u>
Pa	art VII-B Statements Regarding Activities for Which Form	720 May Be R	Required (conf	linued)			
5a	During the year did the foundation pay or incur any amount to						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	945(e))?		res 🗓 No			
	(2) Influence the outcome of any specific public election (see section 4955), or t	o carry on,	_			1	
	directly or indirectly, any voter registration drive?			res X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		$\Box$	res X No res X No			
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in	_				
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instr		$\Box$	res X No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or						
	purposes, or for the prevention of cruelty to children or animals?		$\Box$	res 🗓 No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under	r the exceptions de	escribed in				
	Regulations section 53 4945 or in a current notice regarding disaster assistance	•		N/A	5b		
	Organizations relying on a current notice regarding disaster assistance check he	· · · · ·	,	<b>▶</b> □ .			
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro						
-	because it maintained expenditure responsibility for the grant?		N/A 🗌	res No			
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)						
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	ıv premijims					
-	on a personal benefit contract?	., p		res X No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	sonal benefit contr	_		6b	İ	X
_	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the foundation a party to a prohibited tax sh	elter transaction?	$\Box$	res X No			
	If yes, did the foundation receive any proceeds or have any net income attributal		_	N/A	7b		
	art VIII Information About Officers, Directors, Trustees, Fo						
	and Contractors		J , J ,				
1 1	ist all officers, directors, trustees, foundation managers and their compensa-	tion (see page 22	of the instruction	ns).			
		(b) Title, and average	(c) Compensation	(d) Contributions to			
	(a) Name and address	hours per week	(If not paid, enter	employee benefit plans and deferred		pense aco	
		devoted to position	-0-)	compensation	Oule	r allowan	CE2
Se	e Statement 9						
					l		
2	Compensation of five highest-paid employees (other than those included on	line 1—see page	23 of the instruc	tions).			
	If none, enter "NONE."			·			
		(b) Title, and average		(d) Contributions to	(5) 50		
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred		pense ace r allowan	
		devoted to position		compensation	<u> </u>	_,,	
NC	ONE			•			
			ļ				
					<u> </u>		
		ļ	ļ	-	<u> </u>		
				1	1		
		L	ļ	L	بــــــــــــــــــــــــــــــــــــــ		
ota	I number of other employees paid over \$50,000						
				Fo	m <b>99</b> (	0-PF	(2009)

Form 990-PF (20	009) KITTY M. PERKINS FOUNDATION	36-6154399	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundand Contractors (continued)		
3 Five highe	est-paid independent contractors for professional services (see page	23 of the instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of	others receiving over \$50,000 for professional services		<b>&gt;</b>
Part IX-A	Summary of Direct Charitable Activities		
	on's four largest direct charitable activities during the tax year. Include relevant statistic d other beneficiaries served, conferences convened, research papers produced, etc.	cal information such as the number of	Expenses
1 N/A			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see page		
	largest program-related investments made by the foundation during the tax year on li	nes 1 and 2	Amount
1 N/A			
2			
All other program	n-related investments. See page 24 of the instructions		
Total. Add lines	1 through 3	•	

Form **990-PF** (2009)

Form	990-PF (2009) KITTY M. PERKINS FOUNDATION 36-6154399		Page <b>8</b>
Pa	Irt X Minimum Investment Return (All domestic foundations must complete this part. Fore	eign fo	oundations,
	see page 24 of the instructions.)	г	<del></del>
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	5,194,200
b	Average of monthly cash balances	1b	2,158,122
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	7,352,322
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	7,352,322
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of	}	
	the instructions)	4	110,285
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	7,242,037
6	Minimum investment return. Enter 5% of line 5	6	362, <u>102</u>
Pa	urt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	peratin	g
	foundations and certain foreign organizations check here  and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	362,102
2a	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)		
С	Add lines 2a and 2b	2c	1,871
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,871 360,231
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	360,231
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	7	360,231
-			
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	415,000
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	415,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	<sup>_</sup> T	
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	1,871
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	413,129
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	ation	

qualifies for the section 4940(e) reduction of tax in those years

Pa	rt XIII Undistributed Income	(see page 26 of	the instructions)			
			(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part 2	xi, [	Corpus	Years prior to 2008	2008	2009
	line 7					360,231
2	Undistributed income, if any, as of the er	nd of 2009				
а	Enter amount for 2008 only				414,078	
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to					
а	From 2004					
b						
c						
d	From 2007					
_	From 2008					
f	Total of lines 3a through e					
4	Qualifying distributions for 2009 from Pai	4 YII				· · · · · · · · · · · · · · · · · · ·
4	line 4 ▶ \$ 415,000	IT AII,				
_		20			414,078	
	Applied to 2008, but not more than line 2				313,070	
а	Applied to undistributed income of prior y					
	(Election required—see page 26 of the in	· ·				
С	Treated as distributions out of corpus (El					
	required—see page 26 of the instructions	s)				
	Applied to 2009 distributable amount					922
е	Remaining amount distributed out of corp	•				
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 Subtraction	ct line 5				
b	Prior years' undistributed income Subtra	act				
	line 4b from line 2b					
С	Enter the amount of prior years' undistrib	outed				
	income for which a notice of deficiency h					
	been issued, or on which the section 494					
	tax has been previously assessed			1		
d	Subtract line 6c from line 6b Taxable					
_	amount—see page 27 of the instructions			ļ		
6	Undistributed income for 2008 Subtract		***************************************			·····
U	4a from line 2a Taxable amount—see p.					
	27 of the instructions	-9-				
f	Undistributed income for 2009 Subtract	lines	<u> </u>			
'	4d and 5 from line 1. This amount must l					
	distributed in 2010					359,309
7		cornue				337,309
7	Amounts treated as distributions out of c	-			į	
	to satisfy requirements imposed by secti					
	170(b)(1)(F) or 4942(g)(3) (see page 27	or trie				
_	instructions)	4				·
8	Excess distributions carryover from 2004					
	applied on line 5 or line 7 (see page 27 of	or the				
_	instructions)	_				
9	Excess distributions carryover to 2010	<b>)</b> .				
	Subtract lines 7 and 8 from line 6a					<del></del>
10	Analysis of line 9	1				
а	Excess from 2005					
b	Excess from 2006					
С	Excess from 2007					
d	Excess from 2008					
е	Excess from 2009					

	rt XIV Private Operating For			structions and Part	VII-A question a)	Fage 10		
	If the foundation has received a ruling or				VII-A, question 3)	<del>·</del>		
ıa				ating				
<b>.</b>	foundation, and the ruling is effective for 2009, enter the date of the ruling  Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or 4942(j)(5)							
b 2a	Enter the lesser of the adjusted net	Tax year	ling loundation desc	Prior 3 years	942(J)(3) 01   1 4942	(1)(3)		
Za	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total		
	investment return from Part X for	(4) 2000	(8) 2000	(0) 2007	(4) 2000	<del></del>		
	each year listed							
b	85% of line 2a			<del> </del>				
c	Qualifying distributions from Part XII,	·		<del></del>	<del></del>			
·	line 4 for each year listed							
d	Amounts included in line 2c not used directly			<del> </del>		<del></del>		
_	for active conduct of exempt activities							
е	Qualifying distributions made directly			·				
•	for active conduct of exempt activities							
	Subtract line 2d from line 2c		į	1				
3	Complete 3a, b, or c for the							
	alternative test relied upon				]			
а	"Assets" alternative test—enter							
	(1) Value of all assets	1						
	(2) Value of assets qualifying under							
	section 4942(j)(3)(B)(i)							
b	"Endowment" alternative test-enter 2/3							
	of minimum investment return shown in				ļ			
	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				<u> </u>	·		
	and 5 or more exempt							
	organizations as provided in							
	section 4942(j)(3)(B)(iii)	}						
	(3) Largest amount of support from							
	an exempt organization	<u> </u>	ļ	<del> </del>	<u> </u>	·		
	(4) Gross investment income	- otion (Commist	Abi	f the foundation b	od 65 000 oz more	:		
Pa	ort XV Supplementary Inform	, ,	•		ad \$5,000 or more	e in assets at		
_	any time during the y Information Regarding Foundation Ma		or the monach	10115.]		<del></del>		
1	List any managers of the foundation who	-	re than 2% of the tota	al contributions received	by the foundation			
а	before the close of any tax year (but only				•			
	N/A	, it they have contribut	ed more than \$5,000	) (OCC 3COLOTI 007 (U)(2	.,,,			
b	List any managers of the foundation who	own 10% or more of	the stock of a corpora	ation (or an equally large	e portion of the			
-	ownership of a partnership or other entit		•					
	N/A	,,						
2	Information Regarding Contribution, G	Frant, Gift, Loan, Sch	olarship, etc., Progra	ams:				
			-	able organizations and	does not accept			
	unsolicited requests for funds If the four	ndation makes gifts, gi	rants, etc (see page	28 of the instructions) to	individuals or			
	organizations under other conditions, co	mplete items 2a, b, c,	and d					
а	The name, address, and telephone num			ould be addressed				
	RICHARD SHOEMAKER							
	304 NELSON ST CAMBR	IDGE NE 690	22	<del></del>				
b	The form in which applications should be			they should include				
	DETAIL AS TO PURPOS				·			
С	Any submission deadlines		· · · · · · · · · · · · · · · · · · ·					
	NONE				<del></del>			
d	Any restrictions or limitations on awards	, such as by geograph	ical areas, charitable	fields, kinds of institution	ons, or other factors			
	See Statement 10					5 000 DE 1000		

Part XV Supplementary Information (Co	ontinued)	utura Baumant		<del> </del>
3 Grants and Contributions Paid During the	If recipient is an individual,	l .		<del></del>
Recipient	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
See Statement 11				415,000
				413,000
			j	
			1	
Total			▶ 3a	415,00
b Approved for future payment				
N/A				
		<u></u>		
Total			<b>▶</b> 3b	

P	art XVI-A	Analysis of Income-Producing A	<u>ctivities</u>				
Ente	er gross amo	ounts unless otherwise indicated	Unrelated (a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See page 28 of
1	Program ser	vice revenue			code		the instructions )
	a						
				· <b>-</b>			
			_	- <del></del>			
	f						·
	g Fees an	d contracts from government agencies		<del> </del>			
2	Membership	dues and assessments					·
3	Interest on s	savings and temporary cash investments			14	26,422	
4	Dividends ai	nd interest from securities			14	178,963	
5	Net rental in	come or (loss) from real estate					
	a Debt-fin	anced property					<del></del>
	b Not deb	t-financed property					<del></del>
6	Net rental in	come or (loss) from personal property					
7	Other invest	ment income			14	845	
8	Gain or (loss	s) from sales of assets other than inventory			18	-40,564	
9	Net income	or (loss) from special events					
10	Gross profit	or (loss) from sales of inventory					
11	Other reven	ue a					
			_				
			_				
	e		_				
12	Subtotal Ad	ld columns (b), (d), and (e)			0	165,666	
13	Total. Add le	ine 12, columns (b), (d), and (e)				13	165,666
(Se	e worksheet	in line 13 instructions on page 28 to verify calcula	ations)				
P	art XVI-B	Relationship of Activities to the	<b>Accomplishme</b>	ent of Exempt	Purposes		
(	Line No. ▼	Explain below how each activity for which incor accomplishment of the foundation's exempt pu instructions)					
	3	THE MONEY RAISED FROM T	THESE THUE	STMENTS T	ा अभग २	PRIMARY	<del></del>
_	4	MEANS BY WHICH THE FOUN					·
	7	PURPOSE	DAITON AC	200111 11 11 11 11 11 11 11 11 11 11 11 1	10 110 1		<del></del>
	8	FORFOSE	<del></del>	<del> </del>			<del></del>
		<del> </del>	<del></del>	<del></del>	<del></del>	<del></del>	
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		L					
DAA	A						Form 990-PF (200

P	art XVII	Information Regardates Exempt Organization	_	ansfers To and	1 Transactions	and Relation	iships With N	ioncha	ritable		
1	Did the ord	ganization directly or ind		ge in any of the follo	owing with any other	er organization de	scribed			Yes	No.
•	_	501(c) of the Code (other		-		-				163	140
	organization		i than scot	on sor(c)(s) organi	zations) or in section	on ozr, relating to	political				
а	•	from the reporting found	ation to a n	oncharitable exemn	t organization of						
u	(1) Cash	nom the reporting round		ononantable exemp	t organization or				1a(1)		x
	(2) Other	assets							1a(1)		X
h	Other trans								14(2)		
~		of assets to a noncharit	ahle exemn	t organization					1b(1)	Ì	X
		ases of assets from a no	-	•	an .				1b(2)		X
	1	of facilities, equipment,			<b></b>				1b(3)	-	X
		ursement arrangements							1b(4)		X
	. ,	or loan guarantees							1b(5)		X
		mance of services or me	embership (	or fundraising solicit	ations				1b(6)		X
С	• •	facilities, equipment, m	•	•					1c		X
	_	ver to any of the above i	-			(b) should always	s show the fair ma	arket	<u> </u>		
		e goods, other assets, o									
		y transaction or sharing			-						
	(a) Line no	(b) Amount involved		of noncharitable exem			of transfers, transact		sharing arrange	ements	
N/	A										
									-		
		1				· · · · · · · · · · · · · · · · · · ·					
			ļ <u> </u>								
		<u> </u>					***				
	<del> </del>		ļ								
		-	<u> </u>								
			L						<del></del>		
	described	dation directly or indirect in section 501(c) of the	Code (othe	•		, •	ns		Y	es 🗓	No
b		omplete the following so	hedule	1							
	N/A	a) Name of organization	·····	(b) Type of or	rganization		(c) Description o	relationsh	NIP		
	N/A		<del></del>								
				<del> </del>		<del></del>			·		
			10	111					•• •• ••		
	Under pena	Ities of penury, I declare tha	have stand	med this return, includi	ng accompanying sch	edules and stateme	nts, and to the best	of my knov	vledge and		
	belie <del>f, it is tr</del>	Ities of perjury, I declare that <del>ue, correct, a</del> nd complete I		oregarer (other than ta	ixpayer or fiduciary) is	based on all inform	ation of which prepa	rer has any	knowledge		
ļ	<b>\</b>	1/1/1/1/	Œ	7h	5-10-	2010	Presid	'en!			
2	Signatu	ire of officer of trustee			Date		Title				-
Sign Here		<i></i>	$\sim$	1.		Date			Preparer's identif		
ڃ	ح م	Preparer's 🔪 🚄	1 ( N.	V		5/3/10	Check if self-employed	ı▶∏l	number (see Sig page 30 of the in		
3		signature V	4 VX	<u>~</u>		1970	- Jon Shiployed		P00295		
	Paid Preparer's Use Only	Firm's name (or yours if		NG & REID,							
		self-employed), address,		So. 34th S		100			47-080		
		and ZIP code	Linc	oln, NE 6	8516			Phone no	402-44		
									Form <b>99</b>	0-PF	(2009)

Form <b>990-P</b>	F	Capital Gains and Losses			ne	2009
Name	For calend	dar year 2009, or tax year beginning	, and	ending	Employer Ider	itification Number
		FOUNDATION	<del></del>		36-6154	399
I	(a) List and desci 2-story brick v	ribe the kind(s) of property sold, e.g., real est varehouse, or common stock, 200 shs. MLC	ate, (b) How Co P-Pi	acquired (i	c) Date acquired (mo , day, yr )	( <b>d)</b> Date sold (mo , day, yr )
(1) BURLING	TON NOR	THERN	D-D0	nation	Various	11/04/09
		SERVICES	P		1/27/09	05/01/09
(3) CROWN C			P	·	9/27/00	01/05/09
(4) MOTOROL			F		Various	01/05/09
(5) MOTOROL					Various_	06/15/09
(6) COMCAST			P		Various	11/06/09
<del></del>	MOTORS MORRIS		P		05/05/05 02/17/94	06/09/09 06/15/09
(8) <b>PHILLIP</b> (9)	MORRIS	·			)Z/ 1// 34	00/13/09
(10)	<del></del>					· · · · · · · · · · · · · · · · · · ·
(11)						
(12)						
(13)		·····				,
(14)						
(15)			,			
(e) Gross sal	es price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		( <b>h)</b> Gain (e) plus (	or (loss) n minus (g)
(1) 9'	7,137		66,48	5		30,652
(2) 2:	2,300		29,10			-6,805
<u> </u>	3,879		215,59			58,285
	0,541		146,93			06,390
	4,798		258,59			93,796
(6) <b>7</b> :	1,371 0,000		96,07 82,50			24,705 12,505
(7) <b>7</b> (8) <b>15</b> :			36,67			14,700
(9)			00/01	_		
(10)						
(11)						
(12)						
(13)						
(14)						
(15)			_ <b>L</b>			
Complete only for	or assets shown	ng gain in column (h) and owned by the	e foundation on 12/31/69			
(i) FM∨ aso		(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(I) Gains (C col (k), but not l Losses (fro	ol (h) gain minus ess than -0-) <b>or</b> m col (h))
(1)						30,652
(2)						-6,80 <u>5</u>
(3)						58,285
(4)						06,390 93,796
(5) (6)	· · · · · · · · · · · · · · · · · · ·					24,705
(7)						12,505
(8)	<del></del>					14,700
(9)						
(10)						
(11)						
(12)	<del></del>	<u></u>				
(13)		<del></del>				
(14) (15)		<del>                                     </del>			-	
· · · /		·				

5/3/2010 11:43 AM 845 845 Charitable Purpose Adjusted Net Charitable Purpose Income Ś 845 845 Net Investment Adjusted Net Adjusted Net Income Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees Statement 1 - Form 990-PF, Part I, Line 11 - Other Income Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees ረን 2,1002,340 845 845 1,430 1,430 4,440 Revenue per Books Investment Investment **Federal Statements** Net Š 2,100 2,340 1,430 4,440 1,430 Total Total 340 KITTY M. PERKINS FOUNDATION Description MOTOROLA SETTLEMENT PMT Description Description Indirect Legal Fees FYE: 12/31/2009 36-6154399 Total Total Total

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340° KITTY M. PERKINS FOUNDATION

**Federal Statements** 

FYE: 12/31/2009

36-6154399

Statement 5 - Form 990-PF	, Part II.	I, Line 10a - US and	State Government Investments

	Beginning of Year		End of Year	Basis of Valuation	_	Fair Market Value
	\$ 1,204,900	\$	700,000		\$_	722,15
Total	\$ 1,204,900	Ś	700,000		\$	722,15
	Part II, Line 10			k Investme		722,13
Statement 6 -				k Investme  Basis of  Valuation		Fair Market Value
Statement 6 -	Part II, Line 10 Beginning	 b - C	Corporate Stoc	Basis of		Fair Market

### Statement 7 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description							
	_	Beginning of Year	End of Year		Basis of Valuation	_	Fair Market Value
	\$_	82,505	\$			\$_	
Total	\$	82,505	\$	0		\$_	0

### Statement 8 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	 Amount
PRIOR YEAR ADJUSTMENT	\$ 6,327
Total	\$ 6,327

5/3/2010 11:43 AM

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5/3/	

### 340 KITTY M. PERKINS FOUNDATION 36-6154399 FYE: 12/31/2009

## Federal Statements

Etc.
Trustees,
Directors,
f Officers,
1 - List o
Line
Part VIII,
990-PF,
- Form
Statement 9

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
WILLIAM E. SHOEMAKER 304 NELSON ST. CAMBRIDGE NE 69022	SECY/DIRECTR	0.00	0	0	0
J. RICHARD SHOEMAKER BOX 38 CAMBRIDGE NE 69022	PRESIDENT	00.00	0	0	0
KATHRYN HEITMANN BOX 340 CAMBRIDGE NE 69022	DIRECTOR	0.00	0	0	0
D. CHARLES SHOEMAKER BOX 309 HASTINGS NE 68902	DIRECTOR	00.0	0	0	0
G. FRANKLIN SHOEMAKER BOX 96 HOLBROOK NE 68948	DIRECTOR	00.00	0	0	0

340 KITTY M. PERKINS FOUNDATION

**Federal Statements** 

36-6154399 FYE: 12/31/2009 5/3/2010 11:43 AM

### Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

DETAIL AS TO PURPOSE FOR FUNDS AND AMOUNT REQUESTED.

### Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

NONE

### Statement 10 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

LIMITED IN GENERAL TO THOSE EXEMPT ORGANIZATIONS LOCATED IN SOUTH CENTRAL AND SOUTHWESTERN NEBRASKA.

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3
4
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# 340 KITTY M. PERKINS FOUNDATION

36-6154399 FYE: 12/31/2009

## Federal Statements

Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

	Amount	2,000	15,000	2,000	2,000	10,000	100,000	2,000	11,000	10,000	20,000	5,000	23,000	2,000	10,000	5,000	10,000	10,000	20,000
	Purpose	PUBLIC LIBRARY SUPPORT	PUBLIC LIBRARY SUPPORT	MEDICAL EDUCATION & RESEARCH	COMMUNITY HEALTH	SCHOLARSHIPS	BUILDING PROJECT	CANCER RESEARCH	ECONOMIC DEVELOPMENT	GENERAL SUPPORT	LEADERSHIP FUND	SPADY GARDEN	GENERAL SUPPORT	GENERAL SUPPORT	GENERAL SUPPORT	GENERAL SUPPORT	GENERAL SUPPORT	GENERAL SUPPORT	ABBOTT SISTERS FUND
	Status	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501 (c) (3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	AVE 501 (c) (3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)	501(c)(3)
Address	Relationship	PENN NONE	n n		WEST ZND ST. NONE	W HIGHWAY 6 & NONE	NONE	NONE	722 PATTERSON ST. NONE	711	N. TURNER NONE	N. SAINT JOSEPH NONE	NELSON ST.	٦. A	NON!	NONE	NONE	SOUTH 13TH ST.	ZII N. WASHINGION SI NONE
Name	Address	' M		MAYO FOUNDATION ROCHESTER MN 55901	GARDEN COUNTY HOSPITAL OSHKOSH NE 69154	TRI-VALLEY MEDICAL FOUNDA CAMBRIDGE NE 69022	TRI-VALLEY MEDICAL FOUNDA CAMBRIDGE NE 69022	a	CITY OF CAMBRIDGE CAMBRIDGE NE 69022	PRAIRIE LOFT CENTER HASTINGS NE 68902	HASTINGS COLLEGE HASTINGS NE 68901	ASTINGS	1	CITY OF CAMBRIDGE CAMBRIDGE NE 69022	크	$\sim$	NEBR EDUC TELECOMM. LINCOLN NE 68503	$\sim$ $-$	G.I. PUBLIC LIBRARY FUN GRAND ISLAND NE 68801

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36-6154399 FYE: 12/31/2009

Federal Statements

Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

	Amount		25,000		2,000		1,000		1,000		1,000		10,000		2,000		100,000		5,000	415,000
	Purpose		GENERAL SUPPORT		GENERAL SUPPORT		GENERAL SUPPORT		GENERAL SUPPORT		OB OR EXTENDED CARE UNIT		GENERAL SUPPORT		BAND UNIFORMS		SHOEMAKER FUND		CITY ACTION PROGRAMS	
	Status																			
	Ste		501(c)(3)		501(c)(3)		501(c)(3)		501(c)(3)		501(c)(3)	ω	501(c)(3)		501(c)(3)	STE 300	501(c)(3)		503(c)(3)	
Address	Relationship	1014 BOSWELL AVE	NONE	PO BOX 196	NONE	120 PARK AVENUE	NONE	520 EAST 10TH ST	NONE	645 OSAGE ST.	NONE	941 'O' ST., SUITE	NONE	110 E. 35TH ST.	NONE	1010 LINCOLN MALL	NONE	CITY ADMINISTRATOR	NONE	
Name	Address	DOANE COLLEGE	CRETE NE 68333	FAMILIES OF SPINAL MA	LIBERTYVILLE IL 60048	THAYER CTY MEM'L HOSPITAL	HEBRON NE 68370	BRODSTONE MEM'L HOSPITAL	SUPERIOR NE 68978	CHEYENNE CTY HOSP FDN	SIDNEY NE 69162	LEGAL AID OF NEBRASKA	LINCOLN NE 68508	KEARNEY CATHOLIC H.S. FDN	KEARNEY NE 68847	UNIVERSITY OF NEBR FDN	LINCOLN NE 68508	VILLAGE OF BYRON	BYRON NE 68325	Total