See a Social Security Number? Say Something!
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Or call the IRS Identity Theft Hotline at 1-800-908-4490

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public
► Information about Form 990 and its instructions is at *www.irs.gov/form990.*

OMB No 1545 0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning , 2013, and ending ,

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C
Omaha Community Foundation
Donor Directed Depository
302 S 36th ST #100
Omaha, NE 68131

D Employer Identification Number
36-3789990

E Telephone number
(402) 342-3458

G Gross receipts $ 97,971,016.

F Name and address of principal officer
Same As C Above

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If 'No,' attach a list (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( )◄ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ► www.omahafoundation.org

H(c) Group exemption number ►

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ► **L** Year of formation 1991 **M** State of legal domicile NE

Part I Summary

1 Briefly describe the organization's mission or most significant activities: Support the Omaha Community Foundation's Mission.

2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	19
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	19
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

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		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	55,673,342.	50,850,220.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	176,975.	229,279.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	55,850,317.	51,079,499.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	49,489,722.	39,070,040.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ►		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	213,754.	254,315.
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	49,703,476.	39,324,355.
19	Revenue less expenses Subtract line 18 from line 12	6,146,841.	11,755,144.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	21,294,384.	32,457,602.
21	Total liabilities (Part X, line 26)	205,839.	321,813.
22	Net assets or fund balances Subtract line 21 from line 20	21,088,545.	32,135,789.

SCANNED DEC 11 2014

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge

Sign Here

► Signature of officer Melissa Sunde Date 11/14/2014

► Type or print name and title MELISA SUNDE

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	Non-Paid Preparer			

Firm's name ►
Firm's address ►
Firm's EIN ►
Phone no

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

917

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III ☐

1 Briefly describe the organization's mission

Support the Omaha Community Foundation's Mission.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses $ 39,269,170. including grants of $ 39,070,040.) (Revenue $ _____)

The sole operational and organizational purpose and activity is to raise gifts and donations from donors and distribute such funds at the direction of the donors to qualified charitable, educational, civil and religious organizations.

4b (Code _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4c (Code _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4d Other program services (Describe in Schedule O)

(Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4e Total program service expenses ► 39,269,170.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If 'Yes,' complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If 'Yes,' complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If 'Yes,' complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If 'Yes,' complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If 'Yes,' complete Schedule D, Part I*	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If 'Yes,' complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If 'Yes,' complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If 'Yes,' complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If 'Yes,' complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings and equipment in Part X, line 10? *If 'Yes,' complete Schedule D, Part VI*	11a		X
b	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If 'Yes,' complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If 'Yes,' complete Schedule D, Parts XI, and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If 'Yes,' complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If 'Yes,' complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If 'Yes,' complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If 'Yes,' complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If 'Yes,' complete Schedule G, Part I (see instructions)*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If 'Yes,' complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If 'Yes,' complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If 'Yes,' complete Schedule H*	20		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

		Yes	No
21 Did the organization report more than $5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? *If 'Yes,' complete Schedule I, Parts I and II*	21	X	
22 Did the organization report more than $5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? *If 'Yes,' complete Schedule I, Parts I and III*	22		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete Schedule J*	23	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No,'go to line 25a*	24a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If 'Yes,' complete Schedule L, Part I*	25a		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If 'Yes,' complete Schedule L, Part I*	25b		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If 'Yes,' complete Schedule L, Part III*	27		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a A current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV*	28a		X
b A family member of a current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV*	28b		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If 'Yes,' complete Schedule L, Part IV*	28c		X
29 Did the organization receive more than $25,000 in non-cash contributions? *If 'Yes,' complete Schedule M*	29	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If 'Yes,' complete Schedule M*	30		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? *If 'Yes,' complete Schedule N, Part I*	31		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If 'Yes,' complete Schedule N, Part II*	32		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If 'Yes,' complete Schedule R, Part I*	33		X
34 Was the organization related to any tax-exempt or taxable entity? *If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If 'Yes,' complete Schedule R, Part V, line 2*	35b		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? *If 'Yes,' complete Schedule R, Part V, line 2*	36		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If 'Yes,' complete Schedule R, Part VI*	37		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b	If 'Yes' has it filed a Form 990-T for this year? *If 'No' to line 3b, provide an explanation in Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If 'Yes,' enter the name of the foreign country ►				
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c	X	
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d	6		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If 'Yes,' has it filed a Form 720 to report these payments? *If 'No,' provide an explanation in Schedule O*		14b		

Part VI **Governance, Management and Disclosure** *For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	1a 19		
b	Enter the number of voting members included in line 1a, above, who are independent	1b 19		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? See Schedule O	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If 'Yes,' provide the names and addresses in Schedule O*	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O			
12a	Did the organization have a written conflict of interest policy? *If 'No,' go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If 'Yes,' describe in Schedule O how this was done* See Schedule O	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official See Schedule O	15a	X	
b	Other officers of key employees of the organization See Schedule O	15b	X	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► None

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

[ ] Own website [ ] Another's website [X] Upon request [X] Other *(explain in Schedule O)* See Sch. O

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year See Schedule O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

► Melisa Sunde 302 S 36th St Omaha NE 68131 (402) 342-3458

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of 'key employee '
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099 MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Patrick J. Corrigan	0.5									
Director	1							0.	0.	0.
(2) Thomas Warren	0.5									
Director	0.5							0.	0.	0.
(3) Robert D. Bates	0.5									
Director	1	X						0.	0.	0.
(4) Mike Cassling	0.5									
Director	1	X						0.	0.	0.
(5) Tim Clark	0.5									
Director	1	X						0.	0.	0.
(6) Michael G. Fahey	0.5									
Director	4	X		X				0.	0.	0.
(7) Jennifer Hamann	0.5									
Director	1	X						0.	0.	0.
(8) Carey Hamilton	0.5									
Director	1	X						0.	0.	0.
(9) Mary S. Jones	1									
Director	2	X		X				0.	0.	0.
(10) Janet Melchoir-Kopp	0.5									
Director	1	X						0.	0.	0.
(11) Sharon Kresha	0.5									
Director	1	X						0.	0.	0.
(12) John P. Nelson	0.5									
Director	1	X						0.	0.	0.
(13) Thomas K. Nichting	0.5									
Director	1	X						0.	0.	0.
(14) Jeff Gordman	0.5									
Director	0.5	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W 2/1099-MISC)	(E) Reportable compensation from related organizations (W 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Mary Reckmeyer	0.5									
Director	1	X						0.	0.	0.
(16) Constance M. Ryan	0.5									
Vicechairman	1	X		X				0.	0.	0.
(17) John A. Scott	0.5									
Director	1	X						0.	0.	0.
(18) Todd D. Simon	2									
Vice Chairman	2	X		X				0.	0.	0.
(19) Jeffrey L. Snyder	0.5									
Director	1	X						0.	0.	0.
(20) Mark A. Weber	0.5									
Secretary	1	X		X				0.	0.	0.
(21) Melisa Sunde	10									
CFO	30			X				0.	112,786.	29,415.
(22) Sara Boyd	10									
President & CEO	30			X				0.	230,840.	15,830.
(23) Mike Leighton	10									
CEO	30						X	0.	156,167.	12,785.
(24)										
(25)										
1 b Sub-total							►	0.	499,793.	58,030.
c Total from continuation sheets to Part VII, Section A							►	0.	0.	0.
d Total (add lines 1b and 1c)							►	0.	499,793.	58,030.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ► 0

		Yes	No
3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual*	3	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If 'Yes' complete Schedule J for such individual*	4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If 'Yes,' complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ► 0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	893,211.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	49,957,009.			
	g Noncash contributions included in lines 1a-1f	$	43,124,538.			
	h **Total.** Add lines 1a-1f			50,850,220.		
PROGRAM SERVICE REVENUE		Business Code				
	2a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f					
	3 Investment income (including dividends, interest and other similar amounts)		231,223.			231,223.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real	(ii) Personal			
	6a Gross rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	46889573.				
	b Less cost or other basis and sales expenses	46891517.				
	c Gain or (loss)	-1,944.				
	d Net gain or (loss)			-1,944.		-1,944.
OTHER REVENUE	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a				
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
	Miscellaneous Revenue	Business Code				
	11a					
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d					
	12 **Total revenue.** See instructions		51,079,499.	0.	0.	229,279.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	39,070,040.	39,070,040.		
2 Grants and other assistance to individuals in the United States See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management	199,130.	199,130.		
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	54,577.		54,577.	
g Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	608.		608.	
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a Other Expenses				
b				
c				
d				
e All other expenses				
25 **Total functional expenses** Add lines 1 through 24e	39,324,355.	39,269,170.	55,185.	0.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X ☐

			(A) Beginning of year		(B) End of year
ASSETS	1	Cash — non-interest-bearing		1	
	2	Savings and temporary cash investments	5,075,074.	2	18,103,164.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a			
	b	Less accumulated depreciation — 10b		10c	
	11	Investments — publicly traded securities	16,167,531.	11	13,768,974.
	12	Investments — other securities See Part IV, line 11	6,227.	12	546,763.
	13	Investments — program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	45,552.	15	38,701.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	21,294,384.	16	32,457,602.
LIABILITIES	17	Accounts payable and accrued expenses	118,113.	17	261,087.
	18	Grants payable	87,726.	18	60,726.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	205,839.	26	321,813.
NET ASSETS OR FUND BALANCES		**Organizations that follow SFAS 117 (ASC 958), check here ► ☒ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	21,088,545.	27	32,135,789.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	21,088,545.	33	32,135,789.
	34	Total liabilities and net assets/fund balances	21,294,384.	34	32,457,602.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	51,079,499.
2	Total expenses (must equal Part IX, column (A), line 25)	2	39,324,355.
3	Revenue less expenses Subtract line 2 from line 1	3	11,755,144.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	21,088,545.
5	Net unrealized gains (losses) on investments	5	-144,485.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O) See Schedule O	9	-563,415.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	32,135,789.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII [ ]

			Yes	No
1	Accounting method used to prepare the Form 990 [ ] Cash [X] Accrual [ ] Other _____			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both			
	[ ] Separate basis [ ] Consolidated basis [ ] Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both.			
	[ ] Separate basis [X] Consolidated basis [ ] Both consolidated and separate basis			
c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► **Attach to Form 990 or Form 990-EZ.**

► **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.***

OMB No 1545 0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
Omaha Community Foundation Donor Directed Depository	36-3789990

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☒ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III – Functionally integrated **d** ☐ Type III – Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11 g (i)**	
(ii)	A family member of a person described in (i) above?	**11 g (ii)**	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	**11 g (iii)**	

h Provide the following information about the supported organization(s)

	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U S ?		(vii) Amount of monetary support
				Yes	No	Yes	No	Yes	No	
(A)										
(B)										
(C)										
(D)										
(E)										
Total										

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants ')	23636611.	32821866.	27650885.	55673342.	50850220.	190632924.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 **Total.** Add lines 1 through 3	23636611.	32821866.	27650885.	55673342.	50850220.	190632924.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						122913237.
6 **Public support.** Subtract line 5 from line 4						67,719,687.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	23636611.	32821866.	27650885.	55673342.	50850220.	190632924.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	367,654.	296,437.	226,364.	199,979.	232,013.	1,322,447.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.
11 **Total support.** Add lines 7 through 10						191955371.

12 Gross receipts from related activities, etc (see instructions)	12	0.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	35.28 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	47.76 %

16a **33-1/3% support test – 2013.** If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☒

b **33-1/3% support test – 2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

17a **10%-facts-and-circumstances test – 2013.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test The organization qualifies as a publicly supported organization ► ☐

b **10%-facts-and-circumstances test – 2012.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test The organization qualifies as a publicly supported organization ► ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants.')						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total Support.** (Add lns 9,10c, 11 and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2012** Schedule A, Part III, line 17	18	%

19a **33-1/3% support tests – 2013.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

b **33-1/3% support tests – 2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ► ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

Omaha Community Foundation
Donor Directed Depository

Employer identification number

36-3789990

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	763	
2	Aggregate contributions to (during year)	50,850,220.	
3	Aggregate grants from (during year)	39,070,040.	
4	Aggregate value at end of year	32,457,602.	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? [X] Yes [ ] No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? [X] Yes [ ] No

Part II Conservation Easements.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

- [ ] Preservation of land for public use (e g , recreation or education)
- [ ] Protection of natural habitat
- [ ] Preservation of open space
- [ ] Preservation of an historically important land area
- [ ] Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? [ ] Yes [ ] No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ►$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [ ] Yes [ ] No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ►$

(ii) Assets included in Form 990, Part X ►$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ►$

b Assets included in Form 990, Part X ►$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIII Check here if the explantion has been provided in Part XIII ☐

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ► _____ %
b Permanent endowment ► _____ %
c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations 3a(i)		
(ii) related organizations 3a(ii)		
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))*			►	0.

Part VII Investments – Other Securities. N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total *(Column (b) must equal Form 990, Part X, column (B) line 12)* ►		

Part VIII Investments – Program Related. N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, column (B) line 13)* ►		

Part IX Other Assets. N/A

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, column (B), line 15)* ►	

Part X Other Liabilities.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, column (B) line 25)* ►	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII See Part XIII [X]

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	50,371,599.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.				
a	Net unrealized gains on investments	2a	-144,485.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII) See Part XIII	2d	-563,415.		
e	Add lines 2a through 2d			2e	-707,900.
3	Subtract line 2e from line 1			3	51,079,499.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12)*			5	51,079,499.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	39,324,355.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	39,324,355.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18)*			5	39,324,355.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Part X - FIN 48 Footnote

The foundation accounts for uncertainties in accounting for income taxes using the guidance included in Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) Topic 740, Income Taxes. The Foundation recognizes the effect of income tax positions only if those positions are more likely than not of being sustained. At December 31, 2013, the Foundation had no uncertain tax positions which are accrued.

Schedule D, Part XI, Line 2d
Other Revenue Included In F/S But Not Included On Form 990

Transfers	$ -563,415.
Total	$ -563,415.

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.
► **Attach to Form 990.**
► **Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990.***

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

Omaha Community Foundation

Employer identification number

36-3789990

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. See Part IV

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Abide Network 3335 Fowler Avenue Omaha, NE 68111	47-0655246	501(c)(3)	7,050	0.			Human Services
(2) Adoption Links Worldwide 124 S. 24th Street Suite 200 Omaha, NE 68102	47-0766741	501(c)(3)	6,000.	0.			Human Services
(3) Ak-Sar-Ben Scholarship Fund 8707 West Center Rd St 101 Omaha, NE 68124	47-0447496		47,380.	0.			Philanthropy, Volunatarism, Grantma
(4) All Holy Spirit Greek Orthodo 9012 Q Street Omaha, NE 68127	20-4948228	501(c)3	23,100.	0.			Religion
(5) All Saints Episcopal Church 9302 Blondo Street Omaha, NE 68134	47-0399847	501(c)(3)	65,425.	0.			Religion
(6) American Cancer Society 9850 Nicholas St Suite 200 Omaha, NE 68114	13-1788491	501(c)(3)	16,357.	0.			Medical Research
(7) American Diabetes Association 14216 Dayton Circle Suite 6 Omaha, NE 68137	13-1623888	501(c)3	5,550.	0.			Disease, Disorders
(8) American Red Cross/Heartland 2912 S 80th Ave Omaha, NE 68124	53-0196605	501(c)(3)	5,850.	0.			Public Safety, Disaster Preparednes

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ► 322

3 Enter total number of other organizations listed in the line 1 table ► 0

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

Due diligence is conducted to ensure grants are made to qualified charities that are not private non-operating foundations, non-functionally integrated Type III supporting organizations, not to be used by individuals for private benefit, and that no portion of a grant is in exchange for goods and services. The process is monitored by the board.

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
Alzheimer's Association Midlands,1941 South 42nd Street Suite 205 Omaha, NE 68105	47-0648438	501(C)(3)	6,550.00				Disease, Disorders, Medical Disciplines
American Red Cross/National Headquarters,PO Box 37243 Washington, DC 20013	53-0196605	501(C)(3)	5,850.00				Health - General & Rehabilitative
Angels Among Us, Inc.,11918 Poppleton Plaza #2 Omaha, NE 68144	20-4728470	501(C)(3)	5,200.00				Health - General & Rehabilitative
Aqua Africa Inc./Players for the Planet,1213 Jones St. Omaha, NE 68102	20-5675703	501(C)(3)	22,500.00				Community Improvement, Capacity Building
Archdiocese of Omaha,100 North 62nd St. Omaha, NE 68132	47-0376538	501(C)(3)	563,450.00				Religion, Spiritual Development
Audubon Nebraska - National Audubon Society,P. O. Box 117 11700 SW 100th St.	13-1624102	501(C)(3)	21,000.00				Environmental Quality Protection, Beautification
Audubon Recreation Foundation,1960 190th Street Audubon, IA 50025	26-4730829	501(C)(3)	34,692.00				Recreation, Sports, Leisure, Athletics
Augustana College,639 38th Street Rock Island, IL 61201-9988	36-2166962	501(C)(3)	100,000.00				Educational Institutions
Autism Action Partnership,14301 FNB Parkway Suite 115 Omaha, NE 68154	20-6892034	501(C)(3)	25,000.00				Philanthropy, Voluntarism, Grantmaking
Bellevue University,1000 Galvin Road Bellevue, NE 68005	47-0491571	501(C)(3)	10,100.00				Educational Institutions
Bemis Center For Contemporary Arts,724 S. 12th Street Omaha, NE 68102-3202	47-0653927	501(C)(3)	40,500.00				Arts, Culture, & Humanities
Big Brothers Big Sisters of the Midlands,10831 Old Mill Road, Suite 400 Omaha, NE 68154	47-0466144	501(C)(3)	118,825.00				Youth Development
Blair Public Library Foundation,210 South 17th Street Blair, NE 68008	41-2024659	501(C)(3)	21,000.00				Community Improvement, Capacity Building

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
Boy Scouts of America,P.O. Box 152079 1325 West Walnut Hill Lane Irving, TX 75038	22-1576300	501(C)(3)	1,000,000.00				Youth Development
Boys & Girls Clubs of the Midlands,2610 Hamilton Street Omaha, NE 68131-1640	47-0467350	501(C)(3)	90,150.00				Youth Development
Brain Injury Association of Colorado,1385 S Colorado Blvd Suite A606 Denver, CO 80222	84-0893049	501(C)(3)	10,000.00				Disease, Disorders, Medical Disciplines
Broadway Dreams Foundation Corporation,8965 Brockham Way Alpharetta,	26-4771520	501(C)(3)	100,100.00				Arts, Culture, & Humanities
Brookside Church,11607 M Circle Omaha, NE 68137-2229	47-0641067	501(C)(3)	5,720.00				Religion, Spiritual Development
Buena Vista University,610 W. 4th Street Office-Institutional Advance. Storm Lake, IA 50588	42-0680404	501(C)(3)	6,600.00				Educational Institutions
Caminar,2600 El Camino Real Suite 200 San Mateo, CA 94403	94-1639389	501(C)(3)	25,000.00				Disease, Disorders, Medical Disciplines
Campus Crusade for Christ,P. O. Box 628222 100 Lakeheart Drive #2200 Orlando, FL 32862-	95-6006173	501(C)(3)	9,527.55				Religion, Spiritual Development
Cass County Agricultural and Educational Association,805 West 10th Street Atlantic, IA	42-6078263	501(C)(3)	9,000.00				Public, Society Benefit
Cass County Board of Supervisors,5 West 7th Street Atlantic, IA 50022	42-60004251	501(C)(3)	14,000.00				Community Improvement, Capacity Building
Cass County Historical Museum and Society,P. O. Box 254 Griswold, IA 51535	42-1409956	501(C)(3)	9,500.00				Community Improvement, Capacity Building
Casting for Recovery Inc./Nebraska Chapter,809 N 96th St Omaha, NE 68114	03-0354382	501(C)(3)	10,000.00				Disease, Disorders, Medical Disciplines
Catholic Charities,3300 North 60th Street Omaha, NE 68104	47-0376612	501(C)(3)	75,975.00				Human Services

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
Catholic Charities/San Bernadino,1450 North D Street San Bernadino, CA 92405	95-3516461	501(C)(3)	10,000.00				Human Services
Catholic Relief Services,228 West Lexington Street P.O. Box 17090 Baltimore, MD 21203-	13-5563422	501(C)(3)	8,100.00				Human Services
CEC Seabee Historical Foundation,P.O. Box 657 Gulfport, MS 39502-0657	58-1998577	501(C)(3)	201,000.00				Community Improvement, Capacity Building
Center for the Advancement of Self Sufficiency (CASS Incorporated,1406 Southwest 7th Street	42-1072788	501(C)(3)	7,000.00				Public, Society Benefit
Child Saving Institute,4545 Dodge Street Omaha, NE 68132	45-0489204	501(C)(3)	23,950.00				Human Services
Children's Hospital & Medical Center Foundation,8401 West Dodge Road, #120	47-6105603	501(C)(3)	42,325.00				Health - General & Rehabilitative
Children's Respite Care Center,5321 South 138th St. Omaha, NE 68137	47-0718409	501(C)(3)	79,950.00				Human Services
Children's Scholarship Fund,1414 Harney St. Suite 400 Omaha, NE 68102	47-0822724	501(C)(3)	46,050.00				Educational Institutions
Christ Child Society of Omaha,1248 S. 10th Street Omaha, NE 68108	47-0376574	501(C)(3)	11,550.00				Human Services
Christ the King Church,654 So. 86th Street Omaha, NE 68114	47-0399849	501(C)(3)	146,975.00				Religion, Spiritual Development
City of Anita,P. O. Box 246 Anita, IA 50020		501(C)(3)	6,000.00				Public, Society Benefit
City of Arion,333 4th Street Dow City, IA 51528	42-1117706	501(C)(3)	10,000.00				Community Improvement, Capacity Building
City of Atlantic,P. O. Box 371 Atlantic, IA 50022	42-6004251	501(C)(3)	7,500.00				Public, Society Benefit

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization: Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
City of Clarinda,1140 East Main Clarinda, IA 51632	42-6004378	501(C)(3)	20,000.00				Public Safety, Disaster Preparedness & Relief
City of Defiance,P. O. Box 312 Defiance, IA 51527	42-6037406	501(C)(3)	16,000.00				Public Safety, Disaster Preparedness & Relief
City of Elk Horn,P. O. Box 216 Elk Horn, IA 51531	42-6004634	501(C)(3)	30,000.00				Arts, Culture, & Humanities
City of Exira,P. O. Box 187 Exira, IA 50076	42-6004652	501(C)(3)	24,985.00				Community Improvement, Capacity Building
City of Glenwood,5 North Vine Street Glenwood, IA 51534	42-6004707	501(C)(3)	10,500.00				Public Safety, Disaster Preparedness & Relief
City of Griswold,601 2nd Street Griswold, IA 51535	42-6004736	501(C)(3)	8,000.00				Public, Society Benefit
City of Hastings,P. O. Box 703 Hastings, IA 51540	42-0524001	501(C)(3)	12,500.00				Community Improvement, Capacity Building
City of Irwin,P. O. Box 118 Irwin, IA 51446	42-6006402	501(C)(3)	10,000.00				Community Improvement, Capacity Building
City of Kimballton,116 North Main Street Kimballton, IA 51543	42-9004840	501(C)(3)	24,692.00				Community Improvement, Capacity Building
City of Kirkman,P. O. Box 118 Kirkman, IA 51447	42-1189700	501(C)(3)	12,180.00				Community Improvement, Capacity Building
City of Manilla,P. O. Box 398 Manilla, IA 51454	42-6004916	501(C)(3)	8,500.00				Public, Society Benefit
City of Missouri Valley,223 East Erie Street Missouri Valley, IA 51555	42-6004970	501(C)(3)	32,262.00				Community Improvement, Capacity Building
City of Modale,310 East Palmer Street Modale, IA 51556	42-6006118	501(C)(3)	5,500.00				Public, Society Benefit

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization. Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
City of Pacific Junction,P. O. Box 337 Pacific Junction, IA 51561	42-6025900	501(C)(3)	6,000.00				Public, Society Benefit
City of Red Oak,P. O. Box 475 Red Oak, IA 51566	42-6005142	501(C)(3)	16,500.00				Community Improvement, Capacity Building
City of Riverton,P. O. Box 147 Riverton, IA 51650	42-6022677	501(C)(3)	11,400.00				Public Safety, Disaster Preparedness & Relief
City of Shenandoah,500 West Clarinda Avenue Shenandoah, IA 51601	42-6005200	501(C)(3)	9,000.00				Public, Society Benefit
City of Tabor,P. O. Box 309 Tabor, IA 51653	42-0336002	501(C)(3)	5,500.00				Public, Society Benefit
City of Villisca,318 South 3rd Avenue Villisca, IA 50864	42-6005298	501(C)(3)	17,577.00				Community Improvement, Capacity Building
Clarinda Foundation, Inc.,114 East Washington Street Clarinda, IA 51632	42-1285187	501(C)(3)	11,000.00				Community Improvement, Capacity Building
College of Saint Mary,7000 Mercy Road Omaha, NE 68106	47-0424785	501(C)(3)	57,650.00				Educational Institutions
Columbus Community Foundation Inc.,P.O. Box 515 764 33rd Avenue Columbus, NE 68602-	47-0736322	501(C)(3)	8,500.00				Philanthropy, Voluntarism, Grantmaking
Community Alliance Inc.,4001 Leavenworth Street Omaha, NE 68105	47-0637493	501(C)(3)	33,750.00				Human Services
Completely Kids,2566 St. Mary's Avenue Omaha, NE 68105	27-5111197	501(C)(3)	26,150.00				Youth Development
Concordia University,800 No. Columbia Avenue Seward, NE 68434	47-0378777	501(C)(3)	22,500.00				Educational Institutions
Country Bible Church/Upper Room Inc.,P.O. Box 219 Blair, NE 68008	47-0667035	501(C)(3)	5,227.41				Religion, Spiritual Development

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization: Omaha Community Foundation Donor Directed

Employer Identification Number: 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
Countryside Community Church,8787 Pacific Street Omaha, NE 68114	47-6000646	501(C)(3)	164,750.00				Religion, Spiritual Development
Crawford County Board of Supervisors,1202 Broadway Denison, IA 51442	42-6004496	501(C)(3)	13,111.00				Community Improvement, Capacity Building
Creighton Preparatory School,7400 Western Avenue Omaha, NE 68114	47-0438012	501(C)(3)	165,400.00				Educational Institutions
Creighton University,2500 California Plaza Office of Development Omaha, NE 68178	47-0376583	501(C)(3)	3,588,510.00				Educational Institutions
Cross Catholic Outreach,370 W. Camino Gardens Blvd P.O. Box 273908 Boca Raton, FL	65-1156061	501(C)(3)	13,050.00				Human Services
Cross Training Center (Angels on Wheels),5030 No 72st St Omaha, NE 68134	47-0827231	501(C)(3)	5,100.00				Human Services
Crossroads Connections Inc.,851 N. 74th St. Omaha, NE 68114	51-0571493	501(C)(3)	9,000.00				Employment, Job Related
Crossroads Ministry of Estes Park Inc.,851 Dry Gultch Road P.O. Box 3616 Estes Park, CO	74-2465229	501(C)(3)	11,000.00				Human Services
CUES,2207 Wirt Street Omaha, NE 68110-2055	47-0415808	501(C)(3)	132,250.00				Educational Institutions
Cystic Fibrosis Foundation,11917 Pierce Plaza Nebraska Chapter Omaha, NE 68144	47-0527737	501(C)(3)	8,450.00				Disease, Disorders, Medical Disciplines
Daniel J Gross Catholic High School,7700 S. 43rd Street Bellevue, NE 68147	47-0522441	501(C)(3)	21,544.00				Recreation, Sports, Leisure, Athletics
Desert Community Foundation,75-105 Merle Dr., Ste 300 Palm Desert, CA 92211	95-4725924	501(C)(3)	14,500.00				Philanthropy, Voluntarism, Grantmaking
Donna Reed Foundation for the Performing Arts,1305 Broadway Denison, IA 51442	42-1285098	501(C)(3)	21,565.00				Arts, Culture, & Humanities

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
Dowd Chapel at Boys Town,13943 Dowd Drive Boys Town, NE 68010	47-0376606	501(C)(3)	7,100.00				Religion, Spiritual Development
Downtown Omaha, Inc. Foundation,P.O. Box 8312 Omaha, NE 68108	31-1752228	501(C)(3)	10,000.00				Community Improvement, Capacity Building
Duchesne Academy,3601 Burt Street Omaha, NE 68131	47-0376614	501(C)(3)	80,830.95				Educational Institutions
Dundee Presbyterian Church,5312 Underwood Avenue Omaha, NE 68132	47-0378988	501(C)(3)	58,600.00				Religion, Spiritual Development
Durham Museum,801 S. 10th Street Omaha, NE 68108-3299	47-0556061	501(C)(3)	96,650.00				Arts, Culture, & Humanities
dZi Foundation,P.O. Box 632 565 Sherman #8 Ridgway, CO 81432	84-1595852	501(C)(3)	10,000.00				Public, Society Benefit
Educate Uganda,1225 N 136th Ave Omaha, NE 68154-5265	20-8468493	501(C)(3)	11,100.00				International, Foreign Affairs & National Security
Elkhorn Hills United Methodist Church,20227 Veterans Drive Elkhorn, NE 68022	47-0678208	501(C)(3)	30,000.00				Religion, Spiritual Development
Essential Pregnancy Services (EPS),6220 Maple Street Omaha, NE 68104	23-7300162	501(C)(3)	6,400.00				Health - General & Rehabilitative
Farragut Fire and Rescue Association,503 Hartford Avenue Farragut, IA 51639	04-3745806	501(C)(3)	10,000.00				Public Safety, Disaster Preparedness & Relief
Father Flanagan's Boys Home/Boys Town,14100 Crawford Street P. O. Box 7000 Boys Town, NE	47-0376606	501(C)(3)	208,350.00				Human Services
FGI Spirit,1313 Leavenworth Street Omaha, NE 68102	47-0821053	501(C)(3)	10,000.00				Religion, Spiritual Development
Film Streams,P.O. Box 8485 Omaha, NE 68108-4701	20-2549448	501(C)(3)	30,450.00				Arts, Culture, & Humanities

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Name of organization: Omaha Community Foundation Donor Directed

Employer Identification Number: 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
First Central Congregational Church,421 South 36th Street Omaha, NE 68131	47-0384059	501(C)(3)	27,896.00				Religion, Spiritual Development
First Christian Church,6630 Dodge St Omaha, NE 68132	47-0430499	501(C)(3)	6,000.00				Religion, Spiritual Development
First Presbyterian Church,255 Harding Road Finance Manager Red Bank, NJ 07701	21-0647706	501(C)(3)	7,500.00				Religion, Spiritual Development
First Presbyterian Church,255 Harding Road Finance Manager Red Bank, NJ 07701	21-0647706	501(C)(3)	7,500.00				Religion, Spiritual Development
First Responders Critical Support Foundation,14916 Miami St. Omaha, NE 68116	26-3499345	501(C)(3)	10,450.00				Public Safety, Disaster Preparedness & Relief
First United Methodist Church,7020 Cass Street Omaha, NE 68132	47-0408262	501(C)(3)	38,300.00				Religion, Spiritual Development
Fontenelle Forest Association,1111 N. Bellevue Blvd. Bellevue, NE 68005-4000	47-6026109	501(C)(3)	91,150.00				Environmental Quality Protection, Beautification
Food Bank for the Heartland,10525 J Street Nebraska Food Bank Network Omaha, NE	47-0637701	501(C)(3)	71,089.90				Agriculture, Food, Nutrition
Four County Fair Association,1167 Obanion Road Dunlap, IA 51529	27-0905981	501(C)(3)	9,000.00				Recreation, Sports, Leisure, Athletics
Fremont Area Community Foundation,605 North Broad PO Box 182 Fremont, NE 68026-	47-0629642	501(C)(3)	25,000.00				Philanthropy, Voluntarism, Grantmaking
Fremont Evangelical Free Church,2050 N. Lincoln Avenue Fremont, NE 68025	47-0704061	501(C)(3)	8,500.00				Religion, Spiritual Development
Fremont Mills Community School District,1114 Highway 275 Tabor, IA 51653	42-6037856	501(C)(3)	10,000.00				Public, Society Benefit
Friends of Conservation,700 Commerce Dr. Suite 500 Oak Brook, IL 60523	36-3561971	501(C)(3)	12,000.00				Community Improvement, Capacity Building

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Name of organization Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
Friends of KIOS Public Radio,3230 Burt Street Omaha, NE 68131	47-0734252	501(C)(3)	12,125.00				Arts, Culture, & Humanities
Friends of Naivasha Hospital SHG,25002 Mason Street Waterloo, NE 68069	03-0564411	501(C)(3)	7,100.00				Public Safety, Disaster Preparedness & Relief
GESU Housing, Inc.,5008 1/2 B Dodge Street Omaha, NE 68132	04-3617019	501(C)(3)	20,000.00				Housing, Shelter
Girls Incorporated of Omaha,2811 N. 45th Street Omaha, NE 68104-4518	47-0562184	501(C)(3)	21,500.00				Youth Development
Good News Jail & Prison Ministry,710 S. 17th Street Omaha, NE 68102	54-0703077	501(C)(3)	38,095.00				Crime, Legal Related
Goodwill Industries, Inc.,4805 N 72nd St Omaha, NE 68134	47-0378996	501(C)(3)	36,750.00				Employment, Job Related
Greater Des Moines Community Foundation,1915 Grand Ave Des Moines, IA	42-6139033	501(C)(3)	5,900.00				Philanthropy, Voluntarism, Grantmaking
Greater Omaha Alliance for Business Ethics,Creighton University 2500 California	74-3244900	501(C)(3)	45,550.00				Educational Institutions
Greater Omaha Chamber Foundation,1301 Harney Street Omaha, NE 68102	47-0633685	501(C)(3)	57,500.00				Community Improvement, Capacity Building
Griswold Community School District,P. O. Box 280 Griswold, IA 51535	42-0891133	501(C)(3)	8,000.00				Public, Society Benefit
Habitat for Humanity of Omaha,1701 N 24th St Omaha, NE 68110-2302	36-3283625	501(C)(3)	94,050.00				Housing, Shelter
Haiti Share Inc.,PO Box 9208 Horseshoe Bay, TX 78657	75-3259517	501(C)(3)	10,000.00				International, Foreign Affairs & National Security
Hamburg Economic Development,P. O. Box 9 Hamburg, IA 51640	42-1331888	501(C)(3)	13,577.00				Arts, Culture, & Humanities

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Name of organization: Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
Harrison County Humane Society,106 North 5th Avenue P O Box 174 Logan, IA 51546	61-1485636	501(C)(3)	15,000.00				Community Improvement, Capacity Building
Health Center Association of Nebraska,3929 South 147th St. Altech Plaza, Suite 100A	21-5731401	501(C)(3)	701,897.00				Health - General & Rehabilitative
Heart Ministry Center,2222 Binney Street Omaha, NE 68110	81-0614816	501(C)(3)	14,300.00				Agriculture, Food, Nutrition
Heartland Family Service,2101 So. 42nd Street Omaha, NE 68105	47-0390618	501(C)(3)	72,650.00				Human Services
Heartland Workers Center,4923 S. 24th Street Suite 3A Omaha, NE 68107-2763	27-1709471	501(C)(3)	11,000.00				Human Services
HELP Adult Services,1941 S. 42nd St., Ste 200 Presbyterian Outreach Inc. Omaha, NE 68105	36-3412688	501(C)(3)	10,000.00				Health - General & Rehabilitative
Heritage Services,10050 Regency Cir Ste 101 Omaha, NE 68114	47-0731254	501(C)(3)	500,000.00				Philanthropy, Voluntarism, Grantmaking
Hope Center, Inc.,2200 N. 20th Street Omaha, NE 68110-2202	47-0826512	501(C)(3)	17,050.00				Youth Development
Hospital Foundation of Crawford County,2020 1st Avenue South Denison, IA 51442	42-1402336	501(C)(3)	10,000.00				Health - General & Rehabilitative
Incarnation United Church of Christ,45 North Fourth Street P.O. Box 68 Newport, PA 17074	23-2267746	501(C)(3)	6,000.00				Religion, Spiritual Development
Inclusive Communities,6001 Dodge St Room 122 Omaha, NE 68182-0868	20-3290755	501(C)(3)	13,950.00				Civil Rights, Social Action, Advocacy
Interfaith Health Service,1326 South 26th St. Families in Action Omaha, NE 68105-2380	47-0832663	501(C)(3)	25,000.00				Health - General & Rehabilitative
Iowa Lions Foundation,2300 S. Duff Avenue Ames, IA 50010	42-6062682	501(C)(3)	6,000.00				Public, Society Benefit

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Name of organization: Omaha Community Foundation Donor Directed

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(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
Iowa State University Foundation,2505 University Blvd. Ames, IA 50010-8644	42-1143702	501(C)(3)	10,976.00				Educational Institutions
Jesuit Academy,2311 No. 22nd Street Omaha, NE 68110	47-0792128	501(C)(3)	44,880.00				Educational Institutions
Jewish Federation of Omaha,333 S. 132nd Street Omaha, NE 68154	47-0384659	501(C)(3)	6,675.00				Philanthropy, Voluntarism, Grantmaking
Joslyn Art Museum,2200 Dodge Street Omaha, NE 68102-1292	47-0384577	501(C)(3)	1,042,550.00				Arts, Culture, & Humanities
Juvenile Diabetes Research Foundation International,26 Broadway 14th Floor New	23-1907729	501(C)(3)	8,000.00				Medical Research
Juvenile Diabetes Research Foundation,9202 West Dodge Road, Ste 304 JDRF International	23-1907729	501(C)(3)	20,150.00				Disease, Disorders, Medical Disciplines
Kent Bellows Foundation,3303 Leavenworth Street Omaha, NE 68105	56-2647579	501(C)(3)	6,250.00				Arts, Culture, & Humanities
Kicks for a Cure, Inc.,P.O. Box 241603 Omaha, NE 68124	20-8105379	501(C)(3)	9,415.00				Disease, Disorders, Medical Disciplines
King of Kings Lutheran Church,11615 "I" Street Omaha, NE 68137	47-0520429	501(C)(3)	27,492.00				Religion, Spiritual Development
Knights of Ak-Sar-Ben Foundation,8707 West Center Road Suite 101 Omaha, NE 68124	47-0447496	501(C)(3)	51,475.00				Philanthropy, Voluntarism, Grantmaking
Kountze Memorial Lutheran Church,2650 Farnam Street Omaha, NE 68131	47-0379757	501(C)(3)	51,900.00				Religion, Spiritual Development
KVNO/UNO,6001 Dodge St. MS CB200 Omaha, NE 68182-0564	47-0491233	501(C)(3)	5,700.00				Arts, Culture, & Humanities
KVSS - Spirit Catholic Radio,13326 A Street VSS Catholic Communications Omaha, NE 68144	91-1857425	501(C)(3)	15,020.00				Religion, Spiritual Development

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Name of organization: Omaha Community Foundation Donor Directed

Employer Identification Number: 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
Leukemia & Lymphoma Society,12100 W. Center Rd Building 1, Suite 202 Omaha, NE	13-5644916	501(C)(3)	8,500.00				Disease, Disorders, Medical Disciplines
Lifegate Church,15555 West Dodge Road Omaha, NE 68154	23-7088203	501(C)(3)	12,100.00				Religion, Spiritual Development
Love's Jazz & Arts Center,2510 North 24th St. Omaha, NE 68110	04-3752590	501(C)(3)	7,100.00				Arts, Culture, & Humanities
Lutheran Family Services of Nebraska,124 South 24th Street Suite 230 Omaha, NE 68102	23-7267972	501(C)(3)	48,350.00				Religion, Spiritual Development
Macalester College,1600 Grand Ave St. Paul, MN 55105	41-0693962	501(C)(3)	10,350.00				Educational Institutions
Madonna School,6402 North 71st Plaza Omaha, NE 68104-4674	47-0491332	501(C)(3)	6,450.00				Educational Institutions
Make-A-Wish Foundation of Nebraska,11836 Arbor Street Omaha, NE 68144	47-0671096	501(C)(3)	9,150.00				Health - General & Rehabilitative
Malvern Area Betterment Association,61828 315th Street Malvern, IA 51551-0189	26-2177295	501(C)(3)	15,000.00				Recreation, Sports, Leisure, Athletics
Manufacturing Institute,733 10th St., NW Washington, DC 20001	52-1073576	501(C)(3)	10,000.00				International, Foreign Affairs & National Security
Marian High School,7400 Military Avenue Omaha, NE 68134-3351	05-0664529	501(C)(3)	54,650.00				Educational Institutions
Mary Our Queen Church,3535 So. 119th Street Omaha, NE 68144	47-0490634	501(C)(3)	25,100.00				Religion, Spiritual Development
Mayo Clinic,Department of Development 200 First Street SW Rochester, MN 55905	41-6011703	501(C)(3)	5,100.00				Health - General & Rehabilitative
Mercy High School,1501 S. 48th Street Omaha, NE 68106	47-0424786	501(C)(3)	14,500.00				Educational Institutions

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Name of organization Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
Merrymakers Association,12020 Shamrock Plaza Ste 200 Omaha, NE 68154	47-0692363	501(C)(3)	10,100.00				Health - General & Rehabilitative
Metropolitan Area Continuum of Care for the Homeless,6001 Dodge St. CEC 117 MACCH	11-3788955	501(C)(3)	30,000.00				Housing, Shelter
Metropolitan Community College Foundation,P. O. Box 3777 Omaha, NE 68103-0777	47-0596504	501(C)(3)	11,500.00				Educational Institutions
Mid-America Council, Boy Scouts of America,12401 West Maple Road Omaha, NE	47-0376545	501(C)(3)	32,665.00				Youth Development
Mills County Board of Supervisors,418 Sharp Street Glenwood, IA 51534	42-6004708	501(C)(3)	18,100.00				Community Improvement, Capacity Building
Mills County Fair Association,415 Main Street - P O Box 430 Malvern, IA 51551	42-6081291	501(C)(3)	6,000.00				Public Safety, Disaster Preparedness & Relief
Minneapolis College of Art and Design,2501 Stevens Avenue Minneapolis, MN 55404	41-1607453	501(C)(3)	10,000.00				Arts, Culture, & Humanities
Montgomery County Board of Supervisors,P. O. Box 496 Red Oak, IA 51566	42-6005143	501(C)(3)	10,000.00				Community Improvement, Capacity Building
Montgomery County Family YMCA,101 East Cherry Street Red Oak, IA 51566	42-1433436	501(C)(3)	10,000.00				Community Improvement, Capacity Building
MOSAIC,4980 South 118th Street Omaha, NE 68137	11-3669999	501(C)(3)	29,700.00				Human Services
Mount Michael Benedictine School,22520 Mount Michael Road Elkhorn, NE 68022-3400	30-0299031	501(C)(3)	12,740.00				Educational Institutions
Mount Vernon Community Schools,525 Palisades Rd SW Mount Vernon, IA 52314	42-6025675	501(C)(3)	11,151.66				Educational Institutions
Mount View Presbyterian Church,5308 Hartman Avenue Omaha, NE 68104	47-0421455	501(C)(3)	11,500.00				Religion, Spiritual Development

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Name of organization: Omaha Community Foundation Donor Directed

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(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
Music Academy of the West,1070 Fairway Road Santa Barbara, CA 93108-2899	95-1525814	501(C)(3)	52,500.00				Arts, Culture, & Humanities
Music in Catholic Schools,3300 N. 60th St. CSO, Mercy Hall Omaha, NE 68104-3402	47-0618242	501(C)(3)	6,100.00				Educational Institutions
Nature Conservancy,1007 Leavenworth St. Nebraska Field Office Omaha, NE 68102	53-0242652	501(C)(3)	19,780.00				Environmental Quality Protection, Beautification
Navigators,P. O. Box 6000 Colorado Springs, CO 80934-6000	84-6007896	501(C)(3)	12,700.00				Religion, Spiritual Development
Nebraska Advanced Manufacturing Coalition,1299 Farnam St., Suite 530 c/o	20-5544866	501(C)(3)	16,200.00				Human Services
Nebraska Appleseed Center for Law in the Public Interest,941 O Street Suite 920 Lincoln,	47-0798343	501(C)(3)	14,689.00				Civil Rights, Social Action, Advocacy
Nebraska Children and Families Foundation,215 Centennial Mall South Suite 200 Lincoln, NE	91-1829974	501(C)(3)	183,666.00				Human Services
Nebraska Coalition for Lifesaving Cures,900 South 74th Plaza, Suite 301 Nebraskans for	47-083728	501(C)(3)	6,300.00				Science & Technology Research Institutes
Nebraska Cultural Endowment,1004 Farnam Street Plaza Level Omaha, NE 68102	47-0813703	501(C)(3)	22,550.00				Arts, Culture, & Humanities
Nebraska Golf Foundation,6618 South 118th Street Omaha, NE 68137	20-0910737	501(C)(3)	8,600.00				Recreation, Sports, Leisure, Athletics
Nebraska Humane Society,8929 Fort Street Omaha, NE 68134	47-0378997	501(C)(3)	9,850.00				Animal Related
Nebraska Humanities Council,215 Centennial Mall S. Suite 330 Lincoln, NE 68508-1836	23-735977	501(C)(3)	5,030.00				Arts, Culture, & Humanities
Nebraska Medical Center,987421 Nebraska Medical Center Omaha, NE 68198-7421	91-1858433	501(C)(3)	19,759.00				Health - General & Rehabilitative

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Name of organization Omaha Community Foundation Donor Directed

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(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
Nebraska Methodist Hospital Foundation,8401 W. Dodge Road, #225 Omaha, NE 68114	47-0595345	501(C)(3)	19,600.00				Health - General & Rehabilitative
Nebraska Shakespeare Festival,Fine Arts Dept 2500 California Plaza Omaha, NE 68178	47-0699092	501(C)(3)	13,675.00				Arts, Culture, & Humanities
Nebraska Writers Collective,9712 N 34th St. Omaha, NE 68112	20-8109537	501(C)(3)	16,750.00				Arts, Culture, & Humanities
NET Foundation for Television,Nebraskans for Public TV 1800 North 33rd Street Lincoln, NE	23-7122088	501(C)(3)	17,450.00				Arts, Culture, & Humanities
Nishna Productions, Inc.,P. O. Box 70 Shenandoah, IA 51601	42-1025042	501(C)(3)	5,472.00				Human Services
Nishna Valley Family YMCA,1100 Maple Street Atlantic, IA 50022	42-0844143	501(C)(3)	9,869.00				Community Improvement, Capacity Building
Northeast Community College Foundation,PO Box 469 Norfolk, NE 68702	51-0145185	501(C)(3)	50,000.00				Educational Institutions
Northstar Foundation,5076 Ames Ave P.O. Box 4817 Omaha, NE 68104	26-0494022	501(C)(3)	62,600.00				Youth Development
Northwest Hills United Church of Christ,9334 Fort Street Financial Secretary Omaha, NE	47-6027830	501(C)(3)	23,800.00				Religion, Spiritual Development
Omaha Botanical Center Inc. - Lauritzen Gardens,100 Bancroft St. Omaha, NE 68108-	47-0659701	501(C)(3)	565,900.00				Environmental Quality Protection, Beautification
Omaha Children's Museum,500 South 20th Street Omaha, NE 68102	47-0594056	501(C)(3)	29,800.00				Arts, Culture, & Humanities
Omaha Community Broadcasting,5507 N 63 Street 1690AM The One Omaha, NE 68104	47-0732357	501(C)(3)	5,200.00				Civil Rights, Social Action, Advocacy
Omaha Community Playhouse,6915 Cass Street Omaha, NE 68132-2696	47-0399856	501(C)(3)	38,900.00				Arts, Culture, & Humanities

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Name of organization: Omaha Community Foundation Donor Directed

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(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
Omaha Conservatory of Music,3504 S. 108th St. Omaha, NE 68144	47-0834657	501(C)(3)	51,000.00				Arts, Culture, & Humanities
Omaha Economic Development Corporation,2221 N. 24th Street Omaha, NE	47-0597743	501(C)(3)	10,000.00				Public, Society Benefit
Omaha Equestrian Foundation,1004 Farnam St. Suite 400 Omaha, NE 68102	27-3520778	501(C)(3)	10,000.00				Animal Related
Omaha Home for Boys,4343 No. 52nd Street Omaha, NE 68104-9989	47-0376529	501(C)(3)	6,650.00				Human Services
Omaha I-80 Cosmopolitan Club Foundation,2101 S. 38th St Omaha, NE 68105	26-3787629	501(C)(3)	5,210.00				Philanthropy, Voluntarism, Grantmaking
Omaha Multi-Sport Complex,1004 Farnam St., Suite 400 Omaha, NE 68102	45-5587726	501(C)(3)	25,000.00				Recreation, Sports, Leisure, Athletics
Omaha Parks Foundation,11205 Wright Circle Suite 140 Omaha, NE 68144	27-3185565	501(C)(3)	6,200.00				Environmental Quality Protection, Beautification
Omaha Performing Arts Society,1200 Douglas Street Holland Performing Arts Center Omaha,	47-0832480	501(C)(3)	278,050.00				Arts, Culture, & Humanities
Omaha Police Foundation,c/o Vic Gutman & Associates P.O. Box 31134 Omaha, NE 68131-	47-0843276	501(C)(3)	23,850.00				Civil Rights, Social Action, Advocacy
Omaha Press Club Foundation,3702 North 53rd Street P.O. Box 4842 Omaha, NE 68104	47-0659704	501(C)(3)	6,000.00				Public, Society Benefit
Omaha Public Library Foundation,215 South 15th Street Omaha, NE 68102	36-3411575	501(C)(3)	25,250.00				Educational Institutions
Omaha Sports Commission,11235 Davenport St. Suite 106 Omaha, NE 68154	20-0724954	501(C)(3)	40,000.00				Recreation, Sports, Leisure, Athletics
Omaha Street School,3223 No. 45th Street Omaha, NE 68104	47-0811597	501(C)(3)	20,695.00				Educational Institutions

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(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
Omaha Symphony Association,1605 Howard Street Omaha, NE 68102-2705	47-6039304	501(C)(3)	271,915.00				Arts, Culture, & Humanities
Omaha Theater Company/Rose Theater,2001 Farnam Street The Rose Performing Arts	47-0494912	501(C)(3)	60,800.00				Arts, Culture, & Humanities
Omaha Zoo Foundation,3701 So. 10th Street Omaha, NE 68107	36-3297716	501(C)(3)	451,850.00				Animal Related
OneWorld Community Health Centers, Inc.,4920 South 30th St., Suite 103 Omaha, NE	47-0548990	501(C)(3)	5,800.00				Health - General & Rehabilitative
Open Door Mission (Rescue Mission),P.O. Box 8340 2828 North 23rd St. East Omaha, NE	47-0411375	501(C)(3)	32,729.90				Human Services
OpenSky Policy Institute,1201 O St Ste 10 Lincoln, NE 68508	45-3327969	501(C)(3)	8,433.00				Public, Society Benefit
Opera Omaha,1850 Farnam St Omaha, NE 68102	47-6032795	501(C)(3)	56,300.00				Arts, Culture, & Humanities
Page County Board of Supervisors,112 East Main Street Clarinda, IA 51632	42-6004382	501(C)(3)	15,000.00				Community Improvement, Capacity Building
Partnership 4 Kids,1004 Farnam St., # 200 All Our Kids, Inc. Omaha, NE 68102	47-0762798	501(C)(3)	47,958.00				Educational Institutions
Phoenix Academy Day School,1110 N 66th St Omaha, NE 68132	02-0732028	501(C)(3)	34,100.00				Educational Institutions
Planned Parenthood of the Heartland,3105 N. 93rd Street Omaha, NE 68134	42-0727488	501(C)(3)	14,075.00				Health - General & Rehabilitative
Platte Institute for Economic Research Inc.,900 S 74th Plz Ste 400 Omaha, NE 68114	20-8809060	501(C)(3)	10,600.00				Social Science Research Institutes
Poor Clare Sisters of Omaha,Franciscan Monastery of St. Clare 3626 North 65th Avenue	47-0358815	501(C)(3)	32,585.52				Religion, Spiritual Development

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(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
Project Harmony,11949 Q Street Omaha, NE 68137	47-0789054	501(C)(3)	36,850.00				Crime, Legal Related
Province of St. Mary of the Capuchin Order,Capuchin Mission Office 210 West 31st	05-6008676	501(C)(3)	13,500.00				Religion, Spiritual Development
Quality Living, Inc.,6404 No. 70th Plaza Omaha, NE 68104-1075	47-0665946	501(C)(3)	5,250.00				Health - General & Rehabilitative
Red Oak Grand Theatre, Inc.,307 East Reed Street Red Oak, IA 51566	27-3023263	501(C)(3)	20,000.00				Community Improvement, Capacity Building
Rejoice Lutheran Church,2556 S. 138th Street Omaha, NE 68144	47-0426523	501(C)(3)	14,500.00				Religion, Spiritual Development
Rockbrook United Methodist Church,9855 West Center Road Omaha, NE 68124	05-0775932	501(C)(3)	26,715.00				Religion, Spiritual Development
Sacred Heart Church,2207 Wirt Street Omaha, NE 68110	47-0415808	501(C)(3)	11,700.00				Religion, Spiritual Development
Salvation Army,10755 Burt St. Omaha, NE 68114-2065	36-2167910	501(C)(3)	18,100.00				Human Services
Salvation Army,10755 Burt St. Omaha, NE 68114-2065	36-2167910	501(C)(3)	21,000.00				Human Services
Salvation Army,10755 Burt St. Omaha, NE 68114-2065	36-2167910	501(C)(3)	156,237.06				Human Services
Saving Grace Perishable Food Rescue Inc.,4611 S 96th St Ste 112 Omaha, NE 68127	46-1852863	501(C)(3)	10,000.00				Agriculture, Food, Nutrition
Scottsdale Bible Church,7601 East Shea Blvd. Scottsdale, AZ 82260	86-0179808	501(C)(3)	35,000.00				Religion, Spiritual Development
Shelby County Fair Corporation,P. O. Box 528 Harlan, IA 51537	42-0519825	501(C)(3)	7,175.00				Recreation, Sports, Leisure, Athletics

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc I	(h)Purpose of Grant or Assistance
Shelby County Historical Society,1805 Morse Harlan, IA 51537-2042	23-7281908	501(C)(3)	10,000.00				Community Improvement, Capacity Building
Shenandoah Medical Center,300 Pershing Avenue Shenandoah, IA 51601	42-1101835	501(C)(3)	14,000.00				Public Safety, Disaster Preparedness & Relief
Sidney Volunteer Fire & Rescue,P O Box 39 2 Draper Drive Sidney, IA 51652	42-1325728	501(C)(3)	10,000.00				Community Improvement, Capacity Building
Siena/Francis House,P.O. Box 217 Downtown Station Omaha, NE 68101-0217	47-0601005	501(C)(3)	44,700.00				Housing, Shelter
Skutt Catholic High School,3131 So. 156th Street Omaha, NE 68130-1907	47-0753834	501(C)(3)	12,850.00				Religion, Spiritual Development
Society of the Sacred Heart - Provincial House,4120 Forest Park Avenue St. Louis, MO	43-1272049	501(C)(3)	20,500.00				Educational Institutions
Southwest Iowa Nature Trails, Inc.,304 West Sheridan Avenue Shenandoah, IA 51601-1821	42-1325845	501(C)(3)	15,000.00				Community Improvement, Capacity Building
St. Andrews Episcopal Church,925 South 84th Street Omaha, NE 68114-5207	47-0466152	501(C)(3)	8,950.00				Religion, Spiritual Development
St. Augustine Indian Mission,P. O. Box GG 1 Mission Road South Winnebago, NE 68071-	47-0398898	501(C)(3)	133,200.00				Religion, Spiritual Development
St. Cecilia's Cathedral Corporation,701 North 40th Street Omaha, NE 68131	47-0376611	501(C)(3)	9,980.00				Religion, Spiritual Development
St. Columbkille Catholic Church,200 East 6th Street Papillion, NE 68046	47-0469648	501(C)(3)	13,900.00				Religion, Spiritual Development
St. Gerald Catholic Church,7859 Lakeview Street Ralston, NE 68127	47-0446840	501(C)(3)	26,600.00				Religion, Spiritual Development
St. James Catholic Church,9025 Larimore Avenue Omaha, NE 68134	47-0491004	501(C)(3)	10,800.00				Religion, Spiritual Development

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation Donor Directed

Employer Identification Number: 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
St. John Catholic Church,2500 California Street Creighton University Omaha, NE 68178	47-0376537	501(C)(3)	8,400.00				Religion, Spiritual Development
St. John the Evangelist Catholic Church,1001 Encinitas Blvd. Encinitas, CA 92024	27-3974051	501(C)(3)	10,000.00				Religion, Spiritual Development
St. John the Evangelist Catholic Church,307 East Meigs P.O. Box 587 Valley, NE 68064	47-0379837	501(C)(3)	6,000.00				Religion, Spiritual Development
St. John Vianney Church,5801 Oak Hills Drive Omaha, NE 68137	47-0557229	501(C)(3)	9,000.00				Religion, Spiritual Development
St. Leo's Catholic Church,1920 No. 102nd Street Omaha, NE 68114	47-0609520	501(C)(3)	17,600.00				Religion, Spiritual Development
St. Margaret Mary Church,6116 Dodge Street Bookkeeping Dept. Omaha, NE 68132-2114	47-0429417	501(C)(3)	65,800.00				Religion, Spiritual Development
St. Mary Magdalene Church,109 South 19th Street Omaha, NE 68102	47-0413712	501(C)(3)	5,200.00				Religion, Spiritual Development
St. Mary's Church of Bellevue,811 West 23rd Avenue Bellevue, NE 68005	47-0380461	501(C)(3)	50,572.92				Religion, Spiritual Development
St. Patrick's Parish,P. O. Box 10 20500 West Maple Road Elkhorn, NE 68022	47-0379377	501(C)(3)	8,650.00				Religion, Spiritual Development
St. Pius X/St. Leo School,6905 Blondo Street Omaha, NE 68104	47-0424937	501(C)(3)	13,040.00				Educational Institutions
St. Robert Bellarmine Church,11802 Pacific Street Omaha, NE 68154	05-0782718	501(C)(3)	28,260.00				Religion, Spiritual Development
St. Stephen the Martyr Catholic Church,16701 "S" Street Omaha, NE 68135	47-0730264	501(C)(3)	19,600.00				Religion, Spiritual Development
St. Thomas Academy,955 Lake Drive Development Office St. Paul, MN 55120	41-6045110	501(C)(3)	50,000.00				Religion, Spiritual Development

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization: Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
St. Thomas More Church,4804 Grover Street Omaha, NE 68106	47-0460572	501(C)(3)	10,000.00				Religion, Spiritual Development
St. Timothy's Lutheran Church,510 North 93rd Street Omaha, NE 68114	47-6045615	501(C)(3)	13,600.00				Religion, Spiritual Development
St. Vincent de Paul Catholic Church,14330 Eagle Run Drive Omaha, NE 68164	47-0748573	501(C)(3)	99,183.00				Religion, Spiritual Development
St. Wenceslaus Catholic Church and School,15353 Pacific Street Omaha, NE 68154	47-0647888	501(C)(3)	50,200.00				Religion, Spiritual Development
Stephen Center,2723 Q Street Omaha, NE 68107	36-3363994	501(C)(3)	18,175.00				Housing, Shelter
Strategic Air & Space Museum,28210 West Park Highway SAC Museum Ashland, NE 68003	47-0619646	501(C)(3)	69,100.00				Arts, Culture, & Humanities
Suburban Rotary Charitable Foundation,4089 S. 84th St. PMB 317 Omaha, NE 68127	36-3544327	501(C)(3)	9,400.00				Community Improvement, Capacity Building
Teammates Mentoring Program,6801 O Street Lincoln, NE 68510	47-0840990	501(C)(3)	31,100.00				Crime, Legal Related
Temple Israel,13111 Sterling Ridge Dr Omaha, NE 68144	47-0376590	501(C)(3)	51,016.41				Religion, Spiritual Development
Thanksgiving Lutheran Church,3702 370th Plaza Bellevue, NE 68123-1206	47-0664528	501(C)(3)	10,500.00				Religion, Spiritual Development
Together, Inc.,812 S 24th St. Omaha, NE 68108	47-0589290	501(C)(3)	6,700.00				Human Services
Trinity Lutheran Church,c/o Church Treasurer 330 West Halleck St. Papillion, NE 68046	47-0546608	501(C)(3)	7,500.00				Religion, Spiritual Development
Truman State University Foundation,McClain Hall 100 100 E. Normal Kirksville, MO 63501-	43-1381504	501(C)(3)	12,500.00				Educational Institutions

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization: Omaha Community Foundation Donor Directed

Employer Identification Number: 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
Tulane University,Tulane Medical School 6823 Saint Charles Avenue New Orleans, LA 70118	72-0423889	501(C)(3)	29,000.00				Health - General & Rehabilitative
Underwood Hills Presbyterian Church,851 North 74th Street Omaha, NE 68114	47-0649321	501(C)(3)	27,000.00				Religion, Spiritual Development
Union for Contemporary Art,2417 Brudette St. Omaha, NE 68111	45-2274312	501(C)(3)	14,200.00				Arts, Culture, & Humanities
Unitarian Church of Lincoln,6300 A St. Lincoln, NE 68510	47-0470815	501(C)(3)	13,150.00				Religion, Spiritual Development
United Faith Church,P.O. Box 115 Sidney, IA 51652	46-0859928	501(C)(3)	11,550.00				Religion, Spiritual Development
United Way of the Desert,P.O. Box 1990 Palm Springs, CA 92263-1990	95-2783993	501(C)(3)	25,000.00				Philanthropy, Voluntarism, Grantmaking
United Way of the Midlands,1805 Harney Street Finance Department Omaha, NE 68102	47-0376605	501(C)(3)	247,788.10				Philanthropy, Voluntarism, Grantmaking
University of Iowa Foundation,P. O. Box 4550 Iowa City, IA 52244-4550	42-0796760	501(C)(3)	5,100.00				Health - General & Rehabilitative
University of Nebraska Foundation,2285 S. 67th Street, Ste 200 Omaha, NE 68106	47-0379839	501(C)(3)	5,350.00				Educational Institutions
University of Nebraska Foundation,2285 S. 67th Street, Ste 200 Omaha, NE 68106	47-0379839	501(C)(3)	11,250.00				Educational Institutions
University of Nebraska Foundation,2285 S. 67th Street, Ste 200 Omaha, NE 68106	47-0379839	501(C)(3)	26,000.00				Educational Institutions
University of Nebraska Foundation,2285 S. 67th Street, Ste 200 Omaha, NE 68106	47-0379839	501(C)(3)	54,750.00				Educational Institutions
University of Nebraska Foundation,2285 S. 67th Street, Ste 200 Omaha, NE 68106	47-0379839	501(C)(3)	286,900.00				Educational Institutions

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
University of Nebraska Foundation,2285 S. 67th Street, Ste 200 Omaha, NE 68106	47-0379839	501(C)(3)	2,089,008.00				Educational Institutions
University of Nebraska Foundation,2285 S. 67th Street, Ste 200 Omaha, NE 68106	47-0379839	501(C)(3)	7,625,000.00				Educational Institutions
University of Nebraska Foundation,P. O. Box 82555 Lincoln, NE 68501-2555	47-0379839	501(C)(3)	9,000.00				Educational Institutions
University of Nebraska Foundation,P. O. Box 82555 Lincoln, NE 68501-2555	47-0379839	501(C)(3)	14,150.00				Educational Institutions
University of Nebraska Foundation,P. O. Box 82555 Lincoln, NE 68501-2555	47-0379839	501(C)(3)	15,000.00				Educational Institutions
University of Nebraska Foundation,P. O. Box 82555 Lincoln, NE 68501-2555	47-0379839	501(C)(3)	25,000.00				Educational Institutions
University of Nebraska Foundation,P. O. Box 82555 Lincoln, NE 68501-2555	47-0379839	501(C)(3)	26,000.00				Educational Institutions
University of Nebraska Foundation,P. O. Box 82555 Lincoln, NE 68501-2555	47-0379839	501(C)(3)	50,000.00				Educational Institutions
University of Nebraska Foundation,P. O. Box 82555 Lincoln, NE 68501-2555	47-0379839	501(C)(3)	8,725,000.00				Educational Institutions
University of Nebraska Medical Center,986810 Nebraska Med Center Omaha, NE 68198	91-1858433	501(C)(3)	6,291.22				Health - General & Rehabilitative
University of Notre Dame,P. O. Box 519 1100 Grace Hall Notre Dame, IN 46556	35-0868188	501(C)(3)	186,000.00				Educational Institutions
Valley of the Sun United Way,1515 East Osborn Road Phoenix, AZ 85014-5386	86-0104419	501(C)(3)	15,000.00				Community Improvement, Capacity Building
Visiting Nurse Health Services,12565 West Center Rd, Ste 100 Visiting Nurse Assoc.	47-0690286	501(C)(3)	15,650.00				Health - General & Rehabilitative

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation Donor Directed

Employer Identification Number 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuati	(g)Desc	(h)Purpose of Grant or Assistance
Water's Edge United Methodist Church,18035 Oak St. Omaha, NE 68130	45-3789126	501(C)(3)	22,700.00				Religion, Spiritual Development
Wayne State College Foundation,1111 Main Street Wayne, NE 68787	47-6032870	501(C)(3)	10,400.00				Educational Institutions
West Hills Presbyterian Church,3015 So. 82nd Avenue Omaha, NE 68124	47-6036265	501(C)(3)	26,176.00				Religion, Spiritual Development
West Point Auditorium Foundation Inc.,141 E. Grove St PO Box 217 West Point, NE 68788	20-2365139	501(C)(3)	10,000.00				Educational Institutions
Westside Community Schools Foundation,909 S. 76th St. Omaha, NE 68114	47-0560469	501(C)(3)	60,210.00				Educational Institutions
Willa Cather Pioneer Memorial & Educational Foundation,413 North Webster Street Red	47-0485401	501(C)(3)	75,350.00				Human Services
Women's Center for Advancement,222 South 29th Street WCA Omaha, NE 68131	27-3205476	501(C)(3)	26,800.00				Human Services
Woodbine Community Foundation,PO Box 11 Woodbine, IA 51579	31-1575176	501(C)(3)	16,500.00				Public Safety, Disaster Preparedness & Relief
World-Herald Goodfellows Charities, Inc.,1314 Douglas Street Suite 125 Omaha, NE 68102	47-6000559	501(C)(3)	13,440.00				Human Services
YFC, Inc.,1124 N. Happy Hollow Blvd Maha Music Festival Omaha, NE 68132	06-1839109	501(C)(3)	10,000.00				Community Improvement, Capacity Building
YMCA of Omaha/Council Bluffs,430 S 20th St Omaha, NE 68102	47-0376586	501(C)(3)	15,350.00				Human Services
Young Inventors Association of America,6339 Bufallo Speedway Houston, TX 77005	20-0869833	501(C)(3)	10,000.00				Educational Institutions
Young Life,P. O. Box 520 420 N Cascade Ave Colorado Springs, CO 80903	84-0385934	501(C)(3)	39,250.00				Youth Development

Schedule I -
(Form 990)

Continuation Sheet for Schedule I (Form 990)

Name of organization: Omaha Community Foundation Donor Directed

Employer Identification Number: 36-3738990

(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValuat	(g)Desc	(h)Purpose of Grant or Assistance
Youth Emergency Services,2679 Farnam Street, Ste 205 Omaha, NE 68131	47-0586898	501(C)(3)	17,700.00				Human Services

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► **Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.**
► **Attach to Form 990.** ► **See separate instructions.**
► **Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990.***

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization: Omaha Community Foundation

Employer identification number: 36-3789990

Part I Questions Regarding Compensation

		Yes	No
1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
☐ Travel for companions	☐ Payments for business use of personal residence		
☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
☐ Discretionary spending account	☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	**1 b**		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
☐ Compensation committee	☐ Written employment contract		
☐ Independent compensation consultant	☐ Compensation survey or study		
☐ Form 990 of other organizations	☐ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a Receive a severance payment or change-of-control payment?	**4 a**		X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4 b**		X
c Participate in, or receive payment from, an equity-based compensation arrangement?	**4 c**		X
If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a The organization?	**5 a**		X
b Any related organization?	**5 b**		X
If 'Yes' to line 5a or 5b, describe in Part III			
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a The organization?	**6 a**		X
b Any related organization?	**6 b**		X
If 'Yes' to line 6a or 6b, describe in Part III			
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III	**7**		X
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If 'Yes,' describe in Part III	**8**		X
9 If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

	(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
			(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
1	Sara Boyd President & CEO	(i) (ii)	0. 192,437.	0. 38,295.	0. 108.	0. 8,384.	0. 254,116.	0. 493,340.	0. 0.
2	Mike Leighton CEO	(i) (ii)	0. 106,191.	0. 49,214.	0. 762.	0. 5,040.	0. 7,745.	0. 168,952.	0. 0.
3		(i) (ii)							
4		(i) (ii)							
5		(i) (ii)							
6		(i) (ii)							
7		(i) (ii)							
8		(i) (ii)							
9		(i) (ii)							
10		(i) (ii)							
11		(i) (ii)							
12		(i) (ii)							
13		(i) (ii)							
14		(i) (ii)							
15		(i) (ii)							
16		(i) (ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► **Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.**
► **Attach to Form 990.**
► **Information about Schedule M (Form 990) and its instructions is at *www.irs.gov/form990.***

OMB No 1545 0047

2013

Open To Public Inspection

Name of the organization: Omaha Community Foundation Donor Directed Depository

Employer identification number: 36-3789990

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art — Works of art				
2	Art — Historical treasures				
3	Art — Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities — Publicly traded	X	206	41,503,685.	Fair Market Value
10	Securities — Closely held stock	X	6	1,620,853.	Fair Market Value
11	Securities — Partnership, LLC, or trust interests				
12	Securities — Miscellaneous				
13	Qualified conservation contribution — Historic structures				
14	Qualified conservation contribution — Other				
15	Real estate — Residential				
16	Real estate — Commercial				
17	Real estate — Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► (_____)				
26	Other ► (_____)				
27	Other ► (_____)				
28	Other ► (_____)				

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	2	
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		X
b	If 'Yes,' describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If 'Yes,' describe in Part II			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990-EZ	OMB No 1545 0047
Department of the Treasury Internal Revenue Service	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.*	2013 Open to Public Inspection

Name of the organization	Employer identification number
Omaha Community Foundation Donor Directed Depository	36-3789990

Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

Omaha Community Foundation can elect directors.

Form 990, Part VI, Line 11b - Form 990 Review Process

The final return is e-mailed to the board of directors for their review. Each director reviews the form and changes are made accordingly.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

This policy is covered under the related organization.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, Top Management

This policy is covered under the related organization.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

This policy is covered under the related organization.

Form 990, Part VI, Line 18 - Explanation of Other Means Forms Available For Public Inspection

All documents are kept on file at the office of The Omaha Community Foundation at 302 S 36th Street, Suite 100, Omaha, NE.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No documents available to the public.

Form 990, Part XI, Line 9
Other Changes In Net Assets Or Fund Balances

Transfers	$ -563,415.
Total	$ -563,415.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► **Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
► **Attach to Form 990.** ► **See separate instructions.**
► **Information about Schedule R (Form 990) and its instructions is at *www.irs.gov/form990.***

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

Omaha Community Foundation Donor Directed Depository

Employer identification number

36-3789990

Part I Identification of Disregarded Entities Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity? Yes	(g) Sec 512(b)(13) controlled entity? No
(1) Omaha Community Foundation 302 S 36th Street, Suite 100 Omaha, NE 68131 47-0645958	Granting	NE	3	8	n/a		X
(2)							
(3)							
(4)							

Part III **Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1)												
(2)												
(3)												

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity? Yes	(i) No
(1)									
(2)									
(3)									

Part V Transactions With Related Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

			Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b	X	
c	Gift, grant, or capital contribution from related organization(s)	1c	X	
d	Loans or loan guarantees to or for related organization(s)	1d		X
e	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f		X
g	Sale of assets to related organization(s)	1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l	X	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o	Sharing of paid employees with related organization(s)	1o		X
p	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q		X
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		X

2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Omaha Community Foundation	b	891,671.	
(2) Omaha Community Foundation	c	52,709.	
(3) Omaha Community Foundation	l	199,130.	
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).