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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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Open to Public Inspection For calendar year 2012 or tax year beginning 2012, and ending A Employer identification number Name of foundation 47-0705120 HARLEY AND BETH SCHRAGER FOUNDATION Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite (402) 505-6300 4405 SOUTH 96TH STREET City or town, state, and ZIP code If exemption application is pending, check here OMAHA, NE 68127 G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation . . . . H Check type of organization | X | Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A) check here . J Accounting method X Cash Accrual Fair market value of all assets at end If the foundation is in a 60-month termination Other (specify) of year (from Part II, col (c), line under section 507(b)(1)(B), check here . > *16)* ▶ \$ (Part I, column (d) must be on cash basis ) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per purposes may not necessarily equal the amounts in income income books column (a) (see instructions) ) (cash basis only) 95,000 Contributions, gifts, grants etc received (attach schedule) . Check ► if the foundation is not required to attach Sch B 2 2. 2 ATCH 1 Interest on savings and temporary cash investments 3 Dividends and interest from securities . . **5 a** Gross rents . . . . . . . . . . . . . . . . b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2). Net short-term capital gain . . . . . . . . . . . . Income modifications . Gross sales less returns and allowances · · · b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) . . . . . . . 95,002. 2. Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . . . Pension plans, employee benefits 15 16 a 951 **Administrative** Other professional fees (altach scredule) . . . C MeresiMAY 1.7 2013 · · 17 1,168 18 Taxes (attach schedule) (see instructions) ATCH . 3 Depreciation (attach schedule) and depletion. 19 20 and ' 21 Travel, conferences, and meetings . . 22 Printing and publications . . . . . . . . . . . . . 40 23 Other expenses (attach schedule) ATCH 4 24 Total operating and administrative expenses. 2,159 Add lines 13 through 23 . . . . . . . . . 100,644 100,644 Contributions, gifts, grants paid . . . . . . . 25 102,803 100,644 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 -7,801a Excess of revenue over expenses and disbursements 2 b Net investment income (if negative, enter -0-) c Adjusted net Income (if negative, enter -0-).

Part II	Ralanco Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
L GILLII		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 '	Cash - non-interest-bear	ing			
		cash investments	9,893.	322.	322
	Less allowance for dou	btful accounts ▶			
	Less allowance for dou	btful accounts ▶			
		officers, directors, trustees, and other			
		tach schedule) (see instructions)			
		eceivable (attach schedule)		_	
		btful accounts ▶			
9	Prenaid expenses and d	eferred charges			
		e government obligations (attach schedule)			
		stock (attach schedule)			
		bonds (attach schedule)			
11	Investments - land, buildings	s. 🛌			
1	and equipment basis Less accumulated deprecia	ation		İ	
	(attach schedule)				<del></del>
12	Investments - mortgage	loans			
114	Land, buildings, and	ach schedule)			
1	equipment basis Less accumulated deprecia	tion •			
	(attach schedule)	tion			<del></del>
1.3	Other assets (describe	/			
		completed by all filers - see the	0.000	200	200
		age 1, item l)	9,893.	322.	322
		ccrued expenses			
18	Grants payable				
<u>8</u> 19	Deferred revenue				
		rs, trustees, and other disqualified persons			
		tes payable (attach schedule)			
22	Other liabilities (describe	: ▶) _			
1			_i		
		s 17 through 22)	0	0	
		ow SFAS 117, check here ▶			
24	and complete lines 2	24 through 26 and lines 30 and 31.			
24	Unrestricted				
25 26	Temporarily restricted .				
<u> </u>	Foundations that do	not follow SFAS 117,			
5 '	check here and com	plete lines 27 through 31. ▶ X			
		cipal, or current funds	9,893.	322.	
28		land, bldg , and equipment fund			
29 i		rlated income, endowment, or other funds			
		balances (see instructions)	9,893.	322.	
		net assets/fund balances (see			
		<u></u>	9,893.	322.	
		inges in Net Assets or Fund B	alances		
Total	net assets or fund ba	alances at beginning of year - Part II	, column (a), line 30 (m	nust agree with	<del></del>
end-o	f-year figure reported	on prior year's return)	, ,, (,,	1	9,893.
Enter	amount from Part I, I	ıne 27a			-7,801.
		ed in line 2 (itemize)		3	
				4	2,092.
	eases not included in	line 2 (itemize) ► ATCH 5			1,770.
		lances at end of year (line 4 minus lin			322

Part IV Capital Gains and Losses for Tax on Investment Income

ı	P	ac	e	3

• •	d describe the kind(s) of property sold	· ·	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a			D - Donation		
b					
c					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	
a				······································	
_b					
<u>c</u>					
<u>d</u>					
<u>e</u> .		<u> </u>			
Complete only for assets	showing gain in column (h) and own			Gains (Col (h) g	
(i) F M V as of 12/31/69	(J) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less Losses (from co	
<u>a</u>					
<u>b</u>		<del> </del>		<del></del>	<del></del>
<u>c</u>		<del> </del>		<del></del>	
_d		<del> </del>			
If gain, also enter in Pa		structions) If (loss), enter -0- in	2		
		educed Tax on Net Investment I	3		<del></del>
If "Yes," the foundation does	not qualify under section 4940(e)				Yes X No
(a)	· · · · · · · · · · · · · · · · · · ·	ir, see the instructions before making	any enu	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution r (col (b) divided by	y col (c))
2011	141,573.	63,607.			2.225746
2010	83,443.	103,579.		<u></u>	0.805598
2009	121,295.	131,250.			0.924152
2008	111,113.				6.603855
2007	111,921.	13,248.	ļ		8.448143
				_	
2 Total of line 1, column (d	)		2		29.007494
		le the total on line 2 by 5, or by the ss than 5 years	3		5.801499
4 Enter the net value of no	ncharitable-use assets for 2012 fr	om Part X, line 5	4		3,241.
5 Multiply line 4 by line 3			5	<del></del>	18,803.
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		18,803.
8 Enter qualifying distribution of grant VI instructions	ons from Part XII, line 4 eater than line 7, check the box	in Part VI, line 1b, and complete	8 hat part	using a 1% ta	100,644. x rate See the
JSA 251430 1 000				For	m 990-PF (2012

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

If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

Enter the states to which the foundation reports or with which it is registered (see instructions)

Form 990-PF (2012)

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orm	990-PF (2012) HARLEY AND BE	TH SCHRAGER E	OUNDATION		47-0	705120	Page 6
a	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requi	red (contin	ued)		
_	During the year did the foundation pay or incur any amou				<u> </u>		
• •	(1) Carry on propaganda, or otherwise attempt to influer		4945(e))?	Yes	X No		ŀ
	(2) Influence the outcome of any specific public ele				ш		ł
	* * * * * * * * * * * * * * * * * * * *	· · · · · · · · · · · · · · · · · · ·			X No		ļ
	directly or indirectly, any voter registration drive?				1-1-1		
	(3) Provide a grant to an individual for travel, study, or of				X No		}
	(4) Provide a grant to an organization other than a	-		_	<u></u>		
	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, ch	aritable, scientific, l	iterary, or educations	al			
	purposes, or for the prevention of cruelty to children of	or animals?		. Yes	X No		1
ь	If any answer is "Yes" to 5a(1)-(5), did any of the				cribed in		
_	Regulations section 53 4945 or in a current notice regard		•	•		5b	
	Organizations relying on a current notice regarding disast	-	•		<u>.</u> [	<del></del>	
	, ,				[		
С	If the answer is "Yes" to question 5a(4), does the		•		<u> </u>	1 1	
	because it maintained expenditure responsibility for the g			Yes	No		
	If "Yes," attach the statement required by Regulations sec	' '					
6 a	Did the foundation, during the year, receive any fund	ds, directly or indire	ctly, to pay premium	s	_		
	on a personal benefit contract?			. Yes	X No	l i	l l
b	Did the foundation, during the year, pay premiums, direct			:t?		. 6ь	Х
	If "Yes" to 6b, file Form 8870	, ,					
7 2	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	chalter transaction?	Yes	X No		
		• •	•	• —			
	If "Yes," did the foundation receive any proceeds or have tyll Information About Officers, Directors					7b   VOOS	
'a	rt VIII Information About Officers, Directors and Contractors	, irustees, i ouii	uation managers,	inginy ran	a Emplo	y <del>c c</del> s,	
1	List all officers, directors, trustees, foundation r		r compensation (see				
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contribut employee bene	fit plans	(e) Expense other allow	
		devoted to position	enter -0-)	and deferred con	npensation		
	CH 6				ا		0
110	on o				<u> </u>		0
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	<del></del>						
		Ì			Ì		
					1		
2	Compensation of five highest-paid employees	(other than thos	e included on line	e 1 - see i	nstructio	ns) If nor	ne. enter
_	"NONE."	(**************************************				,	,
		(b) Title, and average		(d) Contribu		(e) Expense	occount.
(8	) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee b plans and de	eferred	other allow	
	<del></del>	devoted to position		compensa	ation		
	7.7.7.				Ì		
	NONE						
		i l					
		i					
_							
 							-
	al number of other employees paid over \$50,000 .					Form 990-	

Page 7 Form 990-PF (2012) Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." 3 (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE 0 Total number of others receiving over \$50,000 for professional services Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 NONE Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 NONE All other program-related investments. See instructions 3 NONE

Form 990-PF (2012)

Total. Add lines 1 through 3

- 0111	330-11 (2012)		
Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn foundation	s,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
-	purposes	ł	
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	3,290.
c	Fair market value of all other assets (see instructions)	1c	<del></del>
d	Total (add lines 1a, b, and c)	1d	3,290.
e	Reduction claimed for blockage or other factors reported on lines 1a and		·
•	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Cubtract line 2 from line 1d	3	3,290.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	<u> </u>	
•		4	49.
5	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,241.
6	Minimum investment return. Enter 5% of line 5	6	162.
	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	<u> </u>	
	foundations and certain foreign organizations check here  and do not complete this	oart )	
1	Minimum investment return from Part X, line 6	1 1	162.
2 а	1 - 1	<del></del>	
-a b	Income tax for 2012 (This does not include the tax from Part VI)  2b	1	
		2c	
3	Add lines 2a and 2b  Distributable amount before adjustments Subtract line 2c from line 1	3	162.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add to a Constant	5	162.
6		6	<del></del>
7	Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1 · · · · · · · · · · · · · · · · · ·	7	162.
_			
Pa	rt XII Qualifying Distributions (see 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	100,644.
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	
ь	Cash distribution test (attach the required schedule)	3b	<del> </del>
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	100,644.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	l	<del> </del>
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	100,644.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	Iculating wheth	<u>`</u>
	qualifies for the section 4940(e) reduction of tax in those years	3	

Form 990-PF (2012)

Form 990-PF (2012)

Pa	rt XIII Undistributed income (see instru	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2012 from Part XI,	Corpus	Years prior to 2011	2011	2012
	line 7				162.
2	Undistributed income, if any, as of the end of 2012				
а	Enter amount for 2011 only				
b	Total for pnor years 20 10 20 09 20 08				
3	Excess distributions carryover, if any, to 2012				
а	From 2007				
	From 2008				
	From 2009 114,871.				
d	From 2010				
е	From 2011				
f	Total of lines 3a through e	554,566.			
4	Qualifying distributions for 2012 from Part XII,				
	line 4 ▶ \$100,644.				
а	Applied to 2011, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)		<del></del>		
С	Treated as distributions out of corpus (Election				
	required - see instructions)			 	
	Applied to 2012 distributable amount	100 400			162.
	Remaining amount distributed out of corpus	100,482.			
5	Excess distributions carryover applied to 2012 (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:				
	1 111 11 11 11	655,048.			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5		<del></del>		
D	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				
е	Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2012 Subtract lines		:		
•	4d and 5 from line 1 This amount must be				
	distributed in 2013		<del></del>		
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2007 not	111,263.			
_	applied on line 5 or line 7 (see instructions)	111,203.			
9	Excess distributions carryover to 2013.	543,785.			
10	Subtract lines 7 and 8 from line 6a	2.27,000		<u></u>	
	Excess from 2008				
	Excess from 2009 114,871.				
	Excess from 2010				
d	Excess from 2011 138, 971.				
	Excess from 2012 100, 482.				

Form 990-PF (2012)

The form in which applications should be submitted and information and materials they should include Any submission deadlines

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

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	990-PF (2012)				Page 1
Pa	Supplementary Information	continued)	6 1	Fratura Davimant	
_ <u>s</u>	Positions Paid Dur	If recipient is an individual,	Foundation	ruture Payment	<u> </u>
	Recipient Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
	Paid during the year	or substantial contributor	recipient		
a	r alo during the year				
A.	CCH 7				
	Total			▶ 3a	100,644
b	Approved for future payment				
			İ	<b>\</b>	
	<u> </u>	L	L	<u> </u>	
	<u>Total</u>	<u> </u>	<u></u>	<u></u>	

Part XVI-A Analysis of Income-Produ Enter gross amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c)	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue					(See instructions)
a b					
		-	<del> </del>		<del></del>
d					
е			<del> </del>		
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	2.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
<b>b</b> Not debt-financed property ,					·
6 Net rental income or (loss) from personal property .			<u> </u>		
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			_		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			<b></b>		
11 Other revenue a					
b	<u></u>				
C	ļ				
d			<del></del>		
e			+	2.	,
12 Subtotal Add columns (b), (d), and (e)				<u> </u>	<u> </u>
13 Total. Add line 12, columns (b), (d), and (e)		• • • • • • • • • • • • • • • • • • • •			
(See worksheet in line 13 instructions to verify calc Part XVI-B Relationship of Activities		complishment of Ev	compt Burn		<del></del>
					····-
Line No. Explain below how each activit		·			
▼ accomplishment of the foundation	on's exemp	ot purposes (other than	by providing	g funds for such purpose	s) (See instructions)
		· · · · · · · · · · · · · · · · · · ·		<u>-</u>	
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HARLEY AND BETH SCHRAGER FOUNDATION

Part 2				nsfers To	and Tra	nsacti	ons and	Relations	ships With Non	chari		3
ın	secti	organization direct on 501(c) of the Coations?	ly or indirectly e								Yes	No
a T	ransfe	ers from the reporting	_							4 - (4)		x
		h								1a(1) 1a(2)		X
		ransactions				• • • •				14(2)		
		es of assets to a no								1b(1)		Х
		chases of assets fro								1b(2)		X
		ntal of facilities, equi								1b(3)		X
		mbursement arrangens or loan guarantee								1b(4) 1b(5)		X
(6	3) Per	formance of service	s or membershi	or fundra	ising solicita	ations				1b(6)		X
		of facilities, equipn								1c		Х
V	alue o	answer to any of the first the goods, other any transaction or	assets, or servicer sharing arrange	es given bement, sho	y the repo	rting fou	indation le value d	If the found of the goods	ation received less, other assets, or s	than ervice	fair m s reci	narket eived
(a) Line	no	N/A	(c) Name of no	oncharitable e	kempt organiza	ation		ription of transf	ers, transactions, and sha	nng arra	ngeme	nts
		N/A	<del> </del>				N/A					
		<del></del>	<del></del>								<del></del>	
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			<u> </u>						<del> </del>			
			<del> </del>	·								
-		<del></del>		<del></del>								
d	escrib	foundation directly led in section 501(c) " complete the follo	of the Code (oth wing schedule	ner than se	ction 501(c	(3)) or			t organizations	Ye	es X	No
		(a) Name of organization	n l	(b)	Type of organ	nization			c) Description of relation	ship		
		· · · · · · · · · · · · · · · · · · ·										
									<del></del>			
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Sign	Correct	penalties of penjury discult indicomplete Decleration of	afe) that I have examine f preparer (other than ta:	ed this return, xpayer) is based	including accom on all informatio	npanying sch in of which p	hedules and a repare has ar	statements, and t ny knowledge	o the best of my knowled	ge and b	elief it	is true
Here	Sign	ature of office or trustee	megn	Dake	//4//3	)	Cle Title	A.	May the IR with the p	repar <u>er</u>		
	L.—	Print/Type preparer's	name	Preparer	's signature	<del></del>		Date	Check uf	PTIN		
Paid -		76-6-6-6-6			J				Checklif  self-employed		5627	17
Prepa		Firm's name ► LU	JTZ & CO, PO	2				-L		6258		
Use C	nly	Firm's address ▶ 13		RNIA ST,	STE 30	0						-
		OM	1AHA, NE				681	54-5336	Phone no 402-4	96-8	800	

Form 990-PF (2012)

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

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

OMB No 1545-0047

Name of the organization		Employer identification number
HARLEY AND BETH SC	HRAGER FOUNDATION	47-0705120
Organization type (check o	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a p	rivate foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private	re foundation
	501(c)(3) taxable private foundation	
	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the General Ru	le and a Special Rule See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year ny one contributor. Complete Parts I and II	, \$5,000 or more (in money or
Special Rules		
under sections 50	I(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % $O(a)(1)$ and 170(b)(1)(A)(vi) and received from any one contributor, \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or and II	during the year, a contribution of
during the year, t	I(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received total contributions of more than \$1,000 for use <i>exclusively</i> for religious irposes, or the prevention of cruelty to children or animals. Complete	s, charitable, scientific, literary,
during the year, of not total to more year for an <i>exclu</i> s	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receive contributions for use exclusively for religious, charitable, etc., purpose than \$1,000. If this box is checked, enter here the total contributions sively religious, charitable, etc., purpose. Do not complete any of the paganization because it received nonexclusively religious, charitable, etgear.	es, but these contributions did that were received during the parts unless the <b>General Rule</b> c , contributions of \$5,000 or
990-EZ, or 990-PF), but it n	nat is not covered by the General Rule and/or the Special Rules does nust answer "No" on Part IV, line 2 of its Form 990, or check the box 0-PF, to certify that it does not meet the filing requirements of Schedi	on line H of its Form 990-EZ or on
For Paperwork Reduction Act No	ptice, see the Instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Employer identification number 47-0705120

Part I	Contributors (see instructions) Use duplicate copies of I	Part I if additional space is need	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1-	HARLEY AND BETH SCHRAGER  4405 SOUTH 96TH STREET  OMAHA, NE 68127	\$95,000.	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
<b></b>		   \$	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
- <del></del> -			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
		\$	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
<b></b> -		   \$	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
		   \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer identification number 47-0705120

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is nee	ded
(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
<u> </u>		\$	
(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
		\$	

Employer identification number

47-0705120

Part Ili	Exclusively religious, charitable, etc., that total more than \$1,000 for the y	individual contribuear. Complete colur	itions to section 5 nns (a) through (e	01(c)(7), (8), or (10) organizations ) and the following line entry
(	For organizations completing Part III, econtributions of \$1,000 or less for the	e year (Enter this inf	ormation once Se	haritable, etc , e instructions ) ►\$
	Use duplicate copies of Part III if addition	onal space is neede	d	· · · · · · · · · · · · · · · · · · ·
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transi	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) No		<del></del>		<del></del>
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		<del></del>		
		(a) Tana a	·	
		(e) Transi	er or gm	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
	<del></del>		<b></b>	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		<b></b>		
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd 7IP + 4	Polatio	aghin of transform to transform
	Translete 3 name, address, at	10 211 7 7	Kelatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee

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

NUE NET NET SES INVESTMENT OOKS	2. 2.	2.
REVENUE AND EXPENSES PER BOOKS		TOTAL
DESCRIPTION	FIRST NATIONAL BANK OF OMAHA	

ATTACHMENT 1 PAGE 18

47-0705120

ATTACHMENT 2

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CHARITABLE		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	951.	951.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

FORM 990PF, PART I - TAXES

REVENUE

AND

EXPENSES

PER BOOKS

DESCRIPTION EXCISE TAX

1,168.

TOTALS 1,168.

FORM 990PF, PART I - OTHER EXPENSES

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION BANK FEES

40.

TOTALS

40.

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

<u>DESCRIPTION</u> <u>AMOUNT</u>

CURRENT YEAR QUID PRO QUO CONTRIBUTIONS 1,770.

TOTAL 1,770.

ATTACHMEN		0	0	0
		0	0	0
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRES/SEC/DIR	VP/TREAS/DIR	DIRECTOR
FORM 990PF, PART VIII - LI	NAME AND ADDRESS	HARLEY D. SCHRAGER 9709 FIELDCREST DRIVE OMAHA, NE	BETH SCHRAGER 9709 FIELDCREST DRIVE OMAHA, NE	ARNOLD D. WEITZ 10555 MULLEN ROAD OMAHA, NE

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GRAND TOTALS

ATTACHMENT 6 PAGE 23

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
OMAHA EQUESTRIAN FOUNDATION	NONE	EXEMPT CHARITABLE ACTIVITIES	10,000.
OMAHA, NE	PUBLIC		
JEWISH FEDERATION OF OMAHA	NONE	EXEMPT CHARITABLE ACTIVITIES	25,000.
OMAHA, NE	PUBLIC		
OMAHA SYMPHONY	NONE	EXEMPT CHARITABLE ACTIVITIES	2,380.
OMAHA, NE	PUBLIC		
CENTRAL HIGH SCHOOL FOUNDATION	NONE	EXEMPT CHARITABLE ACTIVITIES	2,500
OMAHA, NE	PUBLIC		
BIG BROTHERS BIG SISTERS	NONE	EXEMPT CHARITABLE ACTIVITIES	5,000.
OMAHA, NE	PUBLIC		
OMAHA CONSERVATORY OF MUSIC	NONE	EXEMPT CHARITABLE ACTIVITIES	500.
OMAHA, NE	PUBLIC		

ATTACHMENT 7 (CONT'D)

ALTACHMENT 7 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION AM	AMOUNT
JOSLYN ART MUSEUM	NONE	EXEMPT CHARITABLE ACTIVITIES	1,000.
OMAHA, NE	PUBLIC		
TEMPLE ISRAEL	NONE	EXEMPT CHARITABLE ACTIVITIES	5,214.
OMAHA, NE	PUBLIC		
CYSTIC FIBROSIS FOUNDATION	NONE	EXEMPT CHARITABLE ACTIVITIES	3,000.
OMAHA, NE	PUBLIC		
OMAHA SPORTS COMMISSION	NONE	EXEMPT CHARITABLE ACTIVITIES	3,950.
OMAHA, NE	PUBLIC		
LEUKEMIA & LYMPHOMA SOCIETY	NONE	EXEMPT CHARITABLE ACTIVITIES	100.
ONAHA, NE	PUBLIC		
ROSE BLUMKIN JEWISH HOME	NONE	EXEMPT CHARITABLE ACTIVITIES	100.
OMAHA, NE	PUBLIC		

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

EXEMPT CHARITABLE ACTIVITIES

ATTACHMENT 7 (CONT.D)

500.

AMOUNT

JEWISH NATIONAL FUND OMAHA, NE

RECIPIENT NAME AND ADDRESS

PUBLIC

NONE

TOTAL CONTRIBUTIONS PAID

100,644.

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9789