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Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note The foundation may be able to use a copy of this return to satisfy state reporting requirements.

Open to public Inspection

For cellendary year 2012 or tax year beginning Anne of foundation THE GFH & SAH FOUNDATION Name and steed for P 0 to secure for make a net downwest of sixed a doesaway 7411 MADISON STREET City or town, state, and ZP code RALSTON, NE 6812.7 Q Cheek all that apply: Instant return			it of the Treasury venue Service	Note The fo		be able to use a copy of this			rting requirements.	Open to public Inspection
THE GPH & SAH FOUNDATION Number and service of PG Does controlled midute and consequence to several addresses) 74.11 MADISON STREETS Only of torms, state, and ZIP code RRALSTON, NB 68127 G Check all that specific middle status An install return of a former public charty An install re	For	caler	ndar year 2012 o	r tax year beginning	9		, and e	nding		
Telephone number Telephone n	Na	me of	f foundation						A Employer identification	number
Control Manual STREET		HE	GFH &	SAH FOUND	ATION				47-0816444	
Common C			•		delivered to street	address)		Room/suite		
RALISTON, NE 681.27 © Check all that apply:									(402) 505-	6002
Check all that apply:									C If exemption application is p	ending, check here
Final return Andrews change Anneaded return Address change Anneaded return Anne								.1	.	
Address change Name change Name change	G (ineck	all that apply:	=			ormer public	cnarny	ם 1. Foreign organization:	s, cneck nere
H. Check type of organization: Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt characteristic trust in other taxable private foundation I Farr market value of all assets at end of year J Accounting method: Si Cash Accounting method: Ac				=		=			2. Foreign organizations me	eeting the 85% test,
Section 49A7(a)(1) nonexempt charinable trust Other taxable private foundation	H (heck	type of organiza							
First the foundations is in a 60-month termination under section 507(b)(1)(B), check here First the foundations is in a 60-month termination under section 507(b)(1)(B), check here First the foundations is in a 60-month termination under section 507(b)(1)(B), check here First the foundations is in a 60-month termination under section 507(b)(1)(B), check here First the foundation is in a 60-month termination under section 507(b)(1)(B), check here First the foundation is in a 60-month termination under section 507(b)(1)(B), check here First the foundation is in a 60-month termination under section 507(b)(1)(B), check here First the foundation is in a 60-month termination under section 507(b)(1)(B), check here First the foundation is in a 60-month termination under section 507(b)(1)(B), check here First the foundation is in a 60-month termination under section 507(b)(1)(B), check here First the foundation is in a 60-month termination under section 507(b)(1)(B), check here First the foundation is in a 60-month termination under section 507(b)(1)(B), check here First the foundation is income (a) foundation is income (b) Net investment (c) Adjusted net income (c) Adjus		_	••				ation			
Interest	I Fa							rual		
Part I Analysis of Revenue and Expenses (a) Revenue and Expenses (b) Net investment increased by equal the amounts of (a) (c) may not receive and expenses per books (b) N/A (c) N	(fi	om i	Part II, col. (c),	line 16)						
Check Control of amounts in column (b) Control of the contro				120,089	• (Part I, colu	ımn (d) must be on cash	basıs.)			
1 Contributions, grits, grants, etc., received 2 Check X Fit trisvations and request to stand \$0.8	Pa	art I	(The total of amo necessarily equa	evenue and Expense unts in columns (b), (c), I the amounts in column	?\$ and (d) may not (a))					for charitable purposes
Interest on pavings and temporary 11		1							N/A	
1		2			d to attach Sch B					
Sa Gross renis		3	Interest on saving cash investments	s and temporary						· · · · · · · · · · · · · · · · · · ·
D Net rental income or (loss)		4	Dividends and i	nterest from securiti	es	15.		15.		STATEMENT 2
Security		'.	· •							
Day Cooks sales price for all		l								
8 Net snort-erm capital gain 9 Income modifications 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 26. 26. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees profit in the sit of the profit in the	ne	oa h	Gross sales price		n line 10					
8 Net snort-erm capital gain 9 Income modifications 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 26. 26. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees profit in the sit of the profit in the	Ven	7	assets on the oa	come (from Part IV line)	2)			0.		
9 Income modifications 10a Gross acides less returns b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 26. 26. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 15 Accounting fees CONTON 3 17 Interest Operation of the profit of the profi	æ	8			-,					
Description of Contributions, grits, grants paid Description of Contributions grits, grants paid Description of Contributions, grits, grants paid Description of Contributions grits, grants paid Description of Contributions grits, grants paid Description of Contributions, grits, grants paid Description of Contributions, grits, grants paid Description of Contributions grits, grants paid Description of Contributio		9	Income modific	ations						
c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 26		10a	Gross sales less re and allowances	eturns						
11 Other income 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 16a Legal		b	Less Cost of good	ds sold						
12 Total. Add lines 1 through 11 26. 26. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 15 Accounting fees CENSTMT 3 2,587. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		C	•	(loss)						
13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 15 Accounting fees CEIVSTMT 3 17 Interest One of the professional ties of the p		' '		4.0		26		2.6		
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting f	_	 		· ·						
15 Pension plans, employee benefits 16a Legal fees b Accounting fees CEVSTMT 3 c Other professional fees 17 Interest 8 NOV 2 1 2013 92 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences and meetings 22 Printing and publications 23 Other expenses STMT 4 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, grifs, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 309,160. 40. 305,900. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter-0-)		l	•		es, etc	-		<u> </u>		•
The state of the s				•						
Interest Second NOV 2 1 2013 Second NOV 2 1 20	ses		•							
Interest Second NOV 2 1 2013 Second NOV 2 1 20	Sen	b	Accounting fee:	DECEIVA	TMT 3	2,587.		0.		0.
20 Occupancy	Ω̈́	C		nal tees	70					
20 Occupancy	tive		Interest 8		113 9					
20 Occupancy	stra	ĺ	Taxes 9	MOA ST SE						
25 Contributions, girts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 305,900. 305,900. 305,900. 305,900.	ij	l		d depletion	-17-					<u> </u>
25 Contributions, girts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 305,900. 305,900. 305,900. 305,900.	β	1		OGDEN.	UL					
25 Contributions, girts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 305,900. 305,900. 305,900. 305,900.	þ							_		
25 Contributions, girts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 305,900. 305,900. 305,900. 305,900.	<u> </u>	l			TMT 4	673.		40.		0.
25 Contributions, girts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 305,900. 305,900. 305,900. 305,900.	atin		-					<u></u>		
25 Contributions, girts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 305,900. 305,900. 305,900. 305,900.	per							40.		
Add lines 24 and 25 309, 160. 40. 305, 900. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 0.	0	25	Contributions, (gifts, grants paid		305,900.				305,900.
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 0.		26	•		3 .	200 155		4.0		205 225
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 0.						309,160.		40.		305,900.
b Net investment income (if negative, enter -0-)						_300 134				
				·		-303,134.		0		
									N/A	

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only

1 Cash - non-interest-bearing

2 Savings and temporary cash investments

	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less; allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	·	Less; allowance for doubtful accounts ▶			
Ø	8	Inventories for sale or use			<u> </u>
Assets	_	Prepaid expenses and deferred charges			
¥		Investments - U.S. and state government obligations			
		Investments - corporate stock			
		Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
		Investments - other			
		Land, buildings, and equipment: basis	•		
	17	Less accumulated depreciation	,		
	15	Other assets (describe >			
	10	Other assets (describe >)			
	16	Total assets (to be completed by all filers)	429,223.	120,089.	120,089.
		Accounts payable and accrued expenses	427,223.	120,000.	120,000.
		Grants payable			
		Deferred revenue			
abilities					
<u> </u>		Loans from officers, directors, trustees, and other disqualified persons			
<u>e</u> .		Mortgages and other notes payable			
	22	Other liabilities (describe)			
	00	Tatal liabilitation (add loses 17 through 99)	0.	0.	
	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	U •	<u> </u>	
		Touristic the transfer of the			
ģ		and complete lines 24 through 26 and lines 30 and 31.			
und Balances		Unrestricted			
ala		Temporarily restricted			
<u> </u>	20	Permanently restricted Foundations that do not follow SFAS 117, check here			
5					
ō		and complete lines 27 through 31.			
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets or I	28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	
ĭ	29	Retained earnings, accumulated income, endowment, or other funds	429,223.	120,089.	
ž	30	Total net assets or fund balances	429,223.	120,089.	
			400 000	100 000	
	31	Total liabilities and net assets/fund balances	429,223.	120,089.	
Р	art	III Analysis of Changes in Net Assets or Fund Bal	ances		
_					
		net assets or fund balances at beginning of year - Part II, column (a), line 30)		400 000
	•	st agree with end-of-year figure reported on prior year's return)		1	429,223.
		amount from Part I, line 27a		2	-309,134.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	120,089.
		eases not included in line 2 (itemize)	 _	5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	mn (b), line 30	6	120,089.
222	511				Form 990-PF (2012)
12-0	5-12				

Beginning of year

(a) Book Value

24,485. 404,738.

LF	Part IV ∣ Capital Gains a	nd Losses for Tax on In	vestment	Income			quired				
_	(a) List and describ 2-story brick ware	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)						(c) Date : (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)	
1a											_
_b	NONNON	E									
											_
<u>d</u>					-						_
<u>e</u>	(e) Gross sales price	(f) Depreciation allowed	(g) Cos	st or other basis	1			(h) G	aın or (loss))	_
		(or allowable)	plus e	xpense of sale				(e) plus	s (f) minus ((g)	
<u>a</u> b											_
_ <u>c</u>											_
_ <u>e</u>				10 10 1 100						·	_
_	Complete only for assets showing						(I)) Gains (C	iol. (h) gain not less thai	minus	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			001	Losses	(from col. (h))	
_a											_
_b)										_
											_
<u>_d</u>											_
<u>e</u>	<u> </u>	<i>C</i> , , , , ,	<u> </u>		$\overline{}$						_
2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7											
3	3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):										
	If gain, also enter in Part I, line 8, co	olumn (c).			$\mid \mid$						
F	If (loss), enter -0- in Part I, line 8 Part V Qualification Un	der Section 4940(e) for	Reduced	Tay on Net	· Inv	3 estm	ent Inc	ome			_
_	or optional use by domestic private f										_
(1.0	or optional use by domestic private i	oundations subject to the section -	ווט אמו (מ) ומא טוו	net investment ii	ICOIIIC	·.)					
lf s	section 4940(d)(2) applies, leave this	s part blank.									
Wa	as the foundation liable for the sectio	on 4942 tax on the distributable am	nount of any ye	ear in the base pe	rıod?					Yes X No)
	Yes," the foundation does not qualify							,			_
1	Enter the appropriate amount in ea		nstructions bel	fore making any e						(d)	_
	Base period years	(b) Adjusted qualifying dis	tributions	Net value of no	(c) nchar		use assets		Distrib	ution ratio ided by col. (c))	
_	Calendar year (or tax year beginning 2011	1 111/	7,857.				5,229		(cor (b) div	.47293	3
_	2010		5,000.				0,799			1.75599	
	2009		0,360.				7,082			8.48324	
	2008		1,842.				9,843			.49237	
	2007	37	0,000.		1	<u>, 35</u>	<u>9,176</u>		_	.27222	<u>4</u>
2	Total of line 1, column (d)							2		11.47677	3
	Average distribution ratio for the 5-	vear base period - divide the total (on line 2 by 5.	or by the number	of ve	ars					<u>~</u>
	the foundation has been in existence	•	,	,				3		2.29535	<u>5</u>
4	Enter the net value of noncharitable	-use assets for 2012 from Part X	line 5					4		154,904	
7	Litter the net value of nonenanable	ass asserts for 2012 from 1 arra,								131/301	·
5	Multiply line 4 by line 3							5		355,560	•
6	Enter 1% of net investment income	(1% of Part I. line 27b)						6		0	
		. , -,									
7	Add lines 5 and 6		•					_7		355,560	•
8	Enter qualifying distributions from f	Part XII, line 4						8		<u>305,900</u>	•
_	If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Part VI, line	1b, and comp	lete that part usin	ig a 19	% tax r 	ate.				

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Pa	art VI Excise Tax Based on Investment Income (Section	4940(a), 4940(b), 4940(e), c	r 4948	- see in	stru	ctio	ns)
1a	a 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 lette	r if necessary-see instructions)					
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check he	ere 🕨 🔙 and enter 1%	1				<u>0.</u>
	of Part I, line 27b						
C	${f c}$ All other domestic foundations enter 2% of line 27b. Exempt foreign organizations er	nter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations of	only. Others enter -0-)	2				0.
3	Add lines 1 and 2		3				<u>0.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	only. Others enter -0-)	4			_	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -	0-	5				0.
6	Credits/Payments:	1 1	į				
а	a 2012 estimated tax payments and 2011 overpayment credited to 2012	6a					
b	b Exempt foreign organizations - tax withheld at source	_6b					
C	c Tax paid with application for extension of time to file (Form 8868)	6c	_				
d	d Backup withholding erroneously withheld	6d	_				_
7	Total credits and payments. Add lines 6a through 6d		7				0.
	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		▶ <u>9</u>				0.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount over	paid 1	<u>10</u>				
	Enter the amount of line 10 to be: Credited to 2013 estimated tax	Refunded	<u> </u>				
	art VII-A Statements Regarding Activities	_			-	.	.
1a	a During the tax year, did the foundation attempt to influence any national, state, or loc	al legislation or did it participate or inter	vene in			Yes	_
	any political campaign?			-	1a		X
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political			-	1b		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activity	ties and copies of any materials pub	lished or				
	distributed by the foundation in connection with the activities.				_		
	c Did the foundation file Form 1120-POL for this year?			}	1c		X
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed dur		•				
	(1) On the foundation. > \$ (2) On foundation ma		<u>0.</u>	İ			
е	e Enter the reimbursement (if any) paid by the foundation during the year for political e	expenditure tax imposed on foundation		1			
_	managers. ▶ \$	- 4 - IDOD					v
2	Has the foundation engaged in any activities that have not previously been reported t	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 gove		on, or		2		v
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the c	-		<u> </u>	3 4a		X
	 Did the foundation have unrelated business gross income of \$1,000 or more during If "Yes," has it filed a tax return on Form 990-T for this year? 	tile year?	N	1/A	41		Λ
	Was there a liquidation, termination, dissolution, or substantial contraction during th	e vear?	1	'' ^	4D 5		X
J	If "Yes," attach the statement required by General Instruction T.	e year ·		ŀ	<u> </u>		-41
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) sati	sfied either:					
Ü	By language in the governing instrument, or	31100 0111101.					
	By state legislation that effectively amends the governing instrument so that no ma	andatory directions that conflict with the	state law				
	remain in the governing instrument?	indutory disocions that commet with the	olulo luvi	1	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			Ī	7	X	
•	If "Yes." complete Part II, col (c), and Part XV.			Ī	•		
Rء	Enter the states to which the foundation reports or with which it is registered (see ins	structions)					
	NE						
h	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF t	o the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation				8b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning		calendar	Ì			
-	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Y				9		х
10			STMT	י 5	10	Х	

Form **990-PF** (2012)

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Part VII-B Statements Regarding Activities for Which I	Form 4/20 May Be	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:		_ -,	¬		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indi			•	
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Yo	es 🗶 No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section		_		
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	ŀ	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or				1
the prevention of cruelty to children or animals?		Y	es 🗶 No		İ
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described	in Regulations			ľ
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	iere		▶□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	uned		İ	
expenditure responsibility for the grant?		1/A □ ₩	es No	İ	
If "Yes," attach the statement required by Regulations section 53.494		., ==			ŀ
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •				į
a personal benefit contract?	pay promisino on		s X No	-	ĺ
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	nersonal henefit contract?		22, 12 110	6b	x
If "Yes" to 6b, file Form 8870	or some bonone contract		-		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chalter transaction?		es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu		ш ш	N/A	7b	_
Information About Officers Directors Truct		nagers Highly		/U ;	
Part VIII Paid Employees, and Contractors	ees, i ouildation ivid	inagers, rugin	,		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e)	Expense
(a) Name and address	hours per week devoted to position	(If not paid,	(d) Contributions to employee benefit plans and deferred	acci	Expense ount, other owances
GEORGE F. HADDIX	 	enter-0-) HAIRMAN	compensation	all	Owaniccs
7411 MADISON STREET	ILLOSIEE AND (TUNIKUM			
RALSTON, NE 68127	1.00	0.	0.		0.
RADSION, NE 00127	1.00	<u> </u>	0.	-	<u> </u>
	-		İ		
-			-	1	
-	-				
	-				
				-	
				į	
0.0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	110015		į	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	/->	Evnance
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acco	Expense bunt, other owances
	devoted to position	' '	compensation	all	owances
NONE				l	
Total number of other employees paid over \$50,000		•		-1	0
		-	Forn	990-	PF (2012)
			1 0/11	, 5555	(2012)

Form 990-PF (2012) THE GFH & SAH FOUNDATION	<u>47-0816</u>	444 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	,	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of servi	ce	(c) Compensation
NONE		
		_
		_
		<u>.</u>
		<u> </u>
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	<u> </u>	0
		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
2		
3		
•		
		
4		
Part IV-B Common of December Deleted Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		Alliquit
I N/A		
2		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3	•	0.
	Form	n 990-PF (2012)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, s	ee instructions.)
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	0.
b	Average of monthly cash balances	1b	<u>0.</u> 157,263.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	157,263.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets] 2	0.
3	Subtract line 2 from line 1d	3	157,263.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,359.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	154,904.
6	Minimum investment return Enter 5% of line 5	6	7,745.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	7,745.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	7,745.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	7,745.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	7,745.
P	art 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	305,900.
b	Program-related investments - total from Part IX-B	1b	0.
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	<u>305,900.</u>
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	305,900.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies for	the section

Form **990-PF** (2012)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				7 745
line 7		<u> </u>		7,745.
2 Undistributed income, if any, as of the end of 2012			0.	
a Enter amount for 2011 only b Total for prior years:				_
g rotation prior years.		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007 304,775.		:		
b From 2008 493, 276.				
c From 2009 4,951,006.				
dFrom 2010 1,038,635.				
e From 2011 230,596.				
f Total of lines 3a through e	7,018,288.			<u> </u>
4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$ 305,900.				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				7,745.
e Remaining amount distributed out of corpus	298,155.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	7,316,443.	-		
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.	,	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line		-		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013	- <u></u>			0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	_			
section 170(b)(1)(F) or 4942(g)(3)	0.	_		
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	304,775.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	7,011,668.			
10 Analysis of line 9:				
a Excess from 2008 493,276.				
b Excess from 2009 4,951,006.				
c Excess from 2010 1,038,635.				
d Excess from 2011 230,596. e Excess from 2012 298,155.				
e Excess from 2012 298, 155.				Form QQ0_DE (2012)

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year BOYS TOWN NATIONAL RESEARCH HOSPITAL NONE PUBLIC CHARITY EDUCATION 555 NORTH 30TH ST 7.500. OMAHA NE 68131 PUBLIC CHARITY CHILD SAVINGS INSTITUTE NONE GENERAL SUPPORT 4545 DODGE ST OMAHA, NE 68132 5,000. PUBLIC CHARITY GENERAL SUPPORT FONTENELLE FOREST NATURE CENTER NONE 1111 NORTH BELLEVUE BLVD 15,000. BELLEVUE NE 68005 MID-AMERICA COUNCIL (BSA) NONE PUBLIC CHARITY GENERAL SUPPORT 12401 W. MAPLE RD OMAHA, NE 68164 218,000. SPRINGFIELD LIBRARY FOUNDATION NONE PUBLIC CHARITY GENERAL SUPPORT 665 MAIN ST., PO BOX 40 OMAHA NE 68059 400. SEE CONTINUATION SHEET(S) **▶** 3a 305 900 Total b Approved for future payment NONE Total

(e)

Related or exempt function income

Excluded by section 512, 513, or 514

(**d)** Amount

(C) Exclu-sion code

1 Program service revenue:

Enter gross amounts unless otherwise indicated.

Part XVI-A **Analysis of Income-Producing Activities**

b		
C		
ď		
e		
f		
g Fees and contracts from government agencies		
2 Membership dues and assessments		
3 Interest on savings and temporary cash		
investments	14	11.
4 Dividends and interest from securities	14	15.
5 Net rental income or (loss) from real estate:		
a Debt-financed property		
b Not debt-financed property		
6 Net rental income or (loss) from personal		
property		
7 Other investment income		
8 Gain or (loss) from sales of assets other		
than inventory		
9 Net income or (foss) from special events		
10 Gross profit or (loss) from sales of inventory		
11 Other revenue:		
a		
b		
C		
d		
e		
12 Subtotal. Add columns (b), (d), and (e)	0.	26. 0.
13 Total. Add line 12, columns (b), (d), and (e)		13 26.
(See worksheet in line 13 instructions to verify calculations.)		
Dort VVI D Deletionship of Activities 4	to the Accomplishment of Exempt Pur	poses
Part XVI-B Relationship of Activities t	to the Accomplishment of Exempt Full	pococ
Line No. Explain below how each activity for which inco	ome is reported in column (e) of Part XVI-A contributed in	
	ome is reported in column (e) of Part XVI-A contributed in	
Line No. Explain below how each activity for which inco	ome is reported in column (e) of Part XVI-A contributed in	
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Line No. Explain below how each activity for which inco	ome is reported in column (e) of Part XVI-A contributed in	
Line No. Explain below how each activity for which inco	ome is reported in column (e) of Part XVI-A contributed in	

Unrelated business income

(b) Amount

(a) Business code

Form 990-		rn & SAn			I D. I. C	4/ UUIU			ge 10_
Part X	VII Information Re Exempt Organ	•	isters lo a	ind Transactions a	and Relationsi	hips With Nonchar	itabie)	
1 Did t	he organization directly or indi	rectly engage in any	of the followin	g with any other organization	on described in secti	on 501(c) of		Yes	No
	ode (other than section 501(c)								
	sfers from the reporting found								l
(1)	, -			,			1a(1)		Х
	Other assets						1a(2)		X
	r transactions:						10(2)		
		ble average areas	tion				1b(1)		X
` '	Sales of assets to a noncharita								X
	Purchases of assets from a no		organization				1b(2)	 - -	
	Rental of facilities, equipment,						1b(3)		X
(4)	Reimbursement arrangements						1b(4)	-	X
(5)	Loans or loan guarantees						1b(5)		X
(6)	Performance of services or me	mbership or fundra	ising solicitatio	ns			1b(6)		X
c Shar	ing of facilities, equipment, ma	uling lists, other ass	ets, or paid em	ployees			1c	<u> </u>	X
d If the	answer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should al	ways show the fair n	narket value of the goods, o	ther ass	sets,	
or se	rvices given by the reporting f	oundation. If the for	indation receive	ed less than fair market val	ue in any transaction	or sharing arrangement, sh	now in		
colui	nn (d) the value of the goods,	other assets, or ser	vices received.						
(a) Line no	(b) Amount involved	(c) Name o	of noncharitable	exempt organization	(d) Description	of transfers, transactions, and s	haring ar	rangeme	nts
-			N/A						
				 -	-				

		-		,··					
	<u> </u>	 							
					-				
				_ -					
						<u></u>			
-									
						-			
2a le th	e foundation directly or indirec	thy affiliated with or	related to one	or more tax-exempt organ	izations described	.			
	ction 501(c) of the Code (othe	-			12410110 00001.000	Г	Yes	X	∃ No
	es," complete the following sch		5)(5)) 01 111 3000	1011 321 ·					
<u> </u>	es, complete the following sch (a) Name of org			(b) Type of organization	· · · ·	(c) Description of relationsh	ıın		
		Jamzanon		(b) Type of organization		(b) Dosonpasii oi rolationoi			
	N/A								
						 			
					<u> </u>				
	Under penalties of perjury, I declare and belief, it/s/true, correct, an/ncoi					. IVIAY	the IRS	discuss	this
Sign	and belief, institue, correct, and con	inplete pecial attorior p	repara (outa mai	Traxpayer) is based of all fillon	Mation of which prepare		n with th	ne prepar / (see ins	er str)?
Here	De Continue	Ruddy		11/14/13	PRESII	DENT	Yes	;] No
	Signature of officer or trustee	{		Date /	Title			_	
	Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check If PTIN			
				~ 1	/ /_	self- employed			
Paid	BRENT T. F	מווגעתדקי	FR. C	to charl	111/13/13	·	400	949	ļ
Prepa			T.T.D			Firm's EIN ► 47-60			
Use O		IOC MA OU M.	א, בייר			THINSLIN P 4 / 200	, , , ,	10	
-36 U	-	001 5	<u> </u>	OTTER 200					
				, SUITE 200		D			
	O <u>M</u>	IAHA, NE	<u> 58022-4</u>	122		Phone no. (402)	<u> 330</u>	- 26	<u>0U</u>

(402)330-2660 Form **990-PF** (2012)

Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

• If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		i	▼ [X]	
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)			
Do not	complete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sly filed Fo	orm 8868		
Electro	nic filing (e-file). You can electronically file Form 8868 if	you need a	a 3-month automatic extension of til	ne to file (6 months for a co	rporation	
require	d to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically t	ile Form 8	868 to request an	extension	
	to file any of the forms listed in Part I or Part II with the ex		•		•		
	al Benefit Contracts, which must be sent to the IRS in pap	-					
	w irs gov/efile and click on e-file for Chanties & Nonprofits		,			- · · · · · · · · ·	
Part			submit original (no copies ne	eded).			
A corpo	oration required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete			
Part I o	nly			·	i		
_	r corporations (including 1120-C filers), partnerships, REM come tax returns.	IICs, and t	rusts must use Form 7004 to reques	st an exter	nsion of time		
Type or	Name of exempt organization or other filer, see instru	ictions		Employe	Employer identification number (EIN) or		
print	THE GFH & SAH FOUNDATION				47-08164	144	
file by the due date f filing your	or Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	cunty number (SS	SN)	
return Se		oreign add	lress, see instructions	'			
Enter th	e Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
		,					
Applica	tion	Return	Application	FF	11	Return	
Is For		Code	Is For	<u> </u>		Code	
Form 99	90 or Form 990-EZ	01	Form 990-T (corporation)	&/ A++ 1	ILED 5 2013	07	
Form 99	90-BL	02	Form 1041-A	MAY 1	5 2012	08	
Form 47	720 (individual)	03	Form 4720		2013	09	
Form 99	90-PF	04	Form 5227			10	
Form 99	90-T (sec 401(a) or 408(a) trust)	05	Form 6069			11	
Form 99	00-T (trust other than above)	06	Form 8870			12	
	GEORGE F. HADD						
• The	books are in the care of \blacktriangleright 7411 MADISON S	PREET_	- RALSTON, NE 681	27		 -	
Telep	phone No. ► 402-505-6002		FAX No ▶				
• If the	organization does not have an office or place of business	s in the Un	ited States, check this box)	▶ □	
• If the	s is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	f this is fo	r the whole group,	, check this	
box ▶	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs o	f all memb	ers the extension	is for.	
1 1	equest an automatic 3-month (6 months for a corporation	required t	to file Form 990-T) extension of time	until			
	AUGUST 15, 2013 , to file the exemp	t organiza	tion return for the organization name	ed above.	The extension		
IS	for the organization's return for:						
•	X calendar year 2012 or						
•	tax year beginning	, an	d ending				
2 If	the tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on: Initial return	Fınal retur	n		
	this application is for Form 990-BL, 990-PF, 990-T, 4720, onrefundable credits. See instructions	or 6069, e	nter the tentative tax, less any	За	s	0.	
_	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	Sd			
	stimated tax payments made Include any prior year overp			3b	•	0.	
_	alance due. Subtract line 3b from line 3a. Include your pa			30			
	alance due. Subtract line 35 from line 3a. Include your pa y using EFTPS (Electronic Federal Tax Payment System).			3c	_{\$}	0.	
	n. If you are going to make an electronic fund withdrawal v				EO for payment in		
	For Privacy Act and Paperwork Reduction Act Notice,			30.0		Rev. 1-2013)	

Form	8868 (Rev. 1-2013)					Pε	age 2	
	ou are filing for an Additional (Not Automatic) 3-Month Ex	ctension,	complete only Part II and check thi	s box		▶ [X]		
Note.	Only complete Part II if you have already been granted an ou are filing for an Automatic 3-Month Extension, comple	automatic	3-month extension on a previously f		n 8868.			
Par				ginal (r	o copie	s needed).		
			-	-	_	er, see instruction	ons	
Туре	or Name of exempt organization or other filer, see instru	ictions				ation number (Ell		
print								
File by t				47-0816444				
due dat filing yo	Nulliber, street, and room of suite no. If a r.o. box, s	ee instruc	tions.	Social s	ecunty nur	mber (SSN)		
retum S		oreign add	lress, see instructions.					
Enter	the Return code for the return that this application is for (file	e a separa	te application for each return)	-		0	4	
Applio	ation	Return	Application			Retu	urn	
s For		Code	Is For			Coc	de	
orm !	990 or Form 990-EZ	01						
orm 9	990-BL	02	Form 1041-A				3	
orm 4	1720 (ındividual)	03	Form 4720			09)	
orm 9	990-PF	04	Form 5227			10	<u></u>	
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069					11			
	990-T (trust other than above) Do not complete Part II if you were not already granted	06	Form 8870			12	<u>}</u>	
Tele		s in the Un Group Exe and atta NOVEME	FAX No. Inted States, check this box Inted States, check this box Imption Number (GEN) If Interest a list with the names and EINs of BER 15, 2013. Interest a list with the names and EINs of BER 15, 1011 and ending the contract of the contrac	this is for all memb	ers the ex	tension is for.	his	
	f this application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6069, er	nter the tentative tax, less any				^	
	onrefundable credits. See instructions.			8a	\$		0.	
	f this application is for Form 990-PF, 990-T, 4720, or 6069, e	•						
	ax payments made. Include any prior year overpayment alk	owed as a	credit and any amount paid			(^	
-	previously with Form 8868.		Abradama idaa ariinad buuruu	8b	\$		<u>0.</u>	
	Selance due. Subtract line 8b from line 8a. Include your pay FTPS (Electronic Federal Tax Pay <u>ment System). See instru</u>		triis form, it required, by using			(0.	
			t be completed for Part II o	8c	\$		<u>.</u>	
nder p is true ignatu	enalties of perjury, I declare that I have examined this form, including, correct, and complete, and that I am authorized to prepare this for	по ассотр	•	the best o	•	dge and belief,		
ignatu	THE PARTY THE			pale	Enm	RRRR /Pov 1-20	113)	
					FOIII	110V. 120	, 10)	

Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0045

mailed 8-15-13

Certified Article Number 7196 9008 9111 7270 8161

SENDERS RECORD

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient NONE PUBLIC CHARITY GENERAL SUPPORT JESUIT ACADEMEY 2311 NORTH 22ND OMAHA, NE 68110 35,000. OMAHA SCHOOL FOUNDATION - NORTH HIGH NONE PUBLIC CHARITY GENERAL SUPPORT 3215 CUMMING ST 25,000. OMAHA, NE 68131 Total from continuation sheets 60,000.

FORM 990-PF INTEREST ON SAVI	NGS A	ND TEM	PORARY C	ASH IN	VESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
INTEREST INCOME - FNB OMAHA						11.	
TOTAL TO FORM 990-PF, PART I,		11.					
FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT)
DEUTCHE BANK ALEX BROWN	•		15.		0.		15.
TOTAL TO FM 990-PF, PART I, I	,N 4		15. 0.		0.	15.	
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	3
EXP		A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
PROFESSIONAL FEES		2,587.		0.			0.
TO FORM 990-PF, PG 1, LN 16B		2,587.		0.			0.
FORM 990-PF OTHER EXPENSES						STATEMENT	4
	(A) EXPENSES PER BOOKS		(B) NET INVEST- MENT INCOME				
DESCRIPTION	PER	POOVS	HENT IN				
DESCRIPTION BANK FEES ADMIN EXPENSES		40. 633.	MENT IN	40.			0.

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS STATEMENT 5
PART VII-A, LINE 10

NAME OF CONTRIBUTOR

GEORGE F. HADDIX

7411 MADISON STREET
RALSTON, NE 68127