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

Department of the Treasury Internal Revenue Service

**BAA** For Paperwork Reduction Act Notice, see instructions.

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For cal	lendar year 2013, or tax year beginning	, 2013	, and ending	,	<del></del>		
	YTEL FOUNDATION			A Employer identification nu 36-4645789	mber		
	6 BURT CIR NA, NE 68114		B Telephone number (see the instructions) (402) 502-9258				
G Che	eck all that apply.   Initial return	Initial return of a form	nor public charity	C If exemption application is	pending, check here		
G OII	Final return	Amended return		D 1 Foreign organizations, che	ck here .		
	Address change	Name change		2 Foreign organizations mee	ting the 85% test, check		
H C	Check type of organization. X Section 501 Section 4947(a)(1) nonexempt charitable to	(c)(3) exempt private f	oundation private foundation	here and attach computati	on ′ ►∐		
	<del></del>	ounting method: XC		E If private foundation status under section 507(b)(1)(A			
(1		Other (specify)	asii []Accidai	F If the foundation is in a 60	)-month termination		
<b>▶</b> \$		column (d) must be or	n cash basis.)	under section 507(b)(1)(B	), check here . P		
Part	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable		
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)	expenses per books	income	income	purposes (cash basis only)		
	(see instructions) )  Contributions, gifts, grants, etc. received (att sch)	76,044.			Busis orny)		
	2 Ck If the foundn is not reg to att Sch B	76,044.	•		-		
	3 Interest on savings and temporary cash investments						
	4 Dividends and interest from securities	30,266.	30,26	6. 30,266.			
	5 a Gross rents	,			-		
Ŗ	or (loss).  6 a Net gain/(loss) from sale of assets not on line 10  b Gross sales price for all	11,875.	<u> </u>				
۲ ک	assets on line 6a  Capital gain net income (from Part IV, line 2).	± .	11,87	ŝ ,			
E N	8 Net short-term capital gain		11,07	0.			
U E	9 Income modifications				1 ,		
	allowances. h Less Cost of	,					
	goods sold		*				
	11 Other income (attach schedule)		<del></del>				
	12 Total. Add lines 1 through 11 .	118,185.	42,14	1. 30,266.			
	13 Compensation of officers, directors, trustees, etc .	85,008.		50,200.	85,008.		
	14 Other employee salaries and wages 15 Pension plans, employee benefits	91,663.			91,663.		
A D	16a Legal fees (attach schedule) SEE ST 1	131.			131.		
M	b Accounting fees (attach sch) SEE ST 2	1,750.			1,750.		
₹3 ×	c Other prof fees (attach sch) SEE ST 3	5,868.	INTER	NAL RELEVED	5,868.		
CEJ T	18 Taxes (attach scheduleXsee instrs) SEE STM 4	13,104.	OB/SE CO	NAL REVENUE SERVICE	13,104.		
A A	19 Depreciation (attach sch) and depletion SEE STMT 5	4,368.	F	NAL REVENUE SERVICE LLECTION MIDWEST ARE	Δ		
Z V E	20 Occupancy 21 Travel, conferences, and meetings	13,100.		EB 0 5 2015	13,100.		
¥ E	22 Printing and publications						
WED &	23 Other expenses (attach schedule) SEE STATEMENT 6	97,298.	'	OMAHA, NE	97,298.		
Z S	24 Total operating and administrative		·····	<del>-  </del>			
SCANNED #AAR21-0 2005	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid	312,290. 2,520.			307, 922. 2, 520.		
S	26 Total expenses and disbursements. Add lines 24 and 25		·	<del></del>			
	27 Subtract line 26 from line 12:	314,810.		0. 0.	310,442.		
	a Excess of revenue over expenses and disbursements	-196,625.					
	b Net investment income (if negative, enter -0-) .		42,14				
RAA F	C Adjusted net income (if negative, enter -0-) or Paperwork Reduction Act Notice, see inst	tructions.	1	30,266. EEA0504L 10/18/13	Form <b>990-PF</b> (2013)		

4

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Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

601,314.

601,314.

4

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6

· ai		-055e5 IOF TAX OILIIIVESUMEN					
	(a) List and describe 2-story brick warehous	e the kınd(s) of property sold (e.g , se, or common stock, 200 shares N	real estate, ILC Company)	(b) How acc P — Purch D — Dona	ase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	62 CFLX			P		VARIOUS	4/08/13
	P 36 CWALT		·	P		VARIOUS	11/19/13
	494 CWHL			P		VARIOUS	11/22/13
	217 GMACM		· .	P		6/27/13	10/04/13
	80 WMALT			P		VARIOUS	10/03/13
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa			(h) Gain or (e) plus (f) m	(loss)
	60,328.		5	0,865.			9,463.
t				0,473.			2,198.
-				5,167.			-280.
C				6,157.			-4,164:
e				1,230.			4,658.
	Complete only for assets show	ing gain in column (h) and owned	by the foundation on 12/31.	/69		(I) Gains (Colu	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a			ain minús column (k an -0-) or Losses (fr	), but not less
a							9,463.
	<u> </u>						2,198.
							-280.
					_		-4,164.
e	· · · · · · · · · · · · · · · · · · ·						4,658.
2	Capital gain net income or (ne	t capital loss)   If gain, also   If (loss), er	o enter in Part I, line 7 hter -0- in Part I, line 7	-	2		11 075
3	Net short-term capital gain or	(loss) as defined in sections 1222(		}			11,875.
•		•					
	If gain, also enter in Part I, lini in Part I, line &	e 8, column (c) (see instructions).	If (loss), enter -0-	-	3		-4,164.
Par		Section 4940(e) for Reduced	d Tax on Net Investme	nt Incom	-		4,104.
Was If 'Ye	s,' the foundation does not qua	ction 4942 tax on the distributable lifty under section 4940(e) Do not	complete this part	·		Yes	∏ No⁻
_1_		in each column for each year, see	the instructions before mak	ing any er	tries.		<del></del>
	( <b>a)</b> Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:	sets	(colu	<b>(d)</b> Distribution imn (b) divided l	
	2012						
	2011						
	2010						
	2009						
	2008						
2	Total of line 1, column (d)		-		2		
3	Average distribution ratio for the number of years the foundation	ne 5-year base period— divide the to has been in existence if less than	otal on line 2 by 5, or by th	e [	3		
4	Enter the net value of nonchar	itable-use assets for 2013 from Pa	rt X, line 5	Ī	4		
_				-	_		
5	Multiply line 4 by line 3	!			5		
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)		-	6		
7	Add lines 5 and 6		-	<u> </u>	7		
8	Enter qualifying distributions fr	om Part XII, line 4		Į	8		
	If line 8 is equal to or greater the Part VI instructions.	han line 7, check the box in Part V	/I, line 1b, and complete the	at part usir	ng a	1% tax rate. See	e the

	n <b>990-PF</b> (2013) STORYTEL FOUNDATION 36-4645789		F	Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	15)		
1	a Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)			
	b Domestic foundations that meet the section 4940(e) requirements in Part V,			<u>843.</u>
	check here. ► and enter 1% of Part I, line 27b	•		
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	*		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
	foundations only. Others enter -0-)			0.
3	Add lines 1 and 2 .			843.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			343.
6	Credits/Payments.			
	a 2013 estimated tax pmts and 2012 overpayment credited to 2013 . 6 a			
1	Exempt foreign organizations — tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6 c	,		
1	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here X if Form 2220 is attached.			14.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		{	357.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	···		
11	Enter the amount of line 10 to be: Credited to 2014 estimated tax . Page 11			
Pa	↑ VIJ-A Statements Regarding Activities			
1	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	Yes	No X
ı	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	7.		^
		1		v
	Did the foundation file <b>Form 1120-POL</b> for this year? .  Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	1 c		X
	(1) On the foundation . ►\$ 0. (2) On foundation managers ►\$ 0.			
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers . • \$0.		-	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If 'Yes,' attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		x
4 :	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		Х
1	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If 'Yes,' attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or	}		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV .	7	X	
	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	NE			
	o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation.	8 ь	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calcular year 2013 or the tayable year beginning in 2013 (see instructions for Part XIV).	0		v
10	for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If 'Yes,' complete Part XIV  Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	9		X
_	and addresses	10		ΙX

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	m 990-PF (2013) STORYTEL FOUNDATION	<u> 3</u> 6-	464578	9	F	Page !
ŗ	art VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		х
12	2 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified perso advisory privileges? If 'Yes,' attach statement (see instructions)	n had	-	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address ► N/A	applicat	tion?	13	Х	
14			74027			
1~			<u>(402)</u>	_502	<u>-925</u>	<u> </u>
3.5		681	54	N/A		
13	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here .	. t .	1	IN/ E		` <u>Ц</u> _
	and enter the amount of tax-exempt interest received or accrued during the year	• [	15			N/A
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority or bank, securities, or other financial account in a foreign country?	/er a ·		16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name of the foreign country ►	<b></b>				
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<del></del>	L	-	
- 4	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1	a During the year did the foundation (either directly or indirectly).			-		· · · ·
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	XNo	, ,		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo			- ,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No		^	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			-
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	XNo		,	,
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes	XNo	- F	-	-
	b If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?			1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	•			-	
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013?			1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
	a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013?	Yes	X No			,
	If 'Yes,' list the years ► 20 _ , 20 _ , 20	_		-		
	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a) all years listed, answer 'No' and attach statement — see instructions.)			2 b	NT	/3
	·		•	2 10	- V -	A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he 20 , 20 , 20	re				
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
	b If 'Yes,' did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013)			3.6	N	/ N

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 $4\,a$  Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

**b** Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?

Form 990-PF (2013) STORYTEL FOUNDATION		4300	36-46	45789	Page
Part VII_B Statements Regarding Activit		n 4/20 May Be Red	juired (continued)	la mare al	·····
5 a During the year did the foundation pay or incu	-				1
(1) Carry on propaganda, or otherwise attemption	_	, ,,	Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	Yes X	No	-		
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	. Yes X	No	
(4) Provide a grant to an organization other to in section 509(a)(1), (2), or (3), or section	han a charitable, etc, on 1 4940(d)(2)? (see instri	rganization described uctions)	Yes X	No	*.
(5) Provide for any purpose other than religio educational purposes, or for the prevention	ous, charitable, scientific on of cruelty to children	c, literary, or or animals?	Yes X	] No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a a current notice regard	qualify under the excep ding disaster assistance	otions e	5 b	N/A
Organizations relying on a current notice rega	ırdıng dısaster assıstanı	ce check here	. •		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant? .		N/A. Yes	No	
If 'Yes,' attach the statement required by Reg	ulations section 53.494	5-5(d).			
6 a Did the foundation, during the year, receive at on a personal benefit contract?.			. Yes X	]No	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contract?	6 b	X
7a At any time during the tax year, was the found	dation a party to a prob	ihited tay shelter transs	action? Yes X	No	
<b>b</b> If 'Yes,' did the foundation receive any proceed				N/A 7b	^ / ·
Part VIII Information About Officers, D					
and Contractors					
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see ins	tructions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other all	account, owances
DON E CARNEY	PRESIDENT	75,900.	0.		9,108
12520 SHAMROCK RD	20.00				_
OMAHA, NE 68154		- -			
THOMAS R BROWN	SECRETARY	0.	0.	]	0
2027 DODGE_ST,_STE_501 OMAHA, NE 68102	1.00				
CHRISTOPHER J CARNEY	DIRECTOR	0.	0.		0
500 W MADISON, STE 350	1.00			}	
CHICAGO, IL 60661				<u></u>	·
		<u></u>		<u> </u>	
2 Compensation of five highest-paid employees (of					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other all	account, owances
NONE					
		ı			
		'	'		
			i		
		'			
				<del> </del>	
Total number of other employees paid over \$50,000	<u>                                     </u>			<del></del>	0
BAA	TEFA0306I 0	7/10/13	_ <del></del> _	Form 990-F	

Part-VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	<del> </del>
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	-
4	<del></del>
Part X-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
N/A	
2	
All other program-related investments. See instructions	
·	
Total. Add lines 1 through 3	0.
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Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) .

Adjusted qualifying distributions. Subtract line 5 from line 4

b Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see instructions)

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310,442

310,442.

3 a

3 b

4

5

6

Par	Undistributed Income (see instr	uctions)	N/A		
		<b>(a)</b> Corpus	(b) Years prior to 2012	<b>(c)</b> 2012	<b>(d)</b> 2013
1	Distributable amount for 2013 from Part XI, line 7	-			
	Undistributed income, if any, as of the end of 2013: Enter amount for 2012 only			-	
	Total for prior years: 20, 20, 20 Excess distributions carryover, if any, to 2013.				<u> </u>
ā	From 2008  From 2009		,		
c	From 2010  From 2011	** -	,		
-	From 2012.  Total of lines 3a through e	* *			. ,
4	Qualifying distributions for 2013 from Part XII, line 4 * \$	-	* * * * * * * * * * * * * * * * * * * *		
	Applied to 2012, but not more than line 2a		`	w *	
	Applied to undistributed income of prior years (Election required — see instructions)			, / - ,	
	: Treated as distributions out of corpus (Election required — see instructions) Applied to 2013 distributable amount			, , , ,	
	Remaining amount distributed out of corpus			,	
5	Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))			2	
6	Enter the net total of each column as indicated below:  Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
	Prior years' undistributed income Subtract line 4b from line 2b				
c	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
c	Subtract line 6c from line 6b Taxable amount – see instructions.				
e	Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount — see instructions		,		
f	Undistributed income for 2013 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014	, .		• •	
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				-
8	Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
_	Excess from 2009 Excess from 2010				-
_	Excess from 2011.		,		
C	Excess from 2012				
e	Excess from 2013	•		-	

Part*XIV*   Private Operating Foundation	<del> </del>		<del></del>	<del></del>			
1 a If the foundation has received a ruling or determined is effective for 2013, enter the date of the	rmination letter that it ruling	is a private operatin	ng foundation, and th	e ruling			
b Check box to indicate whether the foundati	on is a private oper	atıng foundation de	escribed in section	X 4942(j)(3) or	4942(j)(5)		
2a Enter the lesser of the adjusted net Tax year Prior 3 years							
income from Part I or the minimum investment return from Part X for	(a) 2013	<b>(b)</b> 2012	(c) 2011	<b>(d)</b> 2010	(e) Total		
each year listed	0.				0.		
<b>b</b> 85% of line 2a.					0.		
c Qualifying distributions from Part XII, line 4 for each year listed	310,442.	175,250.	201,665.	196,412.	883,769.		
d Amounts included in line 2c not used directly for active conduct of exempt activities					0.		
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.	310,442.	175,250.	201,665.	196,412.	883,769.		
3 Complete 3a, b, or c for the alternative test relied upon.							
a 'Assets' alternative test — enter.	Í						
(1) Value of all assets							
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)							
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed							
c 'Support' alternative test — enter							
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section							
512(a)(5)), or royalties)					0.		
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).		105,080.	109,375.	141,086.	355,541.		
(3) Largest amount of support from							
an exempt organization					0.		
(4) Gross investment income . Part-XV- Supplementary Information (	Camaniata Abia a			¢5 000	0.		
Part XV   Supplementary Information ( assets at any time during the	Complete this p	part only if the i	oundation had	35,000 or more	ın		
1 Information Regarding Foundation Manag	<del></del>						
A List any managers of the foundation who have close of any tax year (but only if they have	contributed more tha	n 2% of the total cor nan \$5,000) (See s	ntributions received b section 507(d)(2).)	y the foundation befor	re the		
NONE							
				·····			
b List any managers of the foundation who own a partnership or other entity) of which the f NONE	10% or more of the soundation has a 10°	tock of a corporation % or greater interes	(or an equally large st	portion of the owners	hip of		
2 Information Regarding Contribution, Gran Check here ►   X  if the foundation only make	es contributions to pr	eselected charitable	organizations and de				
requests for funds. If the foundation makes complete items 2a, b, c, and d	gifts, grants, etc (s	ee instructions) to	ındıvıduals or orgar	izations under othei	conditions,		
a The name, address, and telephone number or	e-mail of the person	to whom applications	s should be addresse		<del></del>		
	o man ar are person	or more appropriations		_			
b The form in which applications should be submitted and information and materials they should include							
c Any submission deadlines:							
d Any restrictions or limitations on awards, si	uch as by geograph	ıcal areas, charıtab	le fields, kinds of in	stitutions, or other f	actors		

Form 990-PF (2013) STORYTEL FOUNDATION

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	Contribution	
a Paid during the year RELEVANT RADIO 1496 BELLEVUE ST, STE 202 GREEN BAY, WI 54311	NONE	CHARITY	DONATION	1,000.
FRANCISCAN BROS OF ST ELIZABETH 55 ORCUTT MOUNTAIN RD BUCKSPORT, ME 04416	NONE	CHARITY	DONATION	20.
GENE & PEGGY HALPIN 21300 QUAIL SPRINGS RD TEHACHAPI, CA 93561	NONE	N/A	ASSISTANCE	500.
MICHAEL & ANNEMARIE BURTON 9229 FOWLER CIRCLE OMAHA, NE 68134	NONE	n/A	ASSISTANCE	1,000.
			-	
Total			. ► 3a	2,520.
<b>b</b> Approved for future payment				
Total			► 3b	

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

Enter gross amounts unless otherwise indicated	Unrelated	l business income	Excluded by	section 512, 513, or 514	(e)
•	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income
1 Program service revenue:	Code		code		(See instructions.)
a	ļ	<del></del>			<del></del>
b	<del> </del>	<del></del>			
<u></u>	<del> </del>				
de	<del> </del>		<del>-ii-</del> -	_ <del></del>	
	<del> </del>				
g Fees and contracts from government agencies	<del> </del>		++-		
2 Membership dues and assessments	<del></del>	- <del></del>	<del>                                     </del>		
3 Interest on savings and temporary cash investments	ļ <del>-</del>	<del></del>	++-	<del></del>	
4 Dividends and interest from securities			14	30,266.	· · · ·
5 Net rental income or (loss) from real estate.	<del> </del>		+ + - + - + - + - + - + - + - + - + - +	30,200.	
a Debt-financed property	<del> </del>		<del> </del>		
<b>b</b> Not debt-financed property			<del></del>		
6 Net rental income or (loss) from personal property			- <del>  </del>		
7 Other investment income		<del></del>	1		
8 Gain or (loss) from sales of assets other than inventory					11,875.
9 Net income or (loss) from special events		<del></del>	1 - 1		
10 Gross profit or (loss) from sales of inventory.					
11 Other revenue:					
a					
b					
c					- <del></del>
d	<b> </b>				
e	ļ				
12 Subtotal Add columns (b), (d), and (e)	"感染"。		300 6	30,266.	11,875.
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculati				13 _	42,141.
Part XVI-B Relationship of Activities to the		nment of Exemp	t Purposes	<del></del>	
Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	ncome is repo t purposes (ot	rted in column (e) o her than by providing	of Part XVI-A	contributed importar uch purposes) (See	ntly to the instructions )
N/A					
					- <del></del>
		<del></del>			
					·
	<del></del>	<del></del>			
			<del> </del>		
		·· <del>······</del>			
					<del></del>
	<del></del>	<del></del>			
		·			<del></del>
		<del></del>			
				<del></del>	
		-	<del></del>	<del></del>	

# Form 990-PF (2013) STORYTEL FOUNDATION 36-4645789 [PartivXVII] Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

•														m . 139	Yes	No
de	escribe	rganization of d in section 5 o political or	i01(c) o	of the Code	y engage (other th	e in any of han section	the following n 501(c)(3) o	g with ai rganizal	ny oth tions)	er organization or in section !	n 527,			atalien ste se	103	- 140
	_	from the re	•		to a nor	ncharitable	exempt ora	anızatıcı	n of.							
														1 a (1)		X
•	•	r assets				-	-							1 a (2)		X
•	•	nsactions:											-	(-)	_	<del></del>
		s of assets to	a none	charitable e	exempt a	organization	n .							1 b (1)	] 1	X
•	•	hases of asse			•	•						·		1 b (2)		X
•	•	al of facilities				. •								1 b (3)		X
•	•	bursement a						·						1 b (4)		X
•	•	s or loan qua	•						-					1 b (5)		X
•	•	rmance of so			rship or f	fundraising	solicitations	·					į	1 b (6)		X
•	•	of facilities, e			•	_	•							1 c		X
	•	ŕ	•		,			•							·	
<b>d</b> If th ai	the ans e goods ny trans	swer to any o , other assets saction or sha	of the at , or serv aring ar	oove is 'Yes vices given t rangement	s,' comp by the rep . show it	lete the fo porting four a column (	llowing sche ndation If the d) the value	dule Co foundati of the o	olumn ion rec ioods.	(b) should alv erved less than other assets,	vays s n fair i or se	show the market rvices	ne fair n value in receive	narket val d	ue of	
(a) Line		(b) Amount inv					npt organization			Description of tran					ngement	ts
N/A		<u> </u>						-+								
					<u></u>			_	_							
		·		 			<del></del>									
					<del></del>											
						<del></del> -										
de	escribed	ndation directled in section 5 complete the	01(c) o	f the Code	(other the	or related han section	to, one or mo n 501(c)(3)) (	re tax-ex or in sec	xempt ction 5	organizations 527?				Yes	X	No
	(a)	Name of org	anızatıo	on		<b>(b)</b> Type	e of organiza	tion		(c	) Des	cription	n of rela	tionship		
N/A										<u>·</u>						
			-													
	Under pe correct. a	enalties of perjury and complete De	. I declare claration o	that I have ex of preparer (oth	kamined thi her than tai	s return, inclui xpayer) is basi	ding accompanyi ed on all informa	ng schedul tion of whi	les and ich prep	statements, and to arer has any know	the be ledge	st of my	knowledge	and belief,		
Sign	_	Na.	~	( an			1 11/8/	אוזה ה	<b>'</b> \( \( \psi_2 \)					this retur	n with th	ie ]
lere		y on	$\mathcal{L}$	wor		<u> </u>	10/0/	7017		RESIDENT				. (see inst	(uctions	2
	Signat	Print/Type prepa		10.1		Preparer's	Date / /		Title	Date			1	PTIN X	Yes	No
	ļ			~ P G			-					Check	X if			
Paid				Z, CPA			ID GOMEZ	, CPA	<i>.</i>	10/09/14		elf-emplo		P00010	)605	
repa		Firm's name		TONE &							Firm's	EIN P	95-45	01513		
Jse O	nly	Firm's address					STE 203						,			
			P	ASADENA	, CA	91107				·	Phone	: no	(626)	382-		
2 A A														Form 996	LPF (2	በ13ነ

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF
► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Name of the organization		Employer identification number
STORYTEL FOUNDATION		36-4645789
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not tre	ated as a private foundation
	527 political organization	·
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated	I as a private foundation
	501(c)(3) taxable private foundation	·
Check if your organization is covered by	the General Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (1)	0) organization can check boxes for both the General Rul	le and a Special Rule. See instructions
	y organization sail shock boxes for both the deficial ha	ic and a openial rate. See instructions
General Rule	P-EZ, or 990-PF that received, during the year, \$5,000 or more	e (in money or property) from any one
contributor (Complete Parts I and II.	)	c (armone, or property) work only and
Special Rules		
For a section 501(c)(3) organization (509(a)(1) and 170(b)(1)(A)(vi) and re (2) 2% of the amount on (i) Form 990	filing Form 990 or 990-EZ that met the 33-1/3% support to cerved from any one contributor, during the year, a contr D. Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete	est of the regulations under sections abution of the greater of (1) \$5,000 or Parts I and II.
total contributions of more than \$1.00	anization filing Form 990 or 990-EZ that received from any on 00 for use <i>exclusively</i> for religious, charitable, scientific, I or animals. Complete Parts I, II, and III.	e contributor, during the year, literary, or educational purposes, or
contributions for use exclusively for relig	anization filing Form 990 or 990-EZ that received from any on- lious, charitable, etc. purposes, but these contributions did no al contributions that were received during the year for an excl	ot total to more than \$1,000. <i>Jusively</i> religious, charitable, etc.
	rts unless the <b>General Rule</b> applies to this organization because of \$5,000 or more during the year	ise it received nonexclusively  ▶ \$
rengious, charitable, etc, contribution	3 οι φο <sub>ι</sub> σού οι πίστε during the year	· · · · · · · · · · · · · · · · · · ·
990-PF) but it must answer 'No' on Part	red by the General Rule and/or the Special Rules does n IV, line 2, of its Form 990, or check the box on line H of eet the filing requirements of Schedule B (Form 990, 990	its Form 990-EZ or on its Form 990-PF.
BAA For Paperwork Reduction Act Notion 990-PF.	ce, see the Instructions for Form 990, 990EZ, Sch	edule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2013)

Schedule	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2013)		Page	1 of	1 of Part
Name of org	PEL FOUNDATION			entification numb	er
	Contributors (see instructions) Use duplicate copies of Part I if additional space	is needed	36-464	5789	<del></del>
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of con	tribution
1	CHRISTOPHER CARNEY		1	Person X	]
	19 WYNSTONE WAY	\$50		Payroll Noncash	]
	NORTH BARRINGTON, IL 60010	-	(C	Complete Part oncash contrit	il for outions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of con	tribution
2	ARCHDIOCESE OF OMAHA		1	Person X	
	100 N 62ND ST	\$20	i i	Noncash	]
	OMAHA, NE 68132			complete Part oncash contrib	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	ıs	(d) Type of cont	tribution
		\$	P	Person Payroll Ioncash Complete Part	Il for putions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	ıs	(d) Type of cont	ribution
		\$	P N (C	Person	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributior	ıs	(d) Type of cont	ribution
		\$	P N (C	erson [] ayroll [] loncash [] omplete Part ncash contrib	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	ıs	(d) Type of cont	ribution
		\$	P N	erson	
BAA	TEEA0702L 12/27/13	Schedule B (Fo	rm 990, 99	0-EZ, or 990-P	F) (2013)

1 of Part 1

Page

to

36-4645789

of Part II

Name of organization
STORYTEL FOUNDATION

Employer identification number

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received N/A (a) No. from Part I (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) (a) No. from Part I (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) (a) No. from Part I (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (b)
Description of noncash property given (d) Date received (a) No. (c) FMV (or estimate) (see instructions) from Part I (b)
Description of noncash property given (d) Date received (a) No. from Part I (c) FMV (or estimate) (see instructions) Schedule B (Form 990, 990-EZ, or 990-PF) (2013) BAA

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2013)		Page	1 to 1	1 of Part III		
Name of organ	Tization EL FOUNDATION			Employer identificat			
Part III	Exclusively religious, charitable, etc	individual contributions	s to section 501(c)	36-4645789 (7), (8) or (10)	<u>,                                      </u>		
	organizations that total more than \$ For organizations completing Part III, enter total contributions of \$1,000 or less for the year (I Use duplicate copies of Part III if additional s	1,000 for the year. Complete of exclusively religious, charitable, Enter this information once. See	columns (a) through (e) a etc	and the following line	e entry. <u>N/A</u>		
(a)		<del> </del>	<del></del>	(d)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Desc	ription of how gift	t is held		
	N/A						
		(e) Transfer of gift					
	Transferee's name, address	, and ZIP + 4	Relationship of	ationship of transferor to transferee			
(a)	(b)	(c)		(d)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Desc	(d) ription of how gift	t is held		
	Transferee's name, address,	transferor to trans	sferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Desci	(d) ription of how gift	is held		
	(e) Transfer of gift						
	Transferee's name, address,	Relationship of t	ransferor to trans	teree			
(a)	(b)	(c)		(d)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Desci	(d) ription of how gift	is held		
				~	. – – – – .		
	<del></del>	(e)					

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

2013		FED	ERAL S	STATE	MENT	S			PAGE :	
CLIENT 5789		STORYTEL FOUNDATION						36-464578		
9/29/14			<del></del>						10:34P	
STATEMENT 5 FORM 990-PF, PA ALLOCATED DEP	ART I, LINE 1 PRECIATION	9 I								
ACQUIRED F	COST BASIS	PRIOR YR DEPR	METHOD	RATE	LIFE	CURRENT YR DEPR	NET II		ADJUSTED NET INCOM	
VEHICLE 1/30/09	30,411	14,413	200DB	0.1152		3,503		0	(	
COMPUTER EQUIP	MENT 3,032	1,865	200DB	0.1152		349		0	(	
WIRING/LIGHTIN 6/06/11	G 5,163	596	S/L	0.1		516		0	C	
STATEMENT 6 FORM 990-PF, PA OTHER EXPENSE	RT I, LINE 2 S	3					<del></del>			
FORM 990-PF, PA	RT I, LINE 2 S	3	FXPF	(A)	(B)		(C)	CH	(D)	
FORM 990-PF, PA	RIPTIONS CE ISORY FEE:		PER 1	(A) NSES BOOKS 7,429. 8,855. 740. 942. 942. 5,289. 207. 5,163. 2,103.	(B) INVEST INC	MENT AD.	(C) JUSTED INCOME		(D) ARITABLE PURPOSES 7,429. 3,855. 740. 942. 5,498. 7,289. 207. 5,516. 2,103. 51,400. 2,585.	

VALUATION METHOD

TOTAL \$

COST

CORPORATE BONDS

CORPORATE BONDS

BOOK

VALUE

473,123. \$ 473,123. \$

FAIR MARKET VALUE

> 478,433. 478,433.

2013	FEC	ERAL ST	ATE	MENTS		PAGE 3
CLIENT 5789	5	STORYTEL FO	UND	ATION		36-4645789
9/29/14				<del></del>		 10·34PM
STATEMENT 8 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIP	MENT					
CATEGORY		BASIS		ACCUM. DEPREC.	OOK LUE	MARKET ALUE
MISCELLANEOUS	OTAL \$	44,591. 44,591.	\$	27,227. \$ 27,227. \$	 17,364. 17,364.	\$ 0.
STATEMENT 9 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES						 
PAYROLL TAXES PAYABLE					 ••	\$ 1,084.
					TOTAL	\$ 1,084.
STATEMENT 10 FORM 990-PF, PART III, LINE 3 OTHER INCREASES						
PRIOR PERIOD ADJUSTMENTS					TOTAL	\$ 75,316. 75,316.

### Form **8868** (Rev January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

►Information about Form 8868 and its instructions is at www.irs.gov/form8868.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

OMB No 1545-1709

<ul><li>If you ar</li></ul>	e filing for an Additional (Not Automatic) 3-Moi	nth Extensio	n, complete only Part II (on page 2 of t	his for	m)				
Do not com	plete Part II unless you have already been gran	ted an auton	natic 3-month extention on a previously	filed F	orm 8868				
Electronic f corporation request an e Associated	iling (e-file). You can electronically file Form 88/ required to file Form 990-T), or an additional (not extension of time to file any of the forms listed in Pa With Certain Personal Benefit Contracts, which is ling of this form, visit www.irs.gov/efile and click	68 if you nee ot automatic rt I or Part II i must be sent	ed a 3-month automatic extension of time) 3-month extension of time. You can e with the exception of Form 8870, Informatic to the IRS in paper format (see instruc	e to fil lectron	e (6 mont scally file I	Form 8868 to			
Part'l "	Automatic 3-Month Extension of Tim	e. Only su	bmit original (no copies needed)	·	<del></del>				
A corporation	n required to file Form 990-T and requesting an				lete Part I	only . ► 🗍			
All other col income tax	porations (including 1120-C filers), partnerships returns.	s, REMICs, a	nd trusts must use Form 7004 to reques Enter filer's ident						
	Name of exempt organization or other filer, see instructions		Empl	oyer identifica	ation number (EIN) or				
Type or print									
print	STORYTEL FOUNDATION				464578				
File by the due date for	Number, street, and room or suite number. If a P O box, see	instructions		Socia	I security nun	irity number (SSN)			
filing your	10506 BURT CIR	<del></del>			·				
return See instructions	City, town or post office state, and ZIP code For a foreign ac	idress, see instru	uctions.						
	OMAHA, NE 68114								
Enter the Re	eturn code for the return that this application is	for (file a sep	parate application for each return)			04			
Application Is For		Return Code	Application Is For	<del></del> -		Return Code			
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)		07				
Form 990-BI	<del></del>	02	Form 1041-A	orm 1041-A					
Form 4720 (ı	<del></del>	03	Form 4720 (other than individual)		09				
Form 990-PI	<del></del>	04	Form 5227		10				
	(section 401(a) or 408(a) trust)	05	Form 6069			11			
Form 990-T	(trust other than above)	06	Form 8870			12			
Telephon  If the org	e No (402) 502-9258  ganization does not have an office or place of bifor a Group Return, enter the organization's founds box	ır dıgıt Group	e United States, check this box Exemption Number (GEN)			► []  /hole group,  if all members			
the exter	nsion is for								
•	st an automatic 3 month (6 months for a corporation	**	•						
The ex	8/15 , $20$ $14$ , to file the exempt orgension is for the organization's return for calendar year $20$ $13$ or tax year beginning , 20								
_	ax year entered in line 1 is for less than 12 mor			nal reti	urn				
∐Ch.	ange in accounting period								
	application is for Forms 990-BL, 990-PF, 990-T, undable credits. See instructions	4720, or 606	59, enter the tentative tax, less any	3 a	\$	843.			
b If this tax pay	application is for Forms 990-PF, 990-T, 4720, or iments made. Include any prior year overpayme	6069, enter ent allowed a	any refundable credits and estimated s a credit	3 5	\$	0.			
EFTPS	e due. Subtract line 3b from line 3a Include you (Electronic Federal Tax Payment System) See	instructions	·	3 0		843.			
Caution. If y payment ins	ou are going to make an electronic funds withdi tructions.	rawal (direct	debit) with this Form 8868, see Form 8	453-EC	and Forn	n 8879-EO for			

Form 8868	(Rev 1-2014)					Page 2
<ul><li>If you a</li></ul>	re filing for an Additional (Not Automatic) 3-Mont	h Extension	, complete only Part II and check ti	his box		· • X
Note. Only	complete Part II if you have already been granted	d an automa	tic 3-month extension on a previous	sly filed Fo	rm 8868	لتتا
	re filing for an Automatic 3-Month Extension, con					
Part II	Additional (Not Automatic) 3-Month E	xtension	of Time. Only file the origina	l (no cop	ies neede	=d).
,			Enter filer's id			
	Name of exempt organization or other filer, see instructions			Employer ide	entification numb	ber (EIN) or
Type or						
print	STORYTEL FOUNDATION			36-464	5789	
Number, street, and room or suite number. If a P O box, see instructions  Social security number (SSN)  File by the						
extended due date for	STONE & GOMEZ, LLC					
filing your return See	482 N ROSEMEAD BLVD STE 203					
instructions	City, town or post office, state, and ZIP code For a foreign addre	ss, see instructi	ons			
	PASADENA, CA 91107					
				_		
Enter the F	Return code for the return that this application is fo	or (file a sep	parate application for each return)			04
		T				
Application	n	Return	Application			Return
Is For	5 000 57	Code	ls For			Code
	r Form 990-EZ	01	,			
Form 990-E	<del></del>	02	Form 1041-A			08
Form 990-F	<del>}</del>	03	Form 4720 (other than individual)			09
	Γ (section 401(a) or 408(a) trust)	04	Form 5227 Form 6069			10
	(trust other than above)	06	Form 8870			11
	(trust other triain above)	1 00	F0/111 8870			
STOP! Do	not complete Part II if you were not already grant	ed an autom	natic 3-month extension on a previo	ously filed	Form 8868.	
Telepho  If the or  If this is whole group	oks are in care of DONALD E CARNEY  one No. (402) 502-9258  rganization does not have an office or place of but s for a Group Return, enter the organization's four p, check this box  If it is for part of the grane extension is for	digit Group	Exemption Number (GEN)	 .h the nam		. ► ☐ nis is for the s of all
4 I requ	uest an additional 3-month extension of time until	11/15	20. 1.4	<del></del> -		
5 Force	alendar year $2013$ , or other tax year beginnin	77/73	20 14 and ending		20	
	tax year entered in line 5 is for less than 12 mont		eason:   Initial return	Final re		
	hange in accounting period	iis, check ie	ason. Initiar return	L Fillal R	etum	
L.J		AVED DEG	CDECTEILLY DECLIECTE ADI	א זאראדיראנא	T TIME	Tr.O
	HER INFORMATION NECESSARY TO FI		SPECTFULLY REQUESTS ADD			10
757	THE THEORETION MECESSAY. TO II	חדר ע הסנ	THE IE WAS VECOMMETE IN	v miron		
8 a If this	application is for Forms 990-BL, 990-PF, 990-T, 4 fundable credits. See instructions	1720, or 606	9, enter the tentative tax, less any	. 8a	\$	843.
tax pa	application is for Forms 990-PF, 990-T, 4720, or ayments made. Include any prior year overpayments with Form 8868			ed 8 b	is	0.
c Balan	ice due. Subtract line 8b from line 8a. Include you S (Electronic Federal Tax Payment System) See	r payment w	with this form, if required, by using	80	ļ	843.
			t be completed for Part II on		<u> </u>	
Under penalties correct and cor	s of perjury, I declare that I have examined this form including acomplete and that I am authorized to prepare this form		•	•	pelief, it is true,	
Signature >	Teta 🕨	PRESIDE	'MT	_	ate 🕨	
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2013	FEDERAL STATEMENTS	PAGE 1
CLIENT 5789	STORYTEL FOUNDATION	36-4645789
9/29/14  STATEMENT 1 FORM 990-PF, PART I, LINE 16A LEGAL FEES		10:34PM
LEGAL	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 131.  TOTAL \$ 0. \$ 0.	(D) CHARITABLE PURPOSES \$ 131. \$ 131.
STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
ACCTG	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  TOTAL \$ 1,750. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES \$ 1,750. \$ 1,750.
STATEMENT 3 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES		
CONSULTING	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 5,868. TOTAL \$ 5,868. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES \$ 5,868. \$ 5,868.
STATEMENT 4 FORM 990-PF, PART I, LINE 18 TAXES		
PAYROLL TAXES TAXES & LICENSES	769.	(D) CHARITABLE PURPOSES \$ 12,335. 769. \$ 13,104.