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SCANNED APR 15 2013

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

Depa	artment o	of the Treasury	eu as a Private	roundation	Off		2011
		enue Service - Note The foundation may be a			ate reporting requ	urements	
_		dar year 2011 or tax year beginning 10/01/11, pundation	and ending U9	/30/12	A Empl	over identification number	-
144	anne on ic	Jungation			A Cinipi	oyer identification number	
7	HE	HAMPTON FAMILY FOUNDATION			47	-0815827	
		nd street (or P O box number if mail is not delivered to street address)		Room/suite		hone number (see instruction	s)
_3	701	UNION DRIVE		100	40	2-489-8858	
	•	m, state, and ZIP code			C If exe	mption application is pending	check here
		COLN NE 68516					. –
G	Check		rn of a former publi	c charity	D 1. Fo	oreign organizations, check he	are 🕨 🗀
		Final return Amended			I	oreign organizations meeting to	
		Address change Name cha			_	6% test, check here and attack	Computation
		type of organization. X Section 501(c)(3) exempt private				ate foundation status was terr	ninated under
			le private foundatio		_	n 507(b)(1)(A), check here	
		rket value of all assets at J Accounting method	X Cash	Accrual	l l	foundation is in a 60-month te section 507(b)(1)(B), check h	▶
		/ear (from Part II, col (c), Other (specify)	h		under	section 507(b)(1)(b), Gleck I	
	ne 16)	····			<u> </u>		(d) Disbursements
₹.	art i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	, , ,	investment come	(c) Adjusted net	for charitable purposes
		the amounts in column (a) (see instructions))	books			ilicomo	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	170,0	00			
	2	Check ▶ ☐ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments				201	
	4	Dividends and interest from securities	6.	91	691	691	
	5a	Gross rents				······································	
ne	b	Net rental income or (loss)					
ē	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)			0		
Œ	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns & allowances					
	b	Less Cost of goods Soid IVEL					
	С	Gross profit or (loss) (attach schedule) (0)					
	11	Other income (attach schedule)) 13					
	12	Total. Add lines 1 through 11	170,69		691	691	
es	13	Compensation of officers, directors, trustees, etc		0			
SE	14	Other employee salaries and wages Pension blans, employee benefits					
ᅙ	15	Pension blans, employee benefits				· .	<u> </u>
EX	16a	Legal fees (attach schedule) Accounting fees (attach schedule) Stmt 1	1,3	75			
é	b	· · · · · · · · · · · · · · · · · · ·	2,2		2,276		
ati	C	·	۷,۷	, ,	2,210		
str	17 18	Interest Taxes (attach schedule) (see instructions)		+	-		
Ë	19	Depreciation (attach schedule) and depletion		 			
투	20	Occupancy		 			
Ž	21	Travel, conferences, and meetings			-		
and Administrative Expens	22	Printing and publications					
D a	23	Other expenses (att sch) Stmt 3		39			
ţi	24	Total operating and administrative expenses.					
era		Add lines 13 through 23	3,74		2,276	0	0
Operating	25	Contributions, gifts, grants paid	11,25				11,250
	26	Total expenses and disbursements. Add lines 24 and 25	14,99	90	2,276	0	11,250
	27	Subtract line 26 from line 12.	455 -	. 1	l		
	a	Excess of revenue over expenses and disbursements	155,70	11			
	b	Net investment income (if negative, enter -0-)	<u> </u>		<u> </u>	691	
	C	Adjusted net income (if negative, enter -0-)			i	0 J T	

F	orm 99	0-PF (2011) THE HAMPTON FAMILY FOUNDATION	47-0815827	<u> </u>	Page 2
_			Beginning of year	End of	year
_	Part i	* Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 `	3			040 016
	2	Savings and temporary cash investments	95,276	243,818	243,818
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	1		
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		1	
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
		Less. allowance for doubtful accounts ▶ 0			
G	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Asi	10a	Investments—U.S. and state government obligations (attach schedule)			
•	b	Investments—corporate stock (attach schedule) See Stmt 4	89,359	89,518	52,123
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
	'''	Less accumulated depreciation (attach sch.)	1	İ	
	42				
	12	Investmentsmortgage loans			
	13	Investments—other (attach schedule)			
i	14	Land, buildings, and equipment basis		İ	
		Less accumulated depreciation (attach sch.)			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the	184,635	333,336	295,941
-		instructions Also, see page 1, item I)	164,655	333,330	233,341
	17	Accounts payable and accrued expenses			
G	18	Grants payable			
Liabilities	19	Deferred revenue	 		
≣	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>ia</u>	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe See Statement 5)	6,500		
	23	Total liabilities (add lines 17 through 22)	6,500	0	
		Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26 and lines 30 and 31.			
일	24	Unrestricted	178,135	333,336	
Net Assets or Fund Balances	25	Temporarily restricted			
9	26	Permanently restricted			
Ĭ		Foundations that do not follow SFAS 117, check here			
딘		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ᇷ	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
7	30	Total net assets or fund balances (see instructions)	178,135	333,336	
ž	31	Total liabilities and net assets/fund balances (see			
	•	instructions)	184,635	333,336	
_	Part I				
		net assets or fund balances at beginning of year—Part II, column (a), line 30 (mu	st agree with		
•		of-year figure reported on prior year's return)	-	1	178,135
2		amount from Part I, line 27a		2	155,701
		rincreases not included in line 2 (itemize)		3	
				4	333,836
4	Door	nes 1, 2, and 3 eases not included in line 2 (itemize) ► See Statement 6		5	500
5	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b) line 30	6	333,336
_6	rotal	het assets of fund parances at end of year time 4 minus line 3)—Fart it, column (U/1 IIIIO UU	<u></u>	5 990-PF (2011)

Control of the Contro	MPTON FAMILI FOUNDA			1-0813821			Page
(a) List and des	and Losses for Tax on Invest cribe the kind(s) of property sold (e.g., real estate, varehouse, or common stock, 200 shs MLC Co)		ome	(b) How acquired P—Purchase D—Donation	(c) Date ac		(d) Date sold (mo , day, yr)
1a N/A				D-Donation			
b							
c							
d							
e		-					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) Cost or ot plus expens			(h) Gain o (e) plus (f) n	•
a							
b							
c							
d							
e	<u> </u>						
Complete only for assets showing	ng gain in column (h) and owned by th	e foundation	on 12/31/69		(I) G	ains (Col. (h	n) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess of over col (j)			(), but not les Losses (from	ss than -0-) or n col (h))
a							
b							
c							
d							
е							
2 Capital gain net income or (net c	apital loss) If gain, also enter f (loss), enter -0-				2		
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and	i (6)					
If gain, also enter in Part I, line 8	, column (c) (see instructions) If (loss	s), enter -0- ı	n 🔒				
Part V Qualification U	nder Section 4940(e) for Red				3		
"Yes," the foundation does not qua	tion 4942 tax on the distributable amo lify under section 4940(e) Do not con	nplete this p	art	<u></u>		[Yes X N
	each column for each year, see the in	structions be	efore making	any entries			
(a) Base period years	(b) Adjusted qualifying distribution	nne	Net value of	(c) nonchantable-use assets		Distribu	(d) ution ratio
Calendar year (or tax year beginning in	<u>/</u>	7,200	Net Value of	165,7		(∞l (b) divid	0.04342
2010		6,750		144,3			0.04542
2009		0,956		138,7			0.07895
2008 2007		5,375		222,6			0.06906
2006		4,050	·	309,6		<u></u>	0.04537
							<u> </u>
2 Total of line 1, column (d)					2		0.28359
-	5-year base period—divide the total or as been in existence if less than 5 years		, or by the		3		0.05671
Enter the net value of noncharital	ble-use assets for 2011 from Part X, li	ne 5			4		220,59
5 Multiply line 4 by line 3					5		12,51
	on (40) of Part Line 27h)					_	
Enter 1% of net investment incon	ie (170 01 Fait I, iiile 270)				6		10 51
7 Add lines 5 and 6					7		12,51
•	Part XII, line 4 I line 7, check the box in Part VI, line	1b, and com	plete that par	t using a 1% tax rai	8 e See the		11,250
Part VI instructions							
						Fo	om 990-PF (201

Forn	n 990-PF (2011) THE HAMPTON FAMILY FOUNDATION 47-0815827			F	age 4
Pi	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)				
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)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			
	here ▶ and enter 1% of Part I, line 27b	1			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	,			
	Part I, line 12, col (b)	İ			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			C
3		3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			C
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			C
6	Credits/Payments				
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 81				
b	Exempt foreign organizations—tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7			81
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	0			81
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 81 Refunded ▶ 11	<u>1 </u>			
Pa	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			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				l
	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	Did the foundation file Form 1120-POL for this year?		1c		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?	37/3	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	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			v	
	conflict with the state law remain in the governing instrument?		6	$\frac{\mathbf{x}}{\mathbf{x}}$	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part X\	'	7		
	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ NE				
b	if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	<u> </u>	
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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9		<u> </u>
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X

355 03/08/2013 3 09 PM 47-0815827 Form 990-PF (2011) THE HAMPTON FAMILY FOUNDATION Statements Regarding Activities (continued) At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the X 11 meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified 12 X 12 person had advisory privileges? If "Yes," attach statement (see instructions) X 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A Telephone no ▶ 402-489-8858 The books are in care of ▶ MICHAEL LINDBERG 14 3701 UNION DRIVE, SUITE 100 ZIP+4 ▶ 68516 Located at ▶ LINCOLN Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here 15 and enter the amount of tax-exempt interest received or accrued during the year Yes No At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority 16 X 16 over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country Statements Regarding Activities for Which Form 4720 May Be Required Part VII-B No Yes File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly) X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a No disqualified person? X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X Yes (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 Yes the benefit or use of a disqualified 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 period after Yes X No 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 1b section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? 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 N/A 1c were not corrected before the first day of the tax year beginning in 2011? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private 2 operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and Yes X No 6e, Part XIII) for tax year(s) beginning before 2011? , 20 If "Yes." list the years ▶ 20 , 20 , 20 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 N/A 2b all years listed, answer "No" and attach statement—see instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here Did the foundation hold more than a 2% direct or indirect interest in any business enterprise X No Yes at any time during the year?

If "Yes," did it have excess business holdings in 2011 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

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

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

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 2011)

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X

X

3ь

4a

N/A

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	rt VII-B. Statements Regarding Activities for Which Form	n 4720 May Be	Required (cor	<u>ntinued)</u>		·····
5a	During the year did the foundation pay or incur any amount to					
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section			Yes X No		
	(2) Influence the outcome of any specific public election (see section 4955),	or to carry on,		_		
	directly or indirectly, any voter registration drive?			Yes X No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes	?		Yes X No		
	(4) Provide a grant to an organization other than a charitable, etc., organization	on described in				
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)			Yes X No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational				
	purposes, or for the prevention of cruelty to children or animals?			Yes X No		
þ	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	•		4-		
	Regulations section 53 4945 or in a current notice regarding disaster assistan	•	?	N/A	5b	
	Organizations relying on a current notice regarding disaster assistance check			▶ []		
	If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax	1			
	because it maintained expenditure responsibility for the grant?		N/A 📗	Yes No		
	If "Yes," attach the statement required by Regulations section 53 4945-5(d).					
а	Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums				
	on a personal benefit contract?			Yes 🔀 No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a $\mathfrak p$	ersonal benefit cont	ract?		6b	
	If "Yes" to 6b, file Form 8870					
а	At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		Yes 🗓 No		
	If Yes, did the foundation receive any proceeds or have any net income attribu	table to the transact	ion?	N/A	7b	
ar	t VIII Information About Officers, Directors, Trustees, F	oundation Man	agers, Highly	Paid Employ	ees,	
	and Contractors					
Li	st all officers, directors, trustees, foundation managers and their comper	sation (see instruc	tions).			
		(b) Title, and average	(c) Compensation	(d) Contributions to		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred		ense accou allowances
		devoted to position	-0-7	compensation		
See	Statement 7				İ	
					<u> </u>	
				ł	ł	
					Į.	
					L	
	Compensation of five highest-paid employees (other than those included	on line 1—see inst	ructions). If non	e, enter		
	Compensation of five highest-paid employees (other than those included 'NONE."	on line 1—see inst	ructions). If non	e, enter		
		T 1	ructions). If non	e, enter		
		(b) Title, and average hours per week	ructions). If non-	(d) Contributions to employee benefit		nse accour
	'NONE."	(b) Title, and average		(d) Contributions to		
	'NONE." (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred		
	'NONE." (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred		
	'NONE." (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred		
	'NONE." (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred		
	'NONE." (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred		
	'NONE." (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred		
	'NONE." (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred		nse accour illowances
	'NONE." (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred		
	'NONE." (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred		
	'NONE." (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred		

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Part VIII .	Information About Officers, Directors, Trustees, Four and Contractors (continued)	ndation Managers, Highly Paid	Employees,
3 Five high	nest-paid independent contractors for professional services (see inst	tructions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of	f others receiving over \$50,000 for professional services	······································	<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
	's four largest direct charitable activities during the tax year. Include relevant statistical information other beneficiaries served, conferences convened, research papers produced, etc.	n such as the number of	Expenses
1 N/A			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instr	uctions)	
	rgest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2	<u> </u>		
All other program-re	elated investments. See instructions		
3			
otal. Add lines	1 through 3		

b	Program-related investments—total from Part IX-B	1 <u>b</u>	
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	1 1	
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	11,250
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 instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,250

Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2011)

47-0815827 Page 9 Form 990-PF (2011) THE HAMPTON FAMILY FOUNDATION Undistributed Income (see instructions) (d) (c) (a) (b) 2011 Years prior to 2010 2010 Distributable amount for 2011 from Part XI, Corpus 11,030 Undistributed income, if any, as of the end of 2011 7,497 a Enter amount for 2010 only b Total for prior years 20____ _ , 20_ Excess distributions carryover, if any, to 2011 a From 2006 **b** From 2007 c From 2008 d From 2009 e From 2010 f Total of lines 3a through e Qualifying distributions for 2011 from Part XII, 11,250 line 4 ▶ \$ 7,497 a Applied to 2010, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions) c Treated as distributions out of corpus (Election required—see instructions) 3,753 d Applied to 2011 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c 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 amount-see instructions e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be 7,277 distributed in 2012 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a Analysis of line 9 10 a Excess from 2007 Excess from 2008 Excess from 2009 Excess from 2010

Excess from 2011

355 03/08/2013 3 09 PM

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Statement 9 11,250 11,250 Total **▶** 3a b Approved for future payment N/A

▶ 3b

Total

Enter gross	amounts unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)
,		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
-	m service revenue					(000 #/01/2010/10 /
a		-				
P		_				
				+		
<u> </u>		_		+		
e f		-		+		
	and antends from an arrange and an arrange	-				
	es and contracts from government agencies			 		
	rship dues and assessments			┼		
	on savings and temporary cash investments ds and interest from securities			14	691	
	tal income or (loss) from real estate					
				+		
	ot-financed property debt-financed property			+		
	tal income or (loss) from personal property			+		
	evestment income			+ - 1		
	(loss) from sales of assets other than inventory			 		····
	ome or (loss) from special events	-		+		- · · · · · · · · · · · · · · · · · · ·
	rofit or (loss) from sales of inventory			+		
	evenue a			† – †		
		-		† †		
		-		+		
		-		1		··-···
e		-		 		
12 Subtotal	Add columns (b) (d) and (e)	- I		1	691	0
	Add columns (b), (d), and (e)				691	
13 Total. A	dd line 12, columns (b), (d), and (e)				691 13	0 691
I3 Total. A See worksh	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations)	Accomplishm			13	
I3 Total. A See worksh Part XV Line No.	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
3 Total. A See worksh Part XV Line No.	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
3 Total. A See worksh Part XV Line No.	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
I3 Total. A See worksh Part XV Line No. ▼	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
I3 Total. A See worksh Part XV Line No. ▼	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
I3 Total. A See worksh Part XV Line No. ▼	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
I3 Total. A See worksh Part XV Line No. ▼	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
I3 Total. A See worksh Part XV Line No. ▼	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
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I3 Total. A See worksh Part XV Line No. ▼	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
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3 Total. A See worksh Part XV Line No.	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
3 Total. A See worksh Part XV Line No.	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
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3 Total. A See worksh Part XV Line No.	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
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I3 Total. A See worksh Part XV Line No. ▼	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691
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I3 Total. A See worksh Part XV Line No. ▼	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in co	ent of Exempt Polumn (e) of Part XVI	urpose:	13s	691

5 03/08/2013 3 09 F		TON FA	MILY FOUNDATION	47-0815827		Da	ge 13
		arding T		ons and Relationships With Nonchai	itable	<u> </u>	<u>ye 1,</u>
1 Did the or			age in any of the following with any	other organization described		Yes	No
	-		tion 501(c)(3) organizations) or in s	-			
organizati	ons?						
a Transfers	from the reporting foun-	dation to a r	oncharitable exempt organization of	of			ĺ
(1) Cash					1a(1)		X
(2) Other	assets				1a(2)		X
b Other tran							
	of assets to a nonchard	-			1b(1)		X
	ases of assets from a n		· -		1b(2)		X
	of facilities, equipment		sets		1b(3)		X
	oursement arrangement	S			1b(4)		X
	or loan guarantees		a film dan an a na kastatiana		1b(5)	-+	X
			or fundraising solicitations		1b(6)		X
			other assets, or paid employees	ımn (b) should always show the fair market	_1c_		
value in ar		arrangeme	ent, show in column (d) the value of	the foundation received less than fair market the goods, other assets, or services received			
(a) Line no	(b) Amount involved	(c) Nan	ne of noncharitable exempt organization	(d) Description of transfers, transactions, and sha	ring arrangemer	its	
/A	 	 					
	 -			 			
							
	 						
	 						
		 					
		 			·-,		
*	 						
		<u> </u>					
	-	-	with, or related to, one or more tax than section 501(c)(3)) or in section		Ye	s X	No
b If "Yes," co	mplete the following sc	hedule.					
	(a) Name of organization		(b) Type of organization	(c) Description of relationship			
N/A							
]				

(a) Name of organization	(b) Type of organization	(c) Description of relationship		
N/A				

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return

Sign Here

Signature of officer or trust

with the preparer shown below Treasurer

Print/Type preparer's name

Paid Preparer Bruce A. Hocking

9/13	Check self-employe

Use Only

Firm's name

HOCKING & REID, LLC

5757 So. 34th St. Suite 100 68516 Lincoln, NE

P00295233 Firm's EIN > 47-0806082 402-441-0140 Phone no

Form 990-PF (2011)

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, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

Employer identification number

2011

47-0815827 THE HAMPTON FAMILY FOUNDATION Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

THE HAMPTON FAMILY FOUNDATION

Page 1 of 1 of Part I

Employer identification number
47-0815827

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	HAMPTON ENTERPRISES, INC. 3701 UNION DRIVE, SUITE 100 LINCOLN NE 68516	\$ 170,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	realite, address, and zir + 4	\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
NO.	realite, address, and Eli 1 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	(10110) Sould Still 1 7	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
NO.	ivalle, audiess, and AFT 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)				

	 								
3/8/2013 3:08 PM		Charitable Purpose		Charitable Purpose		Charitable Purpose			1-3
	unting Fees	Adjusted Net	ofessional Fees	Adjusted Net	Expenses	Adjusted Net		n	
Federal Statements	Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	Investment	I, Line 16c - Other Professional Fees	Net Investment \$ 2,276 \$ \$ 2,276	990-PF, Part I, Line 23 - Other Expenses	Net Investment		n.	
	int 1 - Form 990-PF, F	Total \$\\ \\$ \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Statement 2 - Form 990-PF, Part I,	Total \$\frac{2,276}{2,276}\$	Statement 3 - Form 990-PF,	Total			
355 THE HAMPTON FAMILY FOUNDATION 47-0815827 FYE: 9/30/2012	Stateme	Description Indirect Accounting Fees Total	Statement 2	Description ASSET ADVISOR FEES Total	Statem	Description	Expenses BANK CHARGES OFFICE SUPPLIES	10(41	

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47-0815827 Federal Statements 3/8/2013 3:08 PM

FYE: 9/30/2012

Statement 5 -	Form 990-PF	, Part II, Line 22	2 - Other Liabilities

Description	Begin of Ye	ning ear	nd of 'ear
OUTSTANDING CHECKS	\$	6,500	\$
Total	\$	6,500	\$ 0

Statement 6 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	 Amount
PRIOR YEAR ADJUSTMENT	\$ 500
Total	\$ 500

355 THE HAMPTON FAMILY FOUNDATION 47-0815827 FYE: 9/30/2012	Federal Statements	tatement	S		3/8/2013 3:08 PM
Statement 7 - Form 990-PF	Pa	I - List of Of	rt VIII, Line 1 - List of Officers, Directors, Trustees,	rustees, Etc.	
Name and Address	Title	Average Hours	Compensation	Benefits	Fxpenses
JOSEPH R. HAMPTON 3701 UNION DRIVE, SUITE 100 LINCOLN NE 68516	DIRECTOR	1.00	0	0	0
MICHAEL LINDBERG 3701 UNION DRIVE, SUITE 100 LINCOLN NE 68516	SECY/TREAS	1.00	0	0	0
LORI HAMPTON 3701 UNION DRIVE, SUITE 100 LINCOLN NE 68516	PRESIDENT	1.00	0	0	0
BRUCE A. HOCKING 5757 SO. 34TH ST. SUITE 100 LINCOLN NE 68516	DIRECTOR	1.00	0	0	0
ROBERT B. EVNEN 301 SOUTH 13TH ST. SUITE 500 LINCOLN NE 68508	VICE-PRES.	1.00	0	0	0
CHARLES NORRIS 6915 SO. 53RD COURT LINCOLN NE 68516	DIRECTOR	1.00	0	0	0
SCOTT DUNN 6521 SOUTH 178TH ST. OMAHA NE 68135	DIRECTOR	1.00	0	0	0

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355 THE HAMPTON FAMILY FOUNDATION 3/8/2013 3:08 PM 47-0815827 Federal Statements

FYE: 9/30/2012

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

	Description	
LETTER		
	Form 990-PF, Part XV, Line 2c - Submission Deadlines	
	Description	
NONE		

Statement 8 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

THERE ARE NO RESTRICTIONS OR LIMITATIONS. GRANTS ARE MORE LIKELY TO BE MADE TO THOSE NEBRASKA AND/OR LINCOLN COMMUNITY ORGANIZATIONS WHICH PROMOTE EDUCATION, INDIVIDUAL SELF WORTH AND INDEPENDENCE.

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355 THE HAMPTON FAMILY FOUNDATION

Federal Statements

FYE: 9/30/2012 47-0815827

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name	Address		
Address	Relationship Status	Purpose	Amount
FDN LINCOLN PUBLIC SCHOOL LINCOLN NE 68502	3801 SOUTH 14TH ST. NONE 501(c)(3)	LANDING SCHOLARSHIP FUND	750
NE HISTORICAL SOCIETY FON	NONE 501 (C) (3) 128 NORTH 13TH CT #1010	MEALS ON WHEELS	
>		GENERAL SUPPORT	
		CELEBRATE ME HOME	2,000
LINCOLN NE.68502	NONE 501(c)(3)	SPIRIT OF NEBRASKA	2,000
LINCOLN NE 68510) <u>.</u>	GENERAL SUPPORT	1,000
NE	4 <u>-</u>	SOUTHPOINTE SPONSOR	200
	NONE 501 (c) (3)	GENERAL SUPPORT	250
CITY IMPACT LINCOLN NE 68503	400 NOKTH Z/TH ST. NONE 501(c)(3)	GENERAL SUPPORT	200
LINCOLN NE 68501-5358	α -	GENERAL SUPPORT	200
LINCOLN NE 68502	501(c) 501(c)	GENERAL SUPPORT	200
\vdash	NONE 5010 SEWARD AVE	HAMPTON FAMILY FDN SCHOLARSHIP	750
Ω	-	GENERAL SUPPORT	250
LINCOLN NE 68508	χ Η Σ	GENERAL SUPPORT	200
LINCOLN NE 68507 MOTIBNING HODE		GENERAL SUPPORT	200
LINCOLN NE 68504	j	GENERAL SUPPORT	200
	501(c)(3)	JA CLASSROOM SPONSOR	200

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Federal Statements

355 THE HAMPTON FAMILY FOUNDATION 47-0815827 FYE: 9/30/2012

	Amount	250
	Purpose	GENERAL SUPPORT
Address	Status	4840 DORIS BAIR CIRCLE 501(c)(3)
A	Relationship	4840 DORIS
Name	Address	LINCOLN FOOD BANK LINCOLN NE 68504 Total

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