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Form **990-PF** Department of the Treasury Internal Revenue Service

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

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.

OMB No 1545-0052

For	alen	dar year 2013 or tax year beginning JUL	1, 2013	, and ending	<u>JUN 30, 2014</u>	
Nar	ne of	foundation			A Employer identification	number
V	ET'	TER FOUNDATION				
용	J	ACK VETTER			47-0762483	
Nun	ber a	nd street (or P O box number if mail is not delivered to street	B Telephone number			
2	02	20 HARNEY STREET			(402) 895-	3932
City	or to	own, state or province, country, and ZIP or foreign pe	ostal code		C If exemption application is pe	ending, check here
-		HORN, NE 68022				
G	heck	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return			
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation
H C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation] E If private foundation stat	us was terminated
] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	under section 507(b)(1)	
I Fa	ır ma	arket value of all assets at end of year J Accounting	ng method: X Cash	Accrual	F If the foundation is in a	50-month termination
(fi	om F	Part II, col. (c), line 16)	her (specify)		under section 507(b)(1)	
•	\$	2,237,101. (Part I, colui	mn (d) must be on cash t	pasis.)		
_ Pa	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
Š	1	Contributions, gifts, grants, etc., received	709,787.			
€	2	Check If the foundation is not required to attach Sch. B				
23	3	Interest on savings and temporary cash investments	1,619.	1,619.	- "	STATEMENT 1
7	4	Dividends and interest from securities				
Ī		Gross rents		_		
		Net rental income or (loss)				
l T		Net gain or (loss) from sale of assets not on line 10				
e a	b	Gross sales price for all				
Revenue	7	assets on line 6a Capital gain net income (from Part IV_line 2)		0.		
Revenue	8	Net short-term capital gain	Ó		-	
	9	6.0.0045	Ö	——————————————————————————————————————		
	•	Gross soles less returns				
	Ι.	and allowances				
	l	Gross profit or (loss)				
	l	Other income	319,800.	0.	319 800	STATEMENT 2
	11		1,031,206.	1,619.	319,800.	DITTI DITENT 2
	12	Total. Add lines 1 through 11	0.	0.	0.	0.
	13	Compensation of officers, directors, trustees, etc			•	•
	14	Other employee salaries and wages		<u> </u>		
တ္တ	ı	Pension plans, employee benefits				
nse	ı	Legal fees	700.	0.	700.	0.
ĝ	ı	Accounting fees STMT 3	700.		700.	
Û	ı	Other professional fees		-··-		
Operating and Administrative Expense	ı	Interest				
štra	l	Taxes				
ij	19	Depreciation and depletion				
튣	20	Occupancy				
٩Þ	21	Travel, conferences, and meetings			 	
ä	22	Printing and publications	100 340		106 246	
ing	23	Other expenses STMT 4	186,346.	0.	186,346.	0.
rat	24	Total operating and administrative	105 046	^	107 046	
ğ		expenses Add lines 13 through 23	187,046.	0.	187,046.	0.
J	I	Contributions, gifts, grants paid	856,499.		 	856,499.
	26	Total expenses and disbursements.	4 040 -4-	_	105 046	056 400
		Add lines 24 and 25	1,043,545.	0.	187,046.	856,499.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	<12,339.	<u>></u>		ļ
	b	Net investment income (if negative, enter -0-)	_	1,619.		
	С	Adjusted net income (if negative, enter -0-)	<u> </u>		132,754.	

LHA For Paperwork Reduction Act Notice, see instructions.

VETTER FOUNDATION % JACK VETTER

Fo	m 99	0-PF (2013) % JACK VETTER	Beginning of year	47-0)762483 Page 2
Г	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	End of	year	
	ait	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	1	Savings and temporary cash investments	1,074,399.	1,012,060.	1,012,060.
	3	Accounts receivable >			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable 50,000.			
	1	Less: allowance for doubtful accounts	0.	50,000.	50,000.
Ŋ	8	Inventories for sale or use		/	
Assets	9	Prepaid expenses and deferred charges			
As	1	Investments - U.S. and state government obligations			
	1	Investments - corporate stock STMT 5	215,634.	215,634.	1,175,041.
	1	Investments - corporate bonds	223/032.	213,034.	1/1/5/0410
	1	Investments - land, buildings, and equipment basis			
	''	Less accumulated depreciation			
	12	Investments - mortgage loans	*	-	
	1	Investments - other			
	13			-	
	14	Land, buildings, and equipment basis ► 8,656.		:	
		Less accumulated depreciation STMT 6 8,656.	260 462	260 462	
	1	Other assets (describe EQUIPMENT - WFTW)	269,462.	269,462.	0.
	16	Total assets (to be completed by all filers - see the	1 550 405	1 545 156	0 005 101
	1	instructions. Also, see page 1, item 1)	1,559,495.	1,547,156.	2,237,101.
		Accounts payable and accrued expenses			
		Grants payable			
ies	19	Deferred revenue			
Liabilities	1	Loans from officers, directors, trustees, and other disqualified persons			
į	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
ý		and complete lines 24 through 26 and lines 30 and 31.			
ဥ	24	Unrestricted			
퍨	25	Temporarily restricted			
ä	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.	_	_	
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ž	29	Retained earnings, accumulated income, endowment, or other funds	1,559,495.	1,547,156.	
Š	30	Total net assets or fund balances	1,559,495.	1,547,156.	
_	31	Total liabilities and net assets/fund balances	1,559,495.	1,547,156.	
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances		
_	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30	n	 	
•		it agree with end-of-year figure reported on prior year's return)	o .		- 1 550 /05
9		amount from Part I, line 27a	1	1,559,495.	
		r increases not included in line 2 (itemize)	2	<12,339.> 0.	
		ines 1, 2, and 3	3	1,547,156.	
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 30	6	1,547,156.
					Form 990-PF (2013)

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Part IV Capital Ga	ins and Lo	sses for Tax on In	vestment	t Income			-					
		ind(s) of property sold (e.g. or common stock, 200 shs			(b) I	How a - Purd - Don	cquired hase ation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)		
1a												
_b	NONE		<u>. </u>		<u> </u>							
<u>c</u>					.							
_d					ļ							
<u>e</u>				· · · · · ·	<u> </u>					L		
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale					Sain or (loss s (f) minus			
a												
b						-						
<u> </u>												
d												
Complete only for accets of	howing goin in	column (b) and owned by	ha foundation	on 12/21/60					N-1 (b)			
Complete only for assets s		column (h) and owned by t							Col. (h) gain not less tha			
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (3), if any				Losses	(from col. ((h))		
<u>a</u>												
_b												
<u>c</u>										<u></u>		
<u>d</u>										 		
<u>e</u>							i			· · ·		
2 Capital gain net income or (i	net capital loss	$ \begin{cases} \text{ If gain, also enter} \\ \text{ If (loss), enter -0-} \end{cases} $	in Part I, line In Part I, line	7 7	}	2						
3 Net short-term capital gain of	or (loss) as def	ined in sections 1222(5) an	d (6):		_ \							
If gain, also enter in Part I, li		c).										
If (loss), enter -0- in Part I, I		20-11 4040/0\ 40	Dadwaad	Tour on No.		3	I					
L		Section 4940(e) for					ient in	come				
(For optional use by domestic p	rivate foundati	ons subject to the section 4	1940(a) tax on	net investment ir	ncome	e.)						
If section 4940(d)(2) applies, le	ave this part b	lank.										
Was the foundation liable for th				•	riody					Yes X No		
If "Yes," the foundation does no 1 Enter the appropriate amou					ntries	,						
(a)	III III Gacii colu		istructions be	TOTE MAKING ANY E						(d)		
Base period years		(b) Adjusted qualifying dist	tributions	Net value of no	(c) onchai		-use asset		Distribution ratio			
Calendar year (or tax year be	guming in)		8,066.				0,70	<u> </u>	(col. (b) divided by col. (c)) - 265266			
2012			6,577.				7,50			325668		
2010			3,850.		1		$\frac{7,300}{1,31}$.333374		
2009			5,652.		_ †		$\frac{1}{2}, \frac{31}{48}$.402073		
2009			0,418.		-		4,03			.628256		
2000		00	0,410.			, 4 1	4,03	-	1	.020230		
2 Total of line 1, column (d)								2		1.954637		
3 Average distribution ratio fo	r the Eweer he	co pariad - divida the total c	on line 2 hy 5	or by the number	of vo	200				1.334037		
the foundation has been in e	·-	•	JII IIIIC Z DY J,	or by the number	Oi ye	ais		3		.390927		
the foundation has been in t	SXISTETILE II 1653	s man o years						_ 3		. 330321		
4 Enter the net value of nonch	aritable-uca ac	eate for 2013 from Part Y I	lina 5					4		2,035,691.		
4 Enter the net value of nonch	aritable-use as	Sets 101 20 13 110111 Fait A, 1	IIIIe J					-		2,033,031.		
E. Multiply line 4 by line 2								5		795,807.		
5 Multiply line 4 by line 3								3		133,001.		
6 Enter 19/ of not investment	.nnomo (19/ of	Port Line 27h)								16.		
6 Enter 1% of net investment	ilicollie (1% Oi	raiti, iiie 270)						6				
7 Add lines Food C								,		795,823.		
7 Add lines 5 and 6	d lines 5 and 6					7		133,043.				
8 Enter qualifying distributions	s from Part XII,	line 4						8		856,499.		
If line 8 is equal to or greate See the Part VI instructions.		neck the box in Part VI, line	1b, and comp	lete that part usin	ıg a 1	% tax	rate.					

VETTER FOUNDATION

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	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ii	nstru	ctior	<u>1S)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1				<u> 16.</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
3	Add lines 1 and 2	3	1			16.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				<u> 16.</u>
	Credits/Payments:					
	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 116	•				
	Exempt foreign organizations - tax withheld at source	4				
	Tax paid with application for extension of time to file (Form 8868)	4				
	Backup withholding erroneously withheld 6d	4			_	
7	Total credits and payments. Add lines 6a through 6d	7			1	<u> 16.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	<u>.</u>			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<u> </u>			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				<u>oo.</u>
	Enter the amount of line 10 to be: Credited to 2014 estimated tax	· 11				0.
	art VII-A Statements Regarding Activities			1	Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervei	ne in		4.	163	
	any political campaign?	\0		1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition of the province of the			1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	nea or				
_	distributed by the foundation in connection with the activities					x
	Did the foundation file Form 1120-POL for this year?			1c		
u	 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	•				
е	managers. > \$ 0 •					
9	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х
_	If "Yes," attach a detailed description of the activities					
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	or				
Ü	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	, v.		3		x
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?]	A\N	4b		
	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 of the state	ate 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, col. (c), and Part 2	ΧV		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NE					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)						
of each state as required by General Instruction G? If "No," attach explanation						
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	alendar				
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X

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VETTER FOUNDATION

Part 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) 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 X Website address ► WWW.VETTERHEALTHSERVICES.COM/FOUNDATION.HTM 14 The books are in care of ► ELDORA VETTER Located at ► 20220 HARNEY STREET, ELKHORN, NE 2IP+4 ►68022	X X X 32
section 512(b)(13)? If "Yes," attach schedule (see instructions) 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 X Website address WWW.VETTERHEALTHSERVICES.COM/FOUNDATION.HTM 14 The books are in care of ELDORA VETTER Telephone no. (402)895-393	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 X Website address ► WWW.VETTERHEALTHSERVICES.COM/FOUNDATION.HTM 14 The books are in care of ► ELDORA VETTER Telephone no.► (402)895-39.	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 X Website address ► WWW.VETTERHEALTHSERVICES.COM/FOUNDATION.HTM 14 The books are in care of ► ELDORA VETTER Telephone no.► (402)895-393	
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.VETTERHEALTHSERVICES.COM/FOUNDATION.HTM The books are in care of ► ELDORA VETTER Telephone no.► (402)895-393	
Website address ► WWW.VETTERHEALTHSERVICES.COM/FOUNDATION.HTM 14 The books are in care of ► ELDORA VETTER Telephone no.► (402)895-393	12
14 The books are in care of ► ELDORA VETTER Telephone no. ► (402)895-393	32
	32
Located at ► 20220 HARNEY STREET, ELKHORN, NE ZIP+4 ► 68022	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	▶
and enter the amount of tax-exempt interest received or accrued during the year	
16 At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,	1
securities, or other financial account in a foreign country?	<u> </u>
See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign	
country	
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required	
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	No
1a During the year did the foundation (either directly or indirectly):	ŀ
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	
a disqualified person?	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	
(5) Transfer any income or assets to a disqualified person (or make any of either available	
for the benefit or use of a disqualified person)?	
(6) Agree to pay money or property to a government official? (Exception. Check "No"	
if the foundation agreed to make a grant to or to employ the official for a period after	
termination of government service, if terminating within 90 days.)	
b If any answer is "Yes" to 1a(1)-(6), did any 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)?	₩
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?	<u> </u>
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?	
If "Yes," list the years , , , , , , , , , , , , , , , , , , ,	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A 2b	
' I I I I I I I I I I I I I I I I I I I	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	
during the year? 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) N/A 3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	X
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? 4b	x
Form 990-PI	

Total number of other employees paid over \$50,000

VETTER FOUNDATION

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers Paid Employees, and Contractors (continued)	s, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
	ype of service	(c) Compensation
NONE	·	
——————————————————————————————————————		▶ 0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such	no the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	i as life	Expenses
1 CHARITABLE SUPPORT OF OTHER 501(C)(3) ORGANIZATION EX	ЕМРТ	
ACTIVITIES INCLUDING ASSEMBLY OF GOD MISSIONS AND CHU		
		856,499.
2 EDUCATION AND TRAINING ACTIVITIES FOR PERSONNEL IN TH	E	
HEALTH CARE AND LONG-TERM CARE INDUSTRIES		
		<u> 156,508.</u>
3		
4		
Part IX-B Summary of Program-Related Investments	<u> </u>	
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		
		•
		<u> </u>
All other program-related investments. See instructions.		
3		
Tetal Add lines 1 through 3		0.

% JACK VETTER

	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	1,183,374. 883,317.
	Average of monthly cash balances	1b	883,317.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,066,691.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	<u>0.</u>
3	Subtract line 2 from line 1d	3	2,066,691.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	<u>31,000.</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,035,691.
6	Minimum investment return. Enter 5% of line 5	6	101,785.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	101,785.
-	Tax on investment income for 2013 from Part VI, line 5		
_ b	Income tax for 2013. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	16.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	101,769.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	101,769.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	101,769.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		056 400
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>856,499.</u>
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	056 400
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	856,499.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	4.0
	income. Enter 1% of Part I, line 27b	5	16.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	856,483.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for	r the section

Form **990-PF** (2013)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	· (c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,				101,769.
line 7		-		101,709.
2 Undistributed income, if any, as of the end of 2013			0.	
a Enter amount for 2012 only b Total for prior years:				
b rotal for prior years.		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008 736, 960.				
b From 2009 451,751.				
c From 2010 556, 075.				
d From 2011 572,817.				
e From 2012 428, 564.		į		
f Total of lines 3a through e	2,746,167.			
4 Qualifying distributions for 2013 from	2,140,101.	*		
Part XII, line 4: ▶\$ 856, 499.				
a Applied to 2012, but not more than line 2a			0.	
- · · · ·	·. · · · · · · · · · · · · · · · · · ·		0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		<u> </u>		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
· · · · · · · · F	<u> </u>			101,769.
d Applied to 2013 distributable amount e Remaining amount distributed out of corpus	754,730.			101,100.
· · · · · · · · · · · · · · · · · · ·	734,730.	* -	- <u>-</u> -	0.
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			<u></u>
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,500,897.			
b Prior years' undistributed income. Subtract	, , , , , ,			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	736,960.			····
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	2,763,937.		•	· · · · · · · · · · · · · · · · · · ·
O Analysis of line 9:				
a Excess from 2009 451,751.				
b Excess from 2010 556,075.				
c Excess from 2011 572,817.				
d Excess from 2012 428,564.				
e Excess from 2013 754,730.	<u>_</u>			
				Form 990-PF (2013)

the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

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, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

47-0762483

Page 11

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient a Paid during the year NONE OTHER PUBLIC RELIGIOUS/CHARITABLE AFRICA'S HOPE CHARITY 60,862. NONE OTHER PUBLIC ALEGENT HEALTH FOUNDATION RELIGIOUS/CHARITABLE 3,500. CHARITY NONE OTHER PUBLIC RELIGIOUS/CHARITABLE HOPE CENTER FOR KIDS 5 000. CHARITY OTHER PUBLIC RELIGIOUS/CHARITABLE NONE MOBILITY FOR HUMANITY 2,000. CHARITY OTHER PUBLIC RELIGIOUS/CHARITABLE ASSEMBLY OF GOD MISSIONS NONE 112 800. SEE CONTINUATION SHEET(S) ▶ 3a 856,499, Total **b** Approved for future payment NONE **≥** 3b Total

1 Program service revenue: a EDUCATION AND TRAINING 12 12	Enter gross amounts unless otherwise indicated.	Unrelated b	ousiness income		y section 512, 513, or 514	(e)
a EDUCATION AND TRAINING c d e e f g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net certal income or (loss) from real estate: a Debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 10 Other revenue: a b c d d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 15 See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the toundation's exempt purposes (other than by providing funds for such purposes). 1A THE VETTER FOUNDATION SUPPORTS VARIOUS EDUCATIONAL ACTIVITIES IN HEALTH CARE AND NURSING HOME INDUSTRIES THROUGH SPONSORSHIP OF EDUCATIONAL TRAINING PROGRAMS, CONFERENCES, AND SEMINARS FOR HEA	•	Business		Exclu- sion	_	Related or exempt function income
b c d e e f g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 14 1,619. 4 Dividends and interest from securities 14 1,619. 5 Not rental income or (loss) from real estate: 4 1,619. 6 Not debt-financed property 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						124,946
c d e f general and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dowdends and interest from securities 5 Net rental income or (loss) from real estate: a Debt-financed property 5 Debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from sales of inventory 11 Other revenue: a Debt-financed property 5 Debt-financed property 6 Net rental income 7 (loss) from sales of inventory 1 Debt-financed property 7 Debt investment income 8 Gain or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 9 Net income or (loss) from sales of inventory 1 Debt-financed property 1 Debt-		_				
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a b c d d d d d d d d d d d d d d d d d d			-			
b c d d d d d d d d d d d d d d d d d d						
b c d d d d d d d d d d d d d d d d d d	a					
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Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). The Vetter Foundation Supports Various Educational Activities in Health Care and Nursing Home Industries Through Sponsorship Of Educational Training Programs, Conferences, and Seminars For Health	12 Subtotal. Add columns (b), (d), and (e)			0.	167,590.	
Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. ▼ Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). 1A THE VETTER FOUNDATION SUPPORTS VARIOUS EDUCATIONAL ACTIVITIES IN HEALTH CARE AND NURSING HOME INDUSTRIES THROUGH SPONSORSHIP OF EDUCATIONAL TRAINING PROGRAMS, CONFERENCES, AND SEMINARS FOR HEA	13 Total. Add line 12, columns (b), (d), and (e)				13	292,536
Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). 1A THE VETTER FOUNDATION SUPPORTS VARIOUS EDUCATIONAL ACTIVITIES IN HEALTH CARE AND NURSING HOME INDUSTRIES THROUGH SPONSORSHIP OF EDUCATIONAL TRAINING PROGRAMS, CONFERENCES, AND SEMINARS FOR HEA	(See worksheet in line 13 instructions to verify calculations.)	<u></u>				
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			R FOUNDAT	ION						
Form 99			K VETTER			15 12		<u> 162483</u>		age 13
Part 2	XVII			sters 10 a	and Transactions	and Relations	nips With Nonc	naritable	€	
	•	Exempt Organ					5044) (Vaa	NIO
					ng with any other organizat		ion 501(c) of		Yes	NO
					27, relating to political orga	nizations?			ļ	
		from the reporting found	ation to a noncharita	die exempt or	ganization of:			4.74		- T
	Cash							1a(1)	-	X
	Other							1a(2)	 	X
_		sactions:	ble everet success	4				41.43		.
٠,		of assets to a noncharita						1b(1)	-	X Y
		nases of assets from a no		organization				1b(2)		X
, ,		I of facilities, equipment,						1b(3)		X
		bursement arrangements s or loan guarantees						1b(4) 1b(5)		X
٠,		rmance of services or me	mberehin er fundra	cina colicitatio	nne			1b(6)		X
,		f facilities, equipment, ma	•	•				1c	-	X
	-				edule. Column (b) should a	lwave chow the fair i	market value of the goo		eate .	22
_		•		•	ed less than fair market va	•	*	-	octo,	
) the value of the goods,				ide in any transaction	Tor Sharing arrangeme	in, 511011 III		
(a) Line n		(b) Amount involved			e exempt organization	(d) Description	n of transfers, transactions,	and sharing ar	rangeme	ents
<u> </u>		ι-/		N/A	·					
										
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			·-··							
2a Isi	the four	ndation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt orga	nizations described				
		501(c) of the Code (othe						Yes	X	No
b If "	Yes," co	omplete the following sch	edule.							
		(a) Name of org	janization		(b) Type of organization		(c) Description of relat	onship		
		N/A								
					ng accompanying schedules an in taxpayer) is based on all info			May the IRS		
Sign			2.0	4/		.		return with the shown below		
Here		- auf	<u>. 0 //1</u>	MX.	3-13-15		ror	LX Yes	;	No ل
	Sigr	nature of officer or trustee		Тъ .	Date	Title	Ohooli Carlo	FINE		
		Print/Type preparer's na	ame	Preparer's s	ignature /	Date		ΓIN		
Daid				11	MIL	5/11/15	self- employed			
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Prep	ai ei	Firm's name ► SEI	MOZNHOL M.	I, LLP			Firm's EIN ► 47	- 6 0 9 7 9	13	

Phone no. (402)330-2660

Use Only

Firm's address ► 18081 BURT STREET, SUITE 200 OMAHA, NE 68022-4722

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

Department of the Treasury

Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

	ETTER FOUNDATION JACK VETTER	47-0762483						
Organization type(check								
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
Note. Only a section 501(c General Rule X For an organization	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in modelete Parts I and II.							
Special Rules								
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg (b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II							
total contribution	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III							
contributions for If this box is chec purpose Do not	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.							
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

VETTER FOUNDATION % JACK VETTER Employer identification number

47-0762483

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VETTER HOLDING, INC. 20220 HARNEY STREET ELKHORN, NE 68022	\$ <u>683,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	VETTER LEASING SERVICES 20220 HARNEY STREET ELKHORN, NE 68022	\$15,100.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

VETTER FOUNDATION

% JACK VETTER

47-0762483

Part II	Noncash Property (see instructions). Use duplicate copies of F	'art 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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Parti			
		\$	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Parti			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1			
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I			
		\$	

Name of organization **Employer identification number** VETTER FOUNDATION 47-0762483 JACK Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) Part III Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (c) Use of gift (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (c) Use of gift (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to any foundation manager Amount Name and address (home or business) or substantial contributor ASSISTANCE LEAGUE OF OMAHA NONE OTHER PUBLIC RELIGIOUS/CHARITABLE CHARITY 11,000. NONE OTHER PUBLIC EDUCATIONAL BELLEVUE UNIVERSITY CHARITY 2,000. COMMUNITY 360 NONE OTHER PUBLIC RELIGIOUS/CHARITABLE CHARITY 1,200. CONVOY OF HOPE NONE OTHER PUBLIC RELIGIOUS/CHARITABLE CHARITY 42,400. NONE MOSAIC OTHER PUBLIC RELIGIOUS/CHARITABLE CHARITY 2,500. NONE EVANGEL UNIVERSITY OTHER PUBLIC RELIGIOUS/CHARITABLE CHARITY 120,000. HEALTH CARE MINISTRIES NONE OTHER PUBLIC RELIGIOUS/CHARITABLE CHARITY 2,500. OTHER PUBLIC HOMES FOR HOPE NONE RELIGIOUS/CHARITABLE CHARITY 13,000. NONE IOWA HEALTHCARE ASSOCIATION OTHER PUBLIC RELIGIOUS/CHARITABLE CHARITY 2,000. KYLE KORVER FOUNDATION NONE OTHER PUBLIC RELIGIOUS/CHARITABLE CHARITY 3,000. Total from continuation sheets 672,337.

Part XV Supplementary Information 3 Grants and Contributions Paid During the				
, Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
MISCELLANEOUS CHARITIES	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	45.055
			;LISTTOTAL 0	45,367
NEBRASKA HEALTH CARE FOUNDATION	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	6,000
NDC ASSEMBLY OF GOD	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	12,000
OMAHA YOUTH FOR CHRIST	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	11,000
ONE CHILD MATTERS	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	29,620
OPEN DOOR MISSION	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	5,000
SALVATION ARMY	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	2,750
OMAHA KIDS AGAINST HUNGER	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	5,000
QUALITY LIVING	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	4,000
UNIVERSITY OF NEBRASKA FOUNDATION Total from continuation sheets	NONE	OTHER PUBLIC	EDUCATIONAL	17,000

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) OTHER PUBLIC RELIGIOUS/CHARITABLE NONE VILLAGE NORTHWEST 5,000, CHARITY NONE OTHER PUBLIC RELIGIOUS/CHARITABLE WATER FOR THE WORLD 330,000, CHARITY Total from continuation sheets

FORM 990-PF INTEREST ON SAVI	NGS AND	TEMPOR <i>i</i>	RY CA	SH]	INVESTMENTS	STATEMENT	1
SOURCE		(A) EVENUE R BOOKS			(B) INVESTMENT INCOME	(C) ADJUSTE	
INTEREST		1,61	.9.		1,619.	1,	619.
TOTAL TO PART I, LINE 3		1,61	.9.		1,619.	1,	619.
FORM 990-PF	OTHE	R INCOM	Œ	· · ·		STATEMENT	2
DESCRIPTION		REV	A) ENUE BOOKS	;	(B) NET INVEST- MENT INCOME		
EDUCATION AND TRAINING GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS			124,9 194,8		0	·	
TOTAL TO FORM 990-PF, PART I,	LINE 11		319,8	00.	0	. 319,	800.
FORM 990-PF	ACCOU	NTING I	EES			STATEMENT	3
DESCRIPTION	(A) EXPENSE PER BOO	-	(B) INVE		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	7	00.		0	. 70	0.	0.
TO FORM 990-PF, PG 1, LN 16B	· 7	00.		0	. 70	0.	0.
FORM 990-PF	ОТНЕ	R EXPE	ISES			STATEMENT	4
DESCRIPTION	(A) EXPENSE PER BOO		(B) INVE		(C) ADJUSTED NET INCOM		
MISCELLANEOUS PROGRAM CONFERENCE EXPENSES VETTER FOUNDATION GOLF	6 156,5	95. 08.	<u> </u>	0		5.	0.
CLASSIC 2014 OFFICE SUPPLIES	28,8	83. 60.		0		3.	0.
TO FORM 990-PF, PG 1, LN 23	186,3	46.		0	. 186,34	6.	0.

FORM 990-PF CO	RPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
VETTER HOLDING, INC. COMMON STOCK CARPENTERS HELPERS	•	183,634. 32,000.	1,143,041.
TOTAL TO FORM 990-PF, PART II, LIN	E 10B	215,634.	1,175,041.
FORM 990-PF DEPRECIATION OF ASSE	TS NOT HELD FOR	INVESTMENT	STATEMENT 6
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
TRAILER	8,656.	8,656.	0.
TOTAL TO FM 990-PF, PART II, LN 14	8,656.	8,656.	0.

	LIST OF OFFICERS, DI AND FOUNDATION MANAGE		STAT	EMENT 7
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JACK D. VETTER 22790 LINCOLN ROAD GRETNA, NE 68028	PRESIDENT 0.00	0.	0.	0.
ELDORA D. VETTER 22790 LINCOLN ROAD GRETNA, NE 68028	VICE PRESIDENT 0.00	0.	0.	0.
TODD VETTER 9276 S. 222ND STREET GRETNA, NE 68028	DIRECTOR 0.00	0.	0.	0.
VICKI CATES 1201 N. 182ND COURT LINCOLN, NE 68527	DIRECTOR 0.00	0.	0.	0.
DENITH D. VETTER 11420 S. 216TH STREET GRETNA, NE 68028	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	E 6, PART VIII	0.	0.	0.

2013 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

•	Current Year. Deduction	. 0	* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction
	Current Sec 179	•	nercial Revita
	Accumulated Depreciation	8,656.	age, Bonus, Comr
	Basis For Depreciation	8,656.	, Section 179, Salv
	Reduction In Basis	•0	, ITC,
	Bus % Excl		
	Unadjusted Cost Or Basis	8,656.	(D) - Asset disposed
	No	17	(0)
	Life	2.00	
	Method	200DB	
	Date Acquired	051905200DB5	
	Description	1TRAILER * TOTAL 990-PF PG 1 DEPR	
	Asset		328102 05-01-13

Form 8868 (Rev. 1-	2014)					Page 2	
 If you are filing to 	or an Additional (Not Automatic) 3-Month E	xtension,	complete only Part II and check this	box			
	te Part II if you have already been granted an						
 If you are filing for 	or an Automatic 3-Month Extension, comple	ete only Pa	art I (on page 1).				
Part II Add	ditional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies nee	ded).	
						see instructions	
Type or Name of	of exempt organization or other filer, see instru	uctions.				n number (EIN) or	
	R FOUNDATION						
	CK VETTER				47-0762483		
due date for Numbe	r, street, and room or suite no. If a P.O. box, s	see instruc	rtions.	Social se			
return See 20220					• •	. ,	
Instructions Crty, to	wn or post office, state, and ZIP code. For a f	oreign add	dress, see instructions.				
ELKHO	ORN, NE 68022	_					
Enter the Return co	de for the return that this application is for (file	e a separa	te application for each return)			0 4	
		•			•• •••••		
Application		Return	Application			Return	
Is For		Code	Is For			Code	
Form 990 or Form 9	990-EZ	01					
Form 990-BL		02	Form 1041-A			08	
Form 4720 (individu	ual)	03	Form 4720 (other than individual)			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec. 40	01(a) or 408(a) trust)	05	Form 6069		·	11	
Form 990-T (trust of	ther than above)	06	Form 8870			12	
STOP! Do not com	plete Part II if you were not already granted	<u>i an auton</u>	natic 3-month extension on a previ	ously file	ed Form 886	3	
	ELDORA VETTER						
 The books are in 	the care of > 20220 HARNEY ST	<u> </u>	- ELKHORN, NE 6802	22			
	<u>(402)895-3932</u>		Fax No. 🕨				
	n does not have an office or place of business					. ▶ □	
 If this is for a Gro 	oup Return, enter the organization's four digit	Group Exe	emption Number (GEN) If	this is fo	r the whole g	roup, check this	
box 🕨 If it is	s for part of the group, check this box 🕨 🔃	and atta	ch a list with the names and EINs of	all memb	ers the exter	sion is for.	
	dditional 3-month extension of time until		<u>15, 2015 </u> .			•	
5 For calendar y	year, or other tax year beginning	JUL 1	, 2013 , and ending	JUN	30, 2	<u>)14 </u>	
6 If the tax year	entered in line 5 is for less than 12 months, c	heck reas	on: Initial return	Final ı	eturn		
-	in accounting period						
	why you need the extension				<u></u>		
		FILE A	A COMPLETE AND ACCU	<u>JRATE</u>	RETURI	N IS NOT	
AVAILAB	LE AT THIS TIME.						
	tion is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			_	
	e credits. See instructions.			8a	\$	0.	
	tion is for Forms 990-PF, 990-T, 4720, or 6069	-		1			
	made. Include any prior year overpayment all	owed as a	credit and any amount paid				
previously with				8b	\$	116.	
	Subtract line 8b from line 8a. Include your pa	•	h this form, if required, by using				
EFTPS (Electr	onic Federal Tax Payment System). See instru		A har a secondate of the David II a	<u> 8c</u>	\$	0.	
lladar aansti	-		t be completed for Part II o	•			
Under penaities of perj it is true, correct, and a	ury, I declare that I have examined this form, includi complete, and that I am authorized to prepare this fo	ing accomp	anying schedules and statements, and to	the best o	f my knowledg	e and belief,	
	1/1/1/1/1		- Os	-	2/1-	Jane	
Signature 🗡	Title Title		FIT	Date		7213	
,					Form A	R68 (Rev. 1-2014)	

Certified Article Number

7196 9008 9111 2164 9033

SENDERS RECORD

Mayled

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

Department of the Treasury

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.

Internal Revenue Service

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

UV 	!	3	2014	
	$\overline{}$	7	3.7	

■ If you	are filing for an Additional (Not Automatic) 3-Month Ex	xtension, d	complete only Part II (on page 2 of t	nis iorm).	•	
Do not	complete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	ly filed Fo	rm 8868.	
Electro	nic filing (e-file). You can electronically file Form 8868 if	you need a	a 3-month automatic extension of tim	e to file (l	6 months for a	corporation
required	to file Form 990-T), or an additional (not automatic) 3-mo	onth extens	sion of time. You can electronically fil	e Form 8	868 to reques	t an extension
of time t	o file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for T	ransfers .	Associated Wi	th Certain
Persona	l Benefit Contracts, which must be sent to the IRS in paj	per format	(see instructions). For more details o	n the elec	ctronic filing of	this form,
visit ww	w.irs.gov/efile and click on e-file for Chanties & Nonprofit				<u> </u>	
Part	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies nee	eded)		
A corpo	ration required to file Form 990-T and requesting an auto	matic 6-mc	onth extension - check this box and c	omplete		
Part I or	ıly					▶ □
All other	corporations (including 1120-C filers), partnerships, REN	AICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time	
to file in	come tax returns			Enter file	er's identifyin	g number
Type or	Name of exempt organization or other filer, see instru	uctions.		Employe	r identification	number (EIN) or
print	VETTER FOUNDATION			-		-
•	% JACK VETTER				47-076	2483
File by the due date for	No about the state of the same and the same of the B.O. have	see instruc	tions.	Social se	curity number	
filing your	20220 HARNEY STREET					()
return See		oreign add	ress see instructions			
	ELKHORN, NE 68022	oreign add	noos, soo mendonone			
	Indicator, No. 00022					
Enter th	Return code for the return that this application is for (fil	o a conara	te application for each return)			0 4
Line: ur	a Heldin code for the return that this application is for the	e a separa	te application for each return,			0 =
Analiaa		Datum	Application			Return
Applica	don	Return	Application			
Is For	0	Code	Is For		-	Code
	0 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 99		02_	Form 1041-A			08
	20 (individual)	03	Form 4720 (other than individual)			09
Form 99		04	Form 5227			10
	0-T (sec 401(a) or 408(a) trust)	05	Form 6069			
Form 99	0-T (trust other than above)	06	Form 8870		-	12
	ELDORA VETTER					
	pooks are in the care of \triangleright 20220 HARNEY S	TREET	- ELKHORN, NE 6802	42		
	hone No ▶ <u>(402)895-3932</u>		Fax No			
	organization does not have an office or place of busines					
If this	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) If	this is fo	r the whole gr	oup, check this
box 🕨	If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	all memb	ers the extens	ion is for
1 Ir	equest an automatic 3-month (6 months for a corporation	required t	to file Form 990-T) extension of time i	until		
_	FEBRUARY 15, 2015, to file the exemp	t organiza	tion return for the organization name	d above	The extension	ŀ
IS	for the organization's return for					
>	calendar year or					
>	X tax year beginning JUL 1, 2013	, an	d ending <u>JUN 30, 2014</u>			
2 If	he tax year entered in line 1 is for less than 12 months, o	heck reaso	on [Initial return [F	inal retur	'n	
	Change in accounting period					
3a If	his application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069, e	enter the tentative tax, less any			
nc	nrefundable credits See instructions			3a	\$	<u> </u>
b If	his application is for Forms 990-PF, 990-T, 4720, or 6069	enter any	y refundable credits and			
	timated tax payments made. Include any pnor year overp			3b	 	116.
	lance due. Subtract line 3b from line 3a Include your pa			_	1	
	using EFTPS (Electronic Federal Tax Payment System).			3c	s	0.
	. If you are going to make an electronic funds withdrawal					
instructi		,2	- , and . c ccc, ccc . d c			

LHA S23841 12-31-13 For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev 1-2014