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Form **990**

OMB No 1545-0047

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2014 calendar year, or tax year beginning		, 2014, and ending	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Omaha Community Foundation Donor Directed Depository 302 S 36th ST #100 Omaha, NE 68131	D Employer identification number 36-3789990	E Telephone number (402) 342-3458
F Name and address of principal officer Same As C Above		G Gross receipts \$ 71,254,608.	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No,' attach a list (see instructions)	
J Website: www.omahafoundation.org		H(c) Group exemption number ▶	
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation 1991	M State of legal domicile NE	

Part I Summary				
Activities & Governance	1 Briefly describe the organization's mission or most significant activities. <u>Support the Omaha Community Foundation's Mission.</u>			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	21	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	21	
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	0	
	6	Total number of volunteers (estimate if necessary)	0	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.	
7b	Net unrelated business taxable income from Form 990-T, line 34	0.		
Revenue	8	Contributions and grants (Part VIII, line 1h)	50,850,220.	37,762,799.
	9	Program service revenue (Part VIII, line 2g)		
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	229,279.	71,850.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12	Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	51,079,499.	37,834,649.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	39,070,040.	39,851,140.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
Expenses	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	254,315.	200,220.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	39,324,355.	40,051,360.
	19	Revenue less expenses Subtract line 18 from line 12	11,755,144.	-2,216,711.
	20	Total assets (Part X, line 16)	32,457,602.	30,404,730.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	321,813.	405,282.
	22	Net assets or fund balances Subtract line 21 from line 20	32,135,789.	29,999,448.

Part II Signature Block			
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
Sign Here	Signature of officer <i>MELISA GUNDE</i>		Date 11/16/2015
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Non-Paid Preparer		Check <input type="checkbox"/> if self-employed
	Firm's name	Firm's EIN	
	Firm's address	Phone no	
May the IRS discuss this return with the preparer shown above? (see instructions)			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

BAA For Paperwork Reduction Act Notice, see the separate instructions.

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Form 990 (2014)

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:Support the Omaha Community Foundation's Mission.**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

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

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported**4a** (Code _____) (Expenses \$ 39,993,980. including grants of \$ 39,851,140.) (Revenue \$ _____)The sole operational and organizational purpose and activity is to raise gifts and donations from donors and distribute such funds at the direction of the donors to qualified charitable, educational, civil and religious organizations.**4b** (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)**4c** (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)**4d** Other program services (Describe in Schedule O.)

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

4e Total program service expenses **▶** 39,993,980.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i>		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes,' complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O		X

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Form 990 (2014)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a 0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2 a 0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2 b		
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		X
b If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c	X	
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d 10		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10 a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11 a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 b		
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12 b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13 a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13 b		
c Enter the amount of reserves on hand	13 c		
14 a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		

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

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

☒**Section A. Governing Body and Management**

	Yes	No
1 a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	21	
1 b Enter the number of voting members included in line 1a, above, who are independent.	21	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? See Schedule O.	X	
7 b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O.		X

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

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

Section C. Disclosure

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

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

☐ Own website ☐ Another's website ☒ Upon request ☒ Other (explain in Schedule O) See Sch. O

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records. ▶

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

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1 a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Thomas K. Nichting Director	0.5 1	X						0.	0.	0.
(16) Jeff Gordman Director	0.5 0.5	X						0.	0.	0.
(17) Mary Reckmeyer Director	0.5 1	X						0.	0.	0.
(18) Constance M. Ryan Vice Chairman	0.5 1	X		X				0.	0.	0.
(19) John A. Scott Director	0.5 1	X						0.	0.	0.
(20) Todd D. Simon Chairman	2 2	X		X				0.	0.	0.
(21) Jeffrey L. Snyder Director	0.5 1	X						0.	0.	0.
(22) Mark A. Weber Secretary	0.5 1	X		X				0.	0.	0.
(23) Thomas Warren Director	0.5 1	X						0.	0.	0.
(24) Melisa Sunde CFO	10 30			X				0.	122,348.	26,503.
(25) Sara Boyd President & CEO	10 30			X				0.	228,171.	17,080.
1 b Sub-total								0.	350,519.	43,583.
c Total from continuation sheets to Part VII, Section A								0.	24,875.	1,208.
d Total (add lines 1b and 1c)								0.	375,394.	44,791.

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

3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

	Yes	No
3	X	

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes,' complete Schedule J for such individual

4	X	
---	---	--

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person

5		X
---	--	---

Section B. Independent Contractors

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

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

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

Department of the Treasury
Internal Revenue Service

Name of the Organization

Employer Identification number

Omaha Community Foundation

36-3789990

Part VII. Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

[illegible]

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1 a			
	b Membership dues	1 b			
	c Fundraising events	1 c			
	d Related organizations	1 d 37,754.			
	e Government grants (contributions)	1 e 822,980.			
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 36,902,065.			
	g Noncash contributions included in lines 1a-1f	\$ 30,433,532.			
	h Total. Add lines 1a-1f	37,762,799.			
Program Service Revenue	Business Code				
	2 a				
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f				
Other Revenue	3 Investment income (including dividends, interest and other similar amounts)		185,410.		185,410.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6 a Gross rents	(i) Real (ii) Personal			
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other			
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)		-113,560.		-113,560.
	8 a Gross income from fundraising events (not including . \$ of contributions reported on line 1c) See Part IV, line 18	a			
	b Less: direct expenses	b			
	c Net income or (loss) from fundraising events				
	9 a Gross income from gaming activities See Part IV, line 19	a			
	b Less: direct expenses	b			
	c Net income or (loss) from gaming activities				
	10 a Gross sales of inventory, less returns and allowances	a			
	b Less: cost of goods sold	b			
	c Net income or (loss) from sales of inventory				
Miscellaneous Revenue		Business Code			
11 a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d					
12 Total revenue. See instructions		37,834,649.	0.	0.	71,850.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	39,851,140.	39,851,140.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management	142,840.	142,840.		
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	56,798.		56,798.	
g Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	582.		582.	
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a -----				
b -----				
c -----				
d -----				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	40,051,360.	39,993,980.	57,380.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash — non-interest-bearing		1	
	2 Savings and temporary cash investments	18,103,164.	2	11,839,784.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments — publicly traded securities	13,768,974.	11	14,271,017.
	12 Investments — other securities. See Part IV, line 11	546,763.	12	4,266,046.
	13 Investments — program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	38,701.	15	27,883.
16 Total assets. Add lines 1 through 15 (must equal line 34)	32,457,602.	16	30,404,730.	
Liabilities	17 Accounts payable and accrued expenses	261,087.	17	344,556.
	18 Grants payable	60,726.	18	60,726.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	321,813.	26	405,282.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	32,135,789.	27	29,999,448.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	32,135,789.	33	29,999,448.	
34 Total liabilities and net assets/fund balances	32,457,602.	34	30,404,730.	

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Form 990 (2014)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	37,834,649.
2	Total expenses (must equal Part IX, column (A), line 25)	2	40,051,360.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,216,711.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	32,135,789.
5	Net unrealized gains (losses) on investments	5	80,370.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	29,999,448.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

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

BAA

Form 990 (2014)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization **Omaha Community Foundation
Donor Directed Depository**

Employer identification number
36-3789990

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state.
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☒ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e ☐ Check this box if the organization received a written determination from the IRS that is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

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

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2014

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants'.)	32821866.	27650885.	55673342.	50850220.	37762799.	204759112.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3	32821866.	27650885.	55673342.	50850220.	37762799.	204759112.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						130296692.
6 Public support. Subtract line 5 from line 4						74,462,420.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	32821866.	27650885.	55673342.	50850220.	37762799.	204759112.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	296,437.	226,364.	199,979.	232,013.	275,130.	1,229,923.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11 Total support. Add lines 7 through 10						205989035.
12 Gross receipts from related activities, etc. (see instructions)					12	0.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	36.15 %
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	35.28 %
16a 33-1/3% support test – 2014. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33-1/3% support test – 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test – 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test – 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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

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

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11 and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a 33-1/3% support tests – 2014. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33-1/3% support tests – 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.		
3b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.		
3c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
4b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
4c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
5b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI .		
9b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .		
9c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below.		
10b Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

11 Has the organization accepted a gift or contribution from any of the following persons?

a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?

b A family member of a person described in (a) above?

c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in **Part VI**

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year

	Yes	No
1		

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization

	Yes	No
2		

Section C. Type II Supporting Organizations1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)

	Yes	No
1		

Section D. All Type III Supporting Organizations

1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?

	Yes	No
1		

2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s)

	Yes	No
2		

3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in **Part VI** the role the organization's supported organizations played in this regard

	Yes	No
3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):

a ☐ The organization satisfied the Activities Test Complete line 2 belowb ☐ The organization is the parent of each of its supported organizations Complete line 3 belowc ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test Answer (a) and (b) below.

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in **Part VI** identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities

	Yes	No
2a		

b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement

	Yes	No
2b		

3 Parent of Supported Organizations Answer (a) and (b) below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in **Part VI**

	Yes	No
3a		

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in **Part VI** the role played by the organization in this regard

	Yes	No
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year).			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C – Distributable Amount		Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)			

BAA

Schedule A (Form 990 or 990-EZ) 2014

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**Section D – Distributions**

	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E – Distribution Allocations (see instructions)

	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required – see instructions)			
3 Excess distributions carryover, if any, to 2014.			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

BAA

Schedule A (Form 990 or 990-EZ) 2014

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

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

► Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014**Open to Public
Inspection**

Name of the organization

Omaha Community Foundation
Donor Directed Depository

Employer identification number

36-3789990

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

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	818	
2 Aggregate value of contributions to (during year)	37,762,799.	
3 Aggregate value of grants from (during year)	39,851,140.	
4 Aggregate value at end of year	30,404,730.	

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

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

Part II Conservation Easements.

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) Revenue included in Form 990, Part VIII, line 1 ► \$ _____

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

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

a Revenue included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

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

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

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other _____

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

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

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

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

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

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1 c	
1 d	
1 e	
1 f	

2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

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

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

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

a Board designated or quasi-endowment ▶ _____ %

b Permanent endowment ▶ _____ %

c Temporarily restricted endowment ▶ _____ %

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

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

(i) unrelated organizations.

(ii) related organizations

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

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

	Yes	No
3a(i)		
3a(ii)		
3b		

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ 0.

BAA

Schedule D (Form 990) 2014

Part VII Investments – Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	4,266,046.	End of Year Market Value
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	4,266,046.	

Part VIII Investments – Program Related.

N/A

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

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

Part IX Other Assets.

N/A

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

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

Part X Other Liabilities.

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

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

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

See Part XIII ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	37,915,019.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a 80,370.		
	b Donated services and use of facilities	2b		
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d		2e	80,370.
3	Subtract line 2e from line 1		3	37,834,649.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	37,834,649.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	40,051,360.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a		
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	40,051,360.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	40,051,360.

Part XIII Supplemental Information.

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

Part X - FIN 48 Footnote

The foundation accounts for uncertainties in accounting for income taxes using the guidance included in Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) Topic 740, Income Taxes. The Foundation recognizes the effect of income tax positions only if those positions are more likely than not of being sustained. At December 31, 2014, the Foundation had no uncertain tax positions which are accrued.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

Omaha Community Foundation

Employer identification number

36-3789990

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. See Part IV

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) African American Empowerment 105 N. 31st Ave. Ste. 101 Omaha, NE 68131	26-4296811 3		11,100.	0.			Community Improvement, Capacity Bui
(2) Ak-Sar-Ben Scholarship Fund 6910 Pacific St. Ste. 102 Omaha, NE 68106	47-0640295 3		35,970.	0.			Philanthropy, Voluntarism, Grantmak
(3) All Holy Spirit Greek Orthodox 9012 Q St. Omaha, NE 68127	20-4948228 3		21,470.	0.			Religion, Spiritual Development
(4) American Italian Heritage So PO BOX 34036 Omaha, NE 68134	47-0640295 3		15,000.	0.			Community Improvement, Capacity Bui
(5) American Red Cross/Heartland 2912 S. 80th Ave. Omaha, NE 68124	53-0196605 3		11,850.	0.			Public Safety, Disaster Preparedness
(6) Anita Foundation Inc. 900 Victory Park Road Anita, IA 50020	42-1490010 3		6,750.	0.			Community Improvement, Capacity Bui
(7) Archdiocese of Omaha 100 North 62nd St. Omaha, NE 68132	47-0376538 3		341,851.	0.			Religion, Spiritual Development
(8) Arthritis Foundation 600 N. 93rd St. Ste. 206 Omaha, NE 68114	26-4639290 3		26,026.	0.			Disease, Disorders, Medical Discipl

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 8

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

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

TEEA3901L 06/19/14

Schedule I (Form 990) (2014)

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization			Omaha Community Foundation Donor Directed Depository			Employer Identification Number. 36-3738990		
Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)								
(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)Value	(g)Desc	(h)Purpose of Grant or Assistance	
All Saints Episcopal Church,9302 Blondo Street Omaha, NE 68134	47-0399847	501(C)(3)	37,458.32	0			Religion, Spiritual Development	
Allplay Foundation, Inc.,13414 Paul Street Omaha, NE 68154	20-8418481	501(C)(3)	185,082.36	0			Recreation, Sports, Leisure, Athletics	
American Cancer Society,9850 Nicholas Street Suite 200 Omaha, NE 68114	13-1788491	501(C)(3)	11,800.00	0			Medical Research	
American Heart Association,9900 Nicholas St. Suite 200 Omaha, NE 68114	13-5613797	501(C)(3)	17,550.00	0			Disease, Disorders, Medical Disciplines	
Ashland Area Foundation,1442 Silver St Ashland, NE 68003	47-0773235	501(C)(3)	1,350,000.00	0			Community Improvement, Capacity Building	
At Ease USA,PO Box 24465 Omaha, NE 68124	46-1555291	501(C)(3)	7,750.00	0			Human Services	
Audubon Recreation Foundation,1960 190th Street Audubon, IA 50025	26-4730829	501(C)(3)	65,163.98	0			Community Improvement, Capacity Building	
Avenue Scholars Foundation,7101 Mercy Rd Ste 240 Omaha, NE 68106	26-1545078	501(C)(3)	9,000.00	0			Educational Institutions	
B'nai B'rith,c/o Jewish Community Center 333 South 132nd Street Omaha, NE 68154	47-6031041	501(C)(3)	25,250.00	0			Religion, Spiritual Development	
Bellevue University,1000 Galvin Road Bellevue, NE 68005	47-0491571	501(C)(3)	73,600.00	0			Educational Institutions	
Bemis Center For Contemporary Arts,724 S. 12th Street Omaha, NE 68102-3202	47-0653927	501(C)(3)	34,200.00	0			Arts, Culture, Humanities	
Bethany Lutheran Church,4200 North 204th Street Elkhorn, NE 68022	47-0415801	501(C)(3)	6,114.19	0			Religion, Spiritual Development	
Bethlehem House,2301 S 15th St Omaha, NE 68108	33-1066685	501(C)(3)	28,000.00	0			Religion, Spiritual Development	
Big Brothers Big Sisters of the Midlands,10831 Old Mill Road, Suite 400 Omaha, NE 68154	47-0466144	501(C)(3)	44,950.00	0			Youth Development	

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization	Omaha Community Foundation Donor Directed Depository	Employer Identification Number	36-3738990
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Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) F Value	(g) Desc	(h) Purpose of Grant or Assistance
Boston EyePain Foundation, Inc., 629 Hammond St. Suite 205E Chestnut Hills, MA 02467	46-1567980	501(C)(3)	7,000.00	0			Health - General & Rehabilitative
Boys & Girls Clubs of the Midlands, 2610 Hamilton Street Omaha, NE 68131-1640	47-0467350	501(C)(3)	85,600.00	0			Youth Development
Broadway Dreams Foundation Corporation, 8965 Brockham Way Alpharetta, Brownell Talbot School, 400 N. Happy Hollow Blvd. Omaha, NE 68132	26-4771520	501(C)(3)	85,120.00	0			Arts, Culture, Humanities
Buena Vista University, 610 W. 4th Street Office-Institutional Advance. Storm Lake, IA 50588	47-0376595	501(C)(3)	33,250.00	0			Educational Institutions
Calvin Crest Camp Conference and Retreat Center, 2870 County Road 13 Fremont, NE	42-0680404	501(C)(3)	6,600.00	0			Educational Institutions
Caminar, 2600 El Camino Real Suite 200 San Mateo, CA 94403	36-4607814	501(C)(3)	42,383.37	0			Community Improvement, Capacity Building
Camp Fontanelle, United Methodist Conference 9677 County Road 3 Nickerson, NE 68044	94-1639389	501(C)(3)	25,000.00	0			Community Improvement, Capacity Building
Camp Magical Moments Cancer Camp for Kids, Inc., PO Box 12 Swan Valley, ID 83449	47-0553599	501(C)(3)	9,500.00	0			Community Improvement, Capacity Building
Campus Crusade for Christ - CRU, P. O. Box 628222 100 Lakeheart Drive #2200 Orlando, FL	52-2401684	501(C)(3)	11,000.00	0			Recreation, Sports, Leisure, Athletics
Cass County Historical Museum and Society, P. O. Box 254 Griswold, IA 51535	95-6006173	501(C)(3)	7,200.00	0			Religion, Spiritual Development
Catholic Charities, 3300 North 60th Street Omaha, NE 68104	42-1409956	501(C)(3)	8,000.00	0			Community Improvement, Capacity Building
Catholic Charities/San Bernadino, 1450 North D Street San Bernadino, CA 92405	47-0376612	501(C)(3)	136,775.00	0			Human Services
Catholic Relief Services, 228 West Lexington Street P.O. Box 17090 Baltimore, MD 21203-	95-3516461	501(C)(3)	10,000.00	0			Human Services
	13-5563422	501(C)(3)	13,150.00	0			Human Services

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Continuation Sheet for Schedule I (Form 990)

Name of organization. Omaha Community Foundation Donor Directed Depository				Employer Identification Number 36-3738990			
Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)							
(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)Fair Value	(g)Desc	(h)Purpose of Grant or Assistance
CEC Seabee Historical Foundation,P.O. Box 657 Gulfport, MS 39502-0657	58-1998577	501(C)(3)	7,000.00	0			Community Improvement, Capacity Building
Center for Rural Affairs,PO Box 136 Lyons, NE 68038	47-0553823	501(C)(3)	30,000.00	0			Human Services
Center for the Advancement of Self Sufficiency (CASS Incorporated,1406 Southwest 7th Street Child Saving Institute,4545 Dodge Street Omaha, NE 68132	42-1072788	501(C)(3)	7,000.00	0			Educational Institutions
Children's Hospital & Medical Center Foundation,8401 West Dodge Road, #120 Children's Respite Care Center,5321 South 138th St. Omaha, NE 68137	45-0489204	501(C)(3)	12,250.00	0			Human Services Health - General & Rehabilitative
Children's Scholarship Fund,1111 No. 13th St Suite 101 Omaha, NE 68102	47-6105603	501(C)(3)	81,800.00	0			Human Services
Christ Child Society of Omaha,1248 S. 10th Street Omaha, NE 68108	47-0718409	501(C)(3)	63,900.00	0			Educational Institutions
Christ Community Church,404 So. 108th Avenue Treasurer Omaha, NE 68154	47-0822724	501(C)(3)	29,500.00	0			Human Services
Christ the King Church,654 So. 86th Street Omaha, NE 68114	47-0376574	501(C)(3)	10,100.00	0			Religion, Spiritual Development
City of Atlantic,P. O. Box 371 Atlantic, IA 50022	47-0399849	501(C)(3)	10,600.00	0			Religion, Spiritual Development Community Improvement, Capacity Building
City of Audubon,410 North Park Place Audubon, IA 50025	42-6004251	501(C)(3)	7,250.00	0			Community Improvement, Capacity Building
City of Clarinda,1140 East Main Clarinda, IA 51632	42-6004256	501(C)(3)	34,864.00	0			Community Improvement, Capacity Building
City of Defiance,P. O. Box 312 Defiance, IA 51527	42-6004378	501(C)(3)	8,990.00	0			Community Improvement, Capacity Building
	42-6037406	501(C)(3)	6,000.00	0			Community Improvement, Capacity Building

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Continuation Sheet for Schedule I (Form 990)

Name of organization	Omaha Community Foundation Donor Directed Depository	Employer Identification Number	36-3738990
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Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Valued	(g) Desc	(h) Purpose of Grant or Assistance
City of Denison, 111 North Main Denison, IA 51442	42-6004497	501(C)(3)	10,639.00	0			Community Improvement, Capacity Building
City of Dunlap, 716 Iowa Avenue Dunlap, IA 51529	42-6004608	501(C)(3)	8,000.00	0			Community Improvement, Capacity Building
City of Elk Horn, P. O. Box 216 Elk Horn, IA 51531	42-6004634	501(C)(3)	25,000.00	0			Community Improvement, Capacity Building
City of Elliott, 310 Main Avenue Elliott, IA 51532	42-6004635	501(C)(3)	7,880.00	0			Community Improvement, Capacity Building
City of Exira, P. O. Box 187 Exira, IA 50076	42-6004652	501(C)(3)	8,041.09	0			Community Improvement, Capacity Building
City of Glenwood, 5 North Vine Street Glenwood, IA 51534	42-6004707	501(C)(3)	8,000.00	0			Community Improvement, Capacity Building
City of Hamburg, 1201 Main Street Hamburg, IA 51640	42-6004749	501(C)(3)	7,850.00	0			Community Improvement, Capacity Building
City of Hastings, P. O. Box 703 Hastings, IA 51540	42-0524001	501(C)(3)	6,000.00	0			Community Improvement, Capacity Building
City of Magnolia, 519 First Street Magnolia, IA 51550	42-0759001	501(C)(3)	15,000.00	0			Community Improvement, Capacity Building
City of Malvern, P. O. Box 550 Malvern, IA 51551	42-6004901	501(C)(3)	15,000.00	0			Community Improvement, Capacity Building
City of Manilla, P. O. Box 398 Manilla, IA 51454	42-6004916	501(C)(3)	7,500.00	0			Community Improvement, Capacity Building
City of Massena, P. O. Box 109 Massena, IA 50853	42-6022717	501(C)(3)	11,405.09	0			Community Improvement, Capacity Building
City of Missouri Valley, 223 East Erie Street Missouri Valley, IA 51555	42-6004970	501(C)(3)	18,266.10	0			Community Improvement, Capacity Building
City of Pacific Junction, P. O. Box 337 Pacific Junction, IA 51561	42-6025900	501(C)(3)	6,000.00	0			Community Improvement, Capacity Building

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Continuation Sheet for Schedule I (Form 990)

Name of organization: Omaha Community Foundation Donor Directed Depository Employer Identification Number: 36-3738990

Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) FV Value	(g) Desc	(h) Purpose of Grant or Assistance
City of Panama, 111 Main Panama, IA 51562	42-1234670	501(C)(3)	15,500.00	0			Community Improvement, Capacity Building
City of Riverton, P. O. Box 147 803 Summer Avenue Riverton, IA 51650	42-6022677	501(C)(3)	9,500.00	0			Community Improvement, Capacity Building
City of Stanton, P. O. Box 189 Stanton, IA 51573	42-1370201	501(C)(3)	15,000.00	0			Community Improvement, Capacity Building
City of Tabor, P. O. Box 309 Tabor, IA 51653	42-0336002	501(C)(3)	12,566.09	0			Community Improvement, Capacity Building
City of Woodbine, 517 Walker Street Woodbine, IA 51579	42-6005386	501(C)(3)	7,000.00	0			Community Improvement, Capacity Building
Clarinda Community Nursery School, 223 West Washington Clarinda, IA 51632	42-1029157	501(C)(3)	6,000.00	0			Educational Institutions
Clarinda Foundation, Inc., 114 East Washington Street Clarinda, IA 51632	42-1285187	501(C)(3)	14,797.48	0			Community Improvement, Capacity Building
College of Saint Mary, 7000 Mercy Road Omaha, NE 68106	47-0424785	501(C)(3)	13,500.00	0			Educational Institutions
Colorado Mountain College Foundation Inc., Children's Mini College 1402 Blake Avenue Community Alliance Inc., 4001 Leavenworth Street Omaha, NE 68105	74-2393418	501(C)(3)	20,000.00	0			Educational Institutions
Community Information Trust, c/o Heritage Services 10050 Regency Circle, Suite 101 Compassion International, P.O. Box 65000 12290 Voyager Parkway Colorado Springs, CO Completely Kids, 2566 St. Mary's Avenue Omaha, NE 68105	47-0637493	501(C)(3)	34,500.00	0			Human Services
	46-3502113	501(C)(3)	3,000,000.00	0			Community Improvement, Capacity Building
	36-2423707	501(C)(3)	5,090.00	0			Human Services
	27-5111197	501(C)(3)	90,300.00	0			Youth Development
Concerned, Inc., P. O. Box 47 Harlan, IA 51537	42-0994874	501(C)(3)	8,000.00	0			Human Services

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Continuation Sheet for Schedule I (Form 990)

Name of organization	Omaha Community Foundation Donor Directed Depository	Employer Identification Number	36-3738990
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Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Fair Value	(g) Description	(h) Purpose of Grant or Assistance
Concordia Lutheran Schools of Omaha, Inc., 14258 W Maple Rd Omaha, NE 68164	91-1759397	501(C)(3)	5,100.00	0			Educational Institutions
Concordia University, 800 No. Columbia Avenue Seward, NE 68434	47-0378777	501(C)(3)	167,500.00	0			Educational Institutions
Congregation of the Humility of Mary, 820 West Central Park Avenue Davenport, IA 52804-1900	42-0681059	501(C)(3)	19,937.05	0			Religion, Spiritual Development
Countryside Community Church, 8787 Pacific Street Omaha, NE 68114	47-6000646	501(C)(3)	123,872.48	0			Religion, Spiritual Development
Covenant Presbyterian Church, 15002 Blondo Street Omaha, NE 68116	47-0376536	501(C)(3)	10,000.00	0			Religion, Spiritual Development
Crawford County Board of Supervisors, 1202 Broadway Denison, IA 51442	42-6004496	501(C)(3)	25,000.00	0			Community Improvement, Capacity Building
Creighton Preparatory School, 7400 Western Avenue Omaha, NE 68114	47-0438012	501(C)(3)	91,350.00	0			Educational Institutions
Creighton University, 2500 California Plaza Office of Development Omaha, NE 68178	47-0376583	501(C)(3)	2,124,725.00	0			Educational Institutions
Cross Catholic Outreach, 370 W. Camino Gardens Blvd P.O. Box 273908 Boca Raton, FL	65-1156061	501(C)(3)	5,800.00	0			Human Services
Crossroads Connections Inc., 851 N. 74th St. Omaha, NE 68114	51-0571493	501(C)(3)	13,000.00	0			Religion, Spiritual Development
Crossroads Ministry of Estes Park Inc., 851 Dry Gulch Road P.O. Box 3616 Estes Park, CO	74-2465229	501(C)(3)	20,000.00	0			Human Services
CUES - Christian Urban Education Service, 2207 Wirt Street Omaha, NE 68110-2055	47-0818922	501(C)(3)	202,000.00	0			Educational Institutions
Desert Community Foundation, 75-105 Merle Dr., Ste 300 Palm Desert, CA 92211	95-4725924	501(C)(3)	17,500.00	0			Philanthropy, Voluntarism, Grantmaking
Diocese of Des Moines, 601 Grand Avenue Des Moines, IA 50309	42-0680255	501(C)(3)	7,600.00	0			Religion, Spiritual Development

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Continuation Sheet for Schedule I (Form 990)

Name of organization		Omaha Community Foundation Donor Directed Depository		Employer Identification Number		36-3738990	
Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)							
(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Fair Value	(g) Description	(h) Purpose of Grant or Assistance
Donors Trust, c/o Heritage Services 10050							Community Improvement,
Regency Circle, Ste 101 Omaha, NE 68114	26-2515785	501(C)(3)	8,000.00	0			Capacity Building
Dowd Chapel at Boys Town, 13943 Dowd Drive							
Boys Town, NE 68010	47-0376606	501(C)(3)	8,000.00	0			Religion, Spiritual Development
Duchesne Academy, 3601 Burt Street Omaha, NE 68131	47-0376614	501(C)(3)	104,141.95	0			Educational Institutions
Dundee Presbyterian Church, 5312 Underwood Avenue Omaha, NE 68132	47-0378988	501(C)(3)	41,169.00	0			Religion, Spiritual Development
Durham Museum, 801 S. 10th Street Omaha, NE 68108-3299	47-0556061	501(C)(3)	38,734.95	0			Arts, Culture, Humanities
Eagles Nest Worship Center - Pathway of Light Association, 5775 Sorensen Parkway P.O. Box East Mills Community School District, 58962	23-7226023	501(C)(3)	10,900.00	0			Religion, Spiritual Development
380th Street Hastings, IA 51540	45-0635563	501(C)(3)	7,099.00	0			Educational Institutions
Eastern Mennonite School, 801 Parkwood Dr Harrisonburg, VA 22802	54-1194342	501(C)(3)	10,000.00	0			Educational Institutions
Educate Uganda, 1225 N 136th Ave Omaha, NE 68154-5265	20-8468493	501(C)(3)	237,500.00	0			International, Foreign Affairs & National Security
Elkhorn Hills United Methodist Church, 20227 Veterans Drive Treasurer Elkhorn, NE 68022	47-0678208	501(C)(3)	55,000.00	0			Religion, Spiritual Development
Elkhorn Public Schools Foundation, 20214 Veterans Drive Suite 400 Elkhorn, NE 68022	36-3226778	501(C)(3)	5,100.00	0			Educational Institutions
Essential Pregnancy Services (EPS), 6220 Maple Street Omaha, NE 68104	23-7300162	501(C)(3)	11,950.00	0			Health - General & Rehabilitative
Farragut Fire and Rescue Association, 503 Hartford Avenue Farragut, IA 51639	04-3745806	501(C)(3)	10,000.00	0			Public Safety, Disaster Preparedness & Relief
Father Flanagan's Boys Home/Boys Town, 14100 Crawford Street P. O. Box 7000 Boys Town, NE	47-0376606	501(C)(3)	11,950.00	0			Human Services

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Continuation Sheet for Schedule I (Form 990)

Name of organization. Omaha Community Foundation Donor Directed Depository Employer Identification Number 36-3738990

Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Valuation	(g) Description	(h) Purpose of Grant or Assistance
Fellowship of Christian Athletes, P. O. Box 540181 Omaha, NE 68154	44-0610626	501(C)(3)	5,700.00	0			Youth Development
Film Streams, P.O. Box 8485 Omaha, NE 68108-4701	20-2549448	501(C)(3)	25,545.00	0			Arts, Culture, Humanities
First Central Congregational Church, 421 South 36th Street Omaha, NE 68131	47-0384059	501(C)(3)	36,832.00	0			Religion, Spiritual Development
First Christian Church, 6630 Dodge St Omaha, NE 68132	47-0430499	501(C)(3)	7,200.00	0			Religion, Spiritual Development
First Presbyterian Church, 255 Harding Road Finance Manager Red Bank, NJ 07701	21-0647706	501(C)(3)	15,000.00	0			Religion, Spiritual Development
First Southern Baptist Church, 5230 North Scottsdale Road Scottsdale, AZ 85253	86-0143399	501(C)(3)	11,000.00	0			Religion, Spiritual Development
First United Methodist Church, 7020 Cass Street Omaha, NE 68132	47-0408262	501(C)(3)	343,046.00	0			Religion, Spiritual Development
Fontenelle Forest, 1111 N. Bellevue Blvd. Bellevue, NE 68005-4000	47-6026109	501(C)(3)	60,450.00	0			Protection, Beautification
Food Bank for the Heartland, 10525 J Street Omaha, NE 68127	47-0637701	501(C)(3)	23,375.00	0			Agriculture, Food, Nutrition
Food for the Poor, 6401 Lyons Road P.O. Box 979004 Coconut Creek, FL 33097-9004	59-2174510	501(C)(3)	6,500.00	0			International, Foreign Affairs & National Security
Fremont County Board of Supervisors, 506 Filmore Street Fremont County Courthouse Fremont Evangelical Free Church, 2050 N. Lincoln Avenue Fremont, NE 68025	42-6005210	501(C)(3)	25,489.00	0			Public Safety, Disaster Preparedness & Relief
Friends of KIOS Public Radio, 3230 Burt Street Omaha, NE 68131	47-0704061	501(C)(3)	6,150.00	0			Religion, Spiritual Development
Friends of the Univ. of Nebraska State Museum, Natural History 307 Morrill Hall, UNL	47-0734252	501(C)(3)	11,615.00	0			Arts, Culture, Humanities
	47-0658163	501(C)(3)	5,100.00	0			Arts, Culture, Humanities

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Continuation Sheet for Schedule I (Form 990)

Name of organization		Omaha Community Foundation Donor Directed Depository		Employer Identification Number		36-3738990	
Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)							
(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Valuation	(g) Description	(h) Purpose of Grant or Assistance
GESU Housing, Inc., 5008 1/2 B Dodge Street Omaha, NE 68132	04-3617019	501(C)(3)	8,217.00	0			Housing, Shelter
Girls Incorporated of Omaha, 2811 N. 45th Street Omaha, NE 68104-4518	47-0562184	501(C)(3)	12,500.00	0			Youth Development Public Safety, Disaster Preparedness & Relief
Glen Haven Area Volunteer Fire Department, PO Box 53 Glen Haven, CO 80532	84-1013850	501(C)(3)	40,000.00	0			Arts, Culture, Humanities
Glimmerglass Opera Theatre, Inc., PO Box 191 Cooperstown, NY 13326	16-1053970	501(C)(3)	20,000.00	0			Religion, Spiritual Development
Good News Jail & Prison Ministry, 710 S. 17th Street Omaha, NE 68102	54-0703077	501(C)(3)	41,282.00	0			Educational Institutions Community Improvement, Capacity Building Health - General & Rehabilitative
Grace University, 1311 So. 9th Street Omaha, NE 68108-3629	47-0384159	501(C)(3)	5,100.00	0			Educational Institutions
Grand Island Community Foundation, 1811 W 2nd St. Suite 480 Grand Island, NE 68803-5473	47-6032570	501(C)(3)	16,500.00	0			Community Improvement, Capacity Building Health - General & Rehabilitative
Grape Hospital Foundation, 2959 US Highway 275 Hamburg, IA 51640-5052	42-1335348	501(C)(3)	10,000.00	0			Educational Institutions
Greater Omaha Alliance for Business Ethics, Creighton University 2500 California Habitat for Humanity of Omaha, 1701 N 24th St Omaha, NE 68110-2302	74-3244900	501(C)(3)	7,950.00	0			Housing, Shelter Community Improvement, Capacity Building
Harrison County Board of Supervisors, 111 North 2nd Avenue Logan, IA 51546	36-3283625	501(C)(3)	94,150.00	0			Animal Related
Harrison County Humane Society, 106 North 5th Avenue P O Box 174 Logan, IA 51546	42-6004889	501(C)(3)	16,389.00	0			Educational Institutions
Hastings College, 710 N. Turner Hastings, NE 68901	61-1485636	501(C)(3)	15,000.00	0			Human Services
Headwaters Foundation for Justice, 2801 21st Ave. S Ste 131 Minneapolis, MN 55407	47-0376525	501(C)(3)	5,550.00	0			
	36-3359386	501(C)(3)	11,500.00	0			

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Continuation Sheet for Schedule I (Form 990)

Name of organization: Omaha Community Foundation Donor Directed Depository Employer Identification Number 36-3738990

Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) FV/Unat	(g) Desc	(h) Purpose of Grant or Assistance
Health Center Association of Nebraska, 3929 South 147th St. Altech Plaza, Suite 100A	21-5731401	501(C)(3)	1,429,133.00	0			Health - General & Rehabilitative
Heart Ministry Center, 2222 Binney Street Omaha, NE 68110	81-0614816	501(C)(3)	26,550.00	0			Agriculture, Food, Nutrition
Heartland Family Service, 2101 So. 42nd Street Omaha, NE 68105	47-0390618	501(C)(3)	60,200.00	0			Human Services
Heisey Collectors of America, 169 W Church Street Endowment Fund Newark, OH 43055	23-7178364	501(C)(3)	15,000.00	0			Community Improvement, Capacity Building
HELP Adult Services, 1941 S. 42nd St., Ste 200 Presbyterian Outreach Inc. Omaha, NE 68105	36-3412688	501(C)(3)	10,000.00	0			Health - General & Rehabilitative
Heritage Services, 10050 Regency Cir Ste 101 Omaha, NE 68114	47-0731254	501(C)(3)	90,000.00	0			Human Services
Hillcrest Evangelical Free Church, 2433 Progressive Road Seward, NE 68434	47-0655477	501(C)(3)	15,000.00	0			Religion, Spiritual Development
Holy Family Shrine, P.O. Box 507 Gretna, NE 68028	47-0794158	501(C)(3)	12,100.00	0			Religion, Spiritual Development
Holy Savior Lutheran Church LCMS, 4710 N 10th St Lincoln, NE 68521	47-0760731	501(C)(3)	102,000.00	0			Religion, Spiritual Development
Hope Center, Inc., 2200 N. 20th Street Omaha, NE 68110-2202	47-0826512	501(C)(3)	32,250.00	0			Youth Development
Hospice House - The Josie Harper Residence, d/b/a Harbor House 7415 Cedar Hospital Foundation of Crawford County, 100 Medical Parkway Denison, IA 51442	36-4003095	501(C)(3)	6,750.00	0			Human Services
Inclusive Communities, 6001 Dodge St Room 122 Omaha, NE 68182-0868	42-1402336	501(C)(3)	30,000.00	0			Health - General & Rehabilitative
inCommon Community Development/Mosaic Community Development, P.O. Box 3451	20-3290755	501(C)(3)	8,000.00	0			Civil Rights, Social Action, Advocacy
	47-0842143	501(C)(3)	16,100.00	0			Human Services

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Continuation Sheet for Schedule I (Form 990)

Name of organization		Omaha Community Foundation Donor Directed Depository		Employer Identification Number: 36-3738990	
Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)					
(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Value of (g) Description of (h) Purpose of Grant or Assistance
Institute for Priestly Formation, 2500 California Plaza c/o Creighton University Omaha, NE	52-1907182	501(C)(3)	18,200.00	0	Religion, Spiritual Development
Iowa State University Foundation, 2505 University Blvd. Ames, IA 50010-8644	42-1143702	501(C)(3)	10,808.30	0	Educational Institutions
Iowa Western Community College Foundation, 2700 College Road, Box 4-C Council Jesuit Academy, 2311 No. 22nd Street Omaha, NE 68110	42-1224333	501(C)(3)	18,000.00	0	Educational Institutions
Jewish Federation of Omaha, 333 S. 132nd Street Omaha, NE 68154	47-0792128	501(C)(3)	37,700.00	0	Educational Institutions
Jewish Federation of Omaha Foundation, 333 S 132nd St. Omaha, NE 68154	47-0384659	501(C)(3)	25,825.00	0	Philanthropy, Voluntarism, Grantmaking
Joslyn Art Museum, 2200 Dodge Street Omaha, NE 68102-1292	20-1123519	501(C)(3)	10,000.00	0	Philanthropy, Voluntarism, Grantmaking
Joy to the World Foundation, 5550 Tech Center Dr Suite 305 Colorado Springs, CO 80919	47-0384577	501(C)(3)	69,290.00	0	Arts, Culture, Humanities
Justice for Our Neighbors, 2414 E Street Omaha, NE 68107	72-1551621	501(C)(3)	31,300.00	0	International, Foreign Affairs & National Security
Juvenile Diabetes Research Foundation, 9202 West Dodge Road, Ste 304 JDRF International KANEKO, 1111 Jones Street Jun Kaneko Museum Omaha, NE 68102	74-3195841	501(C)(3)	6,500.00	0	Human Services
Kevin O'Connor Scholarship Fund, Inc., 444 Regency Parkway Dr Suite 310 Omaha, NE	23-1907729	501(C)(3)	19,400.00	0	Disease, Disorders, Medical Disciplines
King of Kings Lutheran Church, 11615 "I" Street Omaha, NE 68137	36-4261067	501(C)(3)	5,800.00	0	Arts, Culture, Humanities
Knights of Ak-Sar-Ben Foundation, 6910 Pacific St Ste 102 Omaha, NE 68106	47-6023591	501(C)(3)	6,475.00	0	Educational Institutions
	47-0520429	501(C)(3)	17,500.00	0	Religion, Spiritual Development
	47-0447496	501(C)(3)	14,776.00	0	Philanthropy, Voluntarism, Grantmaking

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Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation Donor Directed Depository Employer Identification Number 36-3738990

Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Valuation	(g) Desc	(h) Purpose of Grant or Assistance
Kountze Memorial Lutheran Church, 2650 Farnam Street Omaha, NE 68131	47-0379757	501(C)(3)	46,322.65	0			Religion, Spiritual Development
KVSS - Spirit Catholic Radio, 13326 A Street VSS	91-1857425	501(C)(3)	29,954.15	0			Religion, Spiritual Development
Catholic Communications Omaha, NE 68144	87-0692904	501(C)(3)	6,000.00	0			Public Safety, Disaster Preparedness & Relief
Lewis First Responders, 62697 577th Street Lewis, IA 51544	23-7088203	501(C)(3)	11,600.00	0			Religion, Spiritual Development
Lifegate Church, 15555 West Dodge Road Omaha, NE 68154	47-0458128	501(C)(3)	6,750.00	0			Philanthropy, Voluntarism, Grantmaking
Lincoln Community Foundation, 215 Centennial Mall South Suite 100 Lincoln, NE 68508-1813	41-2139999	501(C)(3)	20,000.00	0			Religion, Spiritual Development
Living Water Christian Center, P.O. Box 1305 Sunrise Beach, MO 65079	04-3752590	501(C)(3)	7,000.00	0			Arts, Culture, Humanities
Love's Jazz & Arts Center, 2510 North 24th St. Omaha, NE 68110	23-7267972	501(C)(3)	19,100.00	0			Human Services
Lutheran Family Services of Nebraska, 124 South 24th Street Suite 230 Omaha, NE 68102	41-0849152	501(C)(3)	25,000.00	0			Religion, Spiritual Development
Lutheran High School, 305 5th St. NE Mayer, MN 55360	41-0693962	501(C)(3)	6,100.00	0			Educational Institutions
Macalester College, 1600 Grand Ave St. Paul, MN 55105	47-0491332	501(C)(3)	7,050.00	0			Educational Institutions
Madonna School, 6402 N 71st Plz Omaha, NE 68104-4674	05-0664529	501(C)(3)	41,358.88	0			Educational Institutions
Marian High School, 7400 Military Avenue Omaha, NE 68134-3351	47-0490634	501(C)(3)	9,600.00	0			Religion, Spiritual Development
Mary Our Queen Church, 3535 So. 119th Street Omaha, NE 68144	46-2333204	501(C)(3)	10,000.00	0			Human Services
Mater Filius of Nebraska, Inc., c/o Stacey Floersch 15725 California St. Omaha, NE 68118							

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Continuation Sheet for Schedule I (Form 990)

Name of organization		Omaha Community Foundation Donor Directed Depository		Employer Identification Number		36-3738990	
Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)							
(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Fair Value	(g) Description	(h) Purpose of Grant or Assistance
Mercy High School, 1501 S. 48th Street Omaha, NE 68106	47-0424786	501(C)(3)	12,000.00	0		Educational Institutions	Educational Institutions
Merrymakers Association, 12020 Shamrock Plaza Ste 200 Omaha, NE 68154	47-0692363	501(C)(3)	10,500.00	0		Health - General & Rehabilitative	Health - General & Rehabilitative
Metropolitan Area Continuum of Care for the Homeless, 6001 Dodge St. CEC 117 MACCH Metropolitan Community College Foundation, P.O. Box 3777 Omaha, NE 68103-0777	11-3788955	501(C)(3)	10,000.00	0		Human Services	Human Services
Mid-America Council, Boy Scouts of America, 12401 West Maple Road Omaha, NE 68104	47-0596504	501(C)(3)	4,007,700.00	0		Educational Institutions	Educational Institutions
Mills County Board of Supervisors, 418 Sharp Street Glenwood, IA 51534	47-0376545	501(C)(3)	69,544.00	0		Youth Development	Youth Development
Minneapolis College of Art and Design, 2501 Stevens Avenue Minneapolis, MN 55404	42-6004708	501(C)(3)	39,740.00	0		Community Improvement, Capacity Building	Community Improvement, Capacity Building
Montgomery County Agricultural Society, 1343 US Highway 34 Emerson, IA 51533	41-1607453	501(C)(3)	15,000.00	0		Arts, Culture, Humanities	Arts, Culture, Humanities
Montgomery County Family YMCA, 101 East Cherry Street Red Oak, IA 51566	45-5293326	501(C)(3)	15,000.00	0		Community Improvement, Capacity Building	Community Improvement, Capacity Building
Mount Michael Benedictine School, 22520 Mount Michael Road Elkhorn, NE 68022-3400	42-1433436	501(C)(3)	18,000.00	0		Educational Institutions	Educational Institutions
Mount View Presbyterian Church, 5308 Hartman Avenue Omaha, NE 68104	30-0299031	501(C)(3)	6,110.00	0		Religion, Spiritual Development	Religion, Spiritual Development
Museum of Danish America, Danish Immigrant Museum 2212 Washington St Elk Horn, IA 51530	47-0421455	501(C)(3)	11,900.00	0		Arts, Culture, Humanities	Arts, Culture, Humanities
Museum of Nebraska Art, 2401 Central Avenue Kearney, NE 68847	42-1204613	501(C)(3)	5,100.00	0		Arts, Culture, Humanities	Arts, Culture, Humanities
Music Academy of the West, 1070 Fairway Road Santa Barbara, CA 93108-2899	47-0608588	501(C)(3)	7,575.00	0		Arts, Culture, Humanities	Arts, Culture, Humanities
	95-1525814	501(C)(3)	52,500.00	0		Arts, Culture, Humanities	Arts, Culture, Humanities

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Continuation Sheet for Schedule I (Form 990)

Name of organization	Omaha Community Foundation Donor Directed Depository	Employer Identification Number	36-3738990
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Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) FValuat	(g) Desc	(h) Purpose of Grant or Assistance
Music in Catholic Schools, 3300 N. 60th St. CSO, Mercy Hall Omaha, NE 68104-3402	47-0618242	501(C)(3)	6,600.00	0			Educational Institutions
Nature Conservancy, 1007 Leavenworth St. Nebraska Field Office Omaha, NE 68102	53-0242652	501(C)(3)	17,250.00	0			Environmental Quality Protection, Beautification
Navigators, P. O. Box 6079 Albert Lea, MN 56007-6679	84-6007896	501(C)(3)	11,700.00	0			Religion, Spiritual Development
Nebraska Advanced Manufacturing Coalition, 1299 Farnam St., Suite 530 c/o Nebraska Appleseed Center for Law in the Public Interest, 941 O Street Suite 920 Lincoln, Nebraska Children and Families Foundation, 215 Centennial Mall South Suite 200 Lincoln, NE	20-5544866	501(C)(3)	6,500.00	0			Community Improvement, Capacity Building Civil Rights, Social Action, Advocacy
Nebraska Friends of Foster Children Foundation, P. O. Box 541034 Omaha, NE	47-0798343	501(C)(3)	58,300.00	0			Human Services
Nebraska Humane Society, 8929 Fort Street Omaha, NE 68134	91-1829974	501(C)(3)	708,000.00	0			Human Services
Nebraska Humanities Council, 215 Centennial Mall S. Suite 330 Lincoln, NE 68508-1836	36-3926272	501(C)(3)	13,850.00	0			Animal Related
Nebraska Lutheran Outdoor Ministries, 27416 Ranch Road Carol Joy Holling Camp Ashland, NE	47-0378997	501(C)(3)	5,250.00	0			Arts, Culture, Humanities
Nebraska Medical Center - Nebraska Medicine, 987421 Nebraska Medical Center	23-7359778	501(C)(3)	5,500.00	0			Religion, Spiritual Development
Nebraska Methodist Hospital Foundation, 8401 W. Dodge Road, #225 Omaha, NE 68114	47-0488319	501(C)(3)	26,500.00	0			Health - General & Rehabilitative
Nebraska Shakespeare Festival, Fine Arts Dept 2500 California Plaza Omaha, NE 68178	91-1858433	501(C)(3)	47,633.95	0			Health - General & Rehabilitative
Nebraska United Methodist Foundation, 100 W. Fletcher Avenue Suite 100 Lincoln, NE 68521	47-0595345	501(C)(3)	30,500.00	0			Arts, Culture, Humanities
	47-0699092	501(C)(3)	22,200.00	0			Religion, Spiritual Development
	47-0844886	501(C)(3)	8,000.00	0			

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Continuation Sheet for Schedule I (Form 990)

Name of organization				Omaha Community Foundation Donor Directed Depository				Employer Identification Number 36-3738990			
Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)											
(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)FValue	(g)Desc	(h)Purpose of Grant or Assistance				
Nebraska Wesleyan University,5000 Saint Paul Avenue Lincoln, NE 68504-2794	47-0376524	501(C)(3)	7,000.00	0		Educational Institutions					
Nebraska Writers Collective,9712 N 34th St. Omaha, NE 68112	20-8109537	501(C)(3)	7,100.00	0		Arts, Culture, Humanities					
Nebraskans for Civic Reform,1327 H St Ste 102 Lincoln, NE 68508	27-2204391	501(C)(3)	28,500.00	0		Civil Rights, Social Action, Advocacy					
NET Foundation for Television,Bridget Robbins c/o Stefanie Norton-Lloyd 1800 North 33rd New Tribes Mission Inc.,1000 E 1st St Sanford, FL 32771	23-7122088	501(C)(3)	20,460.00	0		Arts, Culture, Humanities					
Nishna Productions, Inc.,P. O. Box 70 Shenandoah, IA 51601	39-6024926	501(C)(3)	18,500.00	0		Community Improvement, Capacity Building					
Nodaway Valley Free Clinic,200 West Willow Street Clarinda, IA 51632	42-1025042	501(C)(3)	5,759.00	0		Human Services					
North Lawndale College Preparatory Charter High School,1616 S Spaulding Ave P.O. Box Northeast Community College Foundation,PO Box 469 Norfolk, NE 68702	35-2165957	501(C)(3)	8,573.00	0		Health - General & Rehabilitative					
NorthStar Foundation,4242 N 49th St. Omaha, NE 68104	36-4229548	501(C)(3)	28,000.00	0		Educational Institutions					
Northwest Hills United Church of Christ,9334 Fort Street Financial Secretary Omaha, NE Omaha Botanical Center Inc. - Lauritzen Gardens,100 Bancroft St. Omaha, NE 68108-	51-0145185	501(C)(3)	50,000.00	0		Educational Institutions					
Omaha Children's Museum,500 South 20th Street Omaha, NE 68102	26-0494022	501(C)(3)	11,250.00	0		Youth Development					
Omaha Community Playhouse,6915 Cass Street Omaha, NE 68132-2696	47-6027830	501(C)(3)	25,300.00	0		Religion, Spiritual Development					
	47-0659701	501(C)(3)	849,150.00	0		Environmental Quality Protection, Beautification					
	47-0594056	501(C)(3)	8,300.00	0		Arts, Culture, Humanities					
	47-0399856	501(C)(3)	95,950.00	0		Arts, Culture, Humanities					

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Continuation Sheet for Schedule I (Form 990)

Name of organization	Omaha Community Foundation Donor Directed Depository	Employer Identification Number	36-3738990
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Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Fair Value	(g) Description	(h) Purpose of Grant or Assistance
Omaha Community Playhouse Foundation, 6915 Cass St Omaha, NE 68132	47-0700795	501(C)(3)	20,500.00	0			Arts, Culture, Humanities
Omaha Conservatory of Music, 3504 S. 108th St. Omaha, NE 68144	47-0834657	501(C)(3)	12,800.00	0			Arts, Culture, Humanities
Omaha Crime Stoppers, P. O. Box 126 Crime Stoppers Program Inc. Omaha, NE 68101	47-0648850	501(C)(3)	100,225.00	0			Crime, Legal Related
Omaha Equestrian Foundation, 1004 Farnam St. Suite 400 Omaha, NE 68102	27-3520778	501(C)(3)	11,200.00	0			Animal Related
Omaha Multi-Sport Complex, 1004 Farnam St., Suite 400 Omaha, NE 68102	45-5587726	501(C)(3)	25,000.00	0			Recreation, Sports, Leisure, Athletics
Omaha Performing Arts Society, 1200 Douglas Street Holland Performing Arts Center Omaha, Omaha Police Foundation, c/o Vic Gutman & Associates P.O. Box 31134 Omaha, NE 68131- Omaha Public Library Foundation, 215 South 15th Street Omaha, NE 68102	47-0832480	501(C)(3)	249,600.00	0			Arts, Culture, Humanities
Omaha Schools Foundation, 3215 Cumming Street Omaha, NE 68131-2024	47-0843276	501(C)(3)	5,500.00	0			Civil Rights, Social Action, Advocacy
Omaha Street School, 3223 No. 45th Street Omaha, NE 68104	36-3411575	501(C)(3)	21,950.00	0			Educational Institutions
Omaha Symphony Association, 1905 Harney St Suite 400 Omaha, NE 68102-2318	36-3301526	501(C)(3)	126,000.00	0			Educational Institutions
Omaha Theater Company/Rose Theater, 2001 Farnam Street Omaha, NE 68102	47-0811597	501(C)(3)	9,625.00	0			Educational Institutions
Omaha Zoo Foundation, 3701 So. 10th Street Omaha, NE 68107	47-6039304	501(C)(3)	244,800.00	0			Arts, Culture, Humanities
Open Door Mission (Rescue Mission), P.O. Box 8340 2828 North 23rd St. East Omaha, NE	47-0494912	501(C)(3)	73,700.00	0			Arts, Culture, Humanities
	36-3297716	501(C)(3)	185,450.00	0			Animal Related
	47-0411375	501(C)(3)	67,320.00	0			Human Services

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Continuation Sheet for Schedule I (Form 990)

Name of organization			Omaha Community Foundation Donor Directed Depository			Employer Identification Number		36-3738990	
Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)									
(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)Fair Value	(g)Desc	(h)Purpose of Grant or Assistance		
OpenSky Policy Institute,1201 O St Ste 10 Lincoln, NE 68508	45-3327969	501(C)(3)	11,100.00	0			Public, Society Benefit		
Opera Omaha,1850 Farnam St Omaha, NE 68102	47-6032795	501(C)(3)	54,650.00	0			Arts, Culture, Humanities Disease, Disorders, Medical Disciplines		
Operation Smile Inc.,3641 Faculty Blvd Virginia Beach, VA 23453	54-1460147	501(C)(3)	5,100.00	0			Youth Development		
Our House Child Development Center,1501 Mustang Drive Turnbull Child Devel. Center Our Lady of Lourdes - Saint Adalbert		501(C)(3)	9,580.00	0			Religion, Spiritual Development		
Church,2110 So. 32nd Street Omaha, NE 68105	47-0376523	501(C)(3)	7,200.00	0			Religion, Spiritual Development		
Our Lady of Tahoe Catholic Parish,PO Box 115 Zephyr Cove, NV 89448	27-4336535	501(C)(3)	8,000.00	0			Religion, Spiritual Development		
Our Redeemer Lutheran Church,3743 Marysville Rd Staplehurst, NE 68439	47-0494911	501(C)(3)	40,000.00	0			Religion, Spiritual Development		
Our Savior Lutheran Church,2500 W Norfolk Ave Norfolk, NE 68701	47-0484946	501(C)(3)	9,200.00	0			Religion, Spiritual Development Community Improvement, Capacity Building		
Page County Board of Supervisors,112 East Main Street Clarinda, IA 51632	42-6004382	501(C)(3)	10,000.00	0			Educational Institutions		
Partnership 4 Kids,All Our Kids, Inc. 1004 Farnam St., # 200 Omaha, NE 68102	47-0762798	501(C)(3)	24,850.00	0			Educational Institutions		
Phoenix Academy Day School,1110 N 66th St Omaha, NE 68132	02-0732028	501(C)(3)	17,350.00	0			Religion, Spiritual Development		
Phoenix Gospel Mission, dba, Phoenix Rescue Mission,1801 N. 35th Avenue Phoenix, AZ	86-6057771	501(C)(3)	26,000.00	0			Housing, Shelter Health - General & Rehabilitative		
Pisgah Reach Out Group, Inc.,206 West Oak Street Pisgah, IA 51564	42-1327234	501(C)(3)	8,000.00	0					
Planned Parenthood of the Heartland,3105 N. 93rd Street Omaha, NE 68134	42-0727488	501(C)(3)	27,600.00	0					

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Continuation Sheet for Schedule I (Form 990)

Name of organization	Omaha Community Foundation Donor Directed Depository	Employer Identification Number	36-3738990
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Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Fair Value	(g) Description	(h) Purpose of Grant or Assistance
Porter's Lake Lutheran Founders, Inc., 2235 V Avenue Clarinda, IA 51632	42-1128310	501(C)(3)	10,000.00	0			Religion, Spiritual Development
Presbyterian Church of the Master, 10710 Corby Circle Office Manager Omaha, NE 68164	47-0550142	501(C)(3)	5,300.00	0			Religion, Spiritual Development
Princeton University, 330 Alexander Street Princeton, NJ 08544	21-0634501	501(C)(3)	10,000.00	0			Educational Institutions
Project Harmony, 11949 Q Street Omaha, NE 68137	47-0789054	501(C)(3)	19,800.00	0			Crime, Legal Related
Purpose Driven Advocacy Center Inc., 6401 N 56th St Attn: Business Office Omaha, NE 68104	27-0803749	501(C)(3)	6,500.00	0			Human Services
Quality Living, Inc., 6404 No. 70th Plaza Omaha, NE 68104-1075	47-0665946	501(C)(3)	11,600.00	0			Health - General & Rehabilitative
Red Oak Grand Theatre, Inc., 307 East Reed Street Red Oak, IA 51566	27-3023263	501(C)(3)	20,000.00	0			Arts, Culture, Humanities
Red Wing Collectors Society Foundation, 2000 Old West Main St., Suite 302 P.O. Box 50 Red Rejoice Lutheran Church, 2556 S. 138th Street Omaha, NE 68144	41-1983230	501(C)(3)	15,000.00	0			Arts, Culture, Humanities
Robin Hill Community Support Foundation, 8712 W Dodge Road Suite 300 Omaha, NE 68114	47-0426523	501(C)(3)	17,420.00	0			Religion, Spiritual Development
Rockbrook United Methodist Church, 9855 West Center Road Omaha, NE 68124	47-1428729	501(C)(3)	10,000.00	0			Public, Society Benefit
Ronald McDonald House Charities, Inc. of Omaha, 620 So. 38th Ave. Omaha, NE 68105-	05-0775932	501(C)(3)	14,948.00	0			Religion, Spiritual Development
Roncalli High School, 6401 Sorensen Parkway Omaha, NE 68152	47-0755104	501(C)(3)	6,000.00	0			Health - General & Rehabilitative
Sacred Heart Catholic Church, 85-786 Old Government Road Waianae, HI 96792	47-0486481	501(C)(3)	8,000.00	0			Educational Institutions
	99-0093011	501(C)(3)	9,500.00	0			Religion, Spiritual Development

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Continuation Sheet for Schedule I (Form 990)

Name of organization		Omaha Community Foundation Donor Directed Depository		Employer Identification Number		36-3738990	
Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)							
(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Valuation	(g) Desc	(h) Purpose of Grant or Assistance
Sacred Heart Church, 2207 Wirt Street Omaha, NE 68110	47-0415808	501(C)(3)	8,575.00	0			Religion, Spiritual Development
Salvation Army, 10755 Burt St. Omaha, NE 68114-2065	36-2167910	501(C)(3)	62,689.00	0			Human Services
Sanctuary Bible Church, 8340 Carmel Valley Rd Carmel, CA 93923	94-2239931	501(C)(3)	15,000.00	0			Religion, Spiritual Development
Sarpy County Safe Policy Corp. - CASA Program, Sarpy County, 1210 Golden Gate Drive Papillion, NE 68131	61-1501001	501(C)(3)	10,000.00	0			Crime, Legal Related
Saving Grace Perishable Food Rescue Inc., 4611 S 96th St Ste 112 Omaha, NE 68127	46-1852863	501(C)(3)	5,100.00	0			Agriculture, Food, Nutrition
Seal-Naval Special Warfare Foundation, 4320 La Jolla Village Dr Ste 250 San Diego, CA 92122	27-1963880	501(C)(3)	10,000.00	0			Public, Society Benefit
Seward Community Scholarship, PO Box 141 Seward, NE 68434	47-0620453	501(C)(3)	22,214.00	0			Educational Institutions
Seward Foundation Inc., PO Box 111 Seward, NE 68434	47-0642721	501(C)(3)	6,000.00	0			Philanthropy, Voluntarism, Grantmaking
Seward Fourth of July Committee, PO Box 469 Seward, NE 68434	47-0640299	501(C)(3)	7,850.00	0			Public, Society Benefit
Shelby County Fair Corporation, P. O. Box 528 Harlan, IA 51537	42-0519825	501(C)(3)	10,000.00	0			Public, Society Benefit
Shelby County Historical Society, 1805 Morse Harlan, IA 51537-2042	23-7281908	501(C)(3)	11,507.10	0			Public, Society Benefit
Sidney Community Schools, 2754 Knox Road Box 609 Sidney, IA 51552	42-6025686	501(C)(3)	10,000.00	0			Educational Institutions
Siena Francis House, P.O. Box 217 Downtown Station Omaha, NE 68101-0217	47-0601005	501(C)(3)	47,359.42	0			Housing, Shelter
Skutt Catholic High School, 3131 So. 156th Street Omaha, NE 68130-1907	47-0753834	501(C)(3)	22,950.00	0			Religion, Spiritual Development

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Continuation Sheet for Schedule I (Form 990)

Name of organization: Omaha Community Foundation Donor Directed Depository Employer Identification Number 36-3738990

Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Valuation	(g) Description	(h) Purpose of Grant or Assistance
St. Andrews Episcopal Church, 925 South 84th Street Omaha, NE 68114-5207	47-0466152	501(C)(3)	7,600.00	0			Religion, Spiritual Development
St. Augustine Indian Mission, P. O. Box GG 1 Mission Road South Winnebago, NE 68071-	47-0398898	501(C)(3)	138,550.00	0			Religion, Spiritual Development
St. Bonaventure Church, 1565 18th Avenue Columbus, NE 68601	47-0376620	501(C)(3)	26,000.00	0			Religion, Spiritual Development
St. Cecilia's Cathedral Corporation, 701 North 40th Street Omaha, NE 68131	47-0376611	501(C)(3)	24,817.82	0			Religion, Spiritual Development
St. Gerald Catholic Church, 7859 Lakeview Street Ralston, NE 68127	47-0446840	501(C)(3)	26,980.00	0			Religion, Spiritual Development
St. James Catholic Church, 9025 Larimore Avenue Omaha, NE 68134	47-0491004	501(C)(3)	10,800.00	0			Religion, Spiritual Development
St. John Lutheran Church, 919 N Columbia Ave. Seward, NE 68434	47-0413918	501(C)(3)	10,150.00	0			Religion, Spiritual Development
St. John Lutheran School, 877 North Columbia Avenue Seward, NE 68434-4535	47-0413918	501(C)(3)	11,000.00	0			Religion, Spiritual Development
St. John the Evangelist Catholic Church, 307 East Meigs P.O. Box 587 Valley, NE 68064	47-0379837	501(C)(3)	6,000.00	0			Religion, Spiritual Development
St. John Vianney Church, 5801 Oak Hills Drive Omaha, NE 68137	47-0557229	501(C)(3)	12,000.00	0			Religion, Spiritual Development
St. Josephs Catholic Church, 100 S. 9th Street Springfield, NE 68059-5721	36-3130185	501(C)(3)	62,300.00	0			Religion, Spiritual Development
St. Jude's Children's Research Hospital, 501 St. Jude Place Memphis, TN 38105	62-0646012	501(C)(3)	7,100.00	0			Health - General & Rehabilitative
St. Leo's Catholic Church, 1920 No. 102nd Street Omaha, NE 68114	47-0609520	501(C)(3)	15,410.00	0			Religion, Spiritual Development
St. Luke United Methodist Church, 11810 Burke Street Omaha, NE 68154	47-0520749	501(C)(3)	39,550.00	0			Religion, Spiritual Development

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Continuation Sheet for Schedule I (Form 990)

Name of organization			Omaha Community Foundation Donor Directed Depository			Employer Identification Number. 36-3738990		
Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)								
(a)Name, address, and zip	(b)EIN	Code	(d)Cash Grant	(e)Non-Cash	(f)Value	(g)Desc	(h)Purpose of Grant or Assistance	
St. Margaret Mary Church,6116 Dodge Street Bookkeeping Dept. Omaha, NE 68132-2114	47-0429417	501(C)(3)	94,102.00	0			Religion, Spiritual Development	
St. Mary Magdalene Church,109 South 19th Street Omaha, NE 68102	47-0413712	501(C)(3)	10,650.00	0			Religion, Spiritual Development	
St. Michael Lutheran Church,13232 Blondo Street Omaha, NE 68164	47-0641425	501(C)(3)	10,000.00	0			Religion, Spiritual Development	
St. Patrick's Catholic Church and School,P. O. Box 10 20500 West Maple Road Elkhorn, NE	47-0379377	501(C)(3)	16,019.44	0			Religion, Spiritual Development	
St. Patrick's Church - St. Mary's School,301 E Adams St. O'Neill, NE 68763	47-0413713	501(C)(3)	5,100.00	0			Religion, Spiritual Development	
St. Paul's Lutheran Church,13271 Millard Avenue Omaha, NE 68137	47-0487488	501(C)(3)	40,000.00	0			Religion, Spiritual Development	
St. Pius X/St. Leo School,6905 Blondo Street Omaha, NE 68104	47-0424937	501(C)(3)	14,700.00	0			Educational Institutions	
St. Robert Bellarmine Church,11802 Pacific Street Omaha, NE 68154	05-0782718	501(C)(3)	63,750.00	0			Religion, Spiritual Development	
St. Stephen the Martyr Catholic Church,16701 "S" Street Omaha, NE 68135	47-0730264	501(C)(3)	29,150.00	0			Religion, Spiritual Development	
St. Thomas More Church,4804 Grover Street Omaha, NE 68106	47-0460572	501(C)(3)	7,600.00	0			Religion, Spiritual Development	
St. Timothy's Lutheran Church,510 North 93rd Street Omaha, NE 68114	47-6045615	501(C)(3)	17,290.00	0			Religion, Spiritual Development	
St. Vincent de Paul Catholic Church,14330 Eagle Run Drive Omaha, NE 68164	47-0748573	501(C)(3)	34,891.00	0			Religion, Spiritual Development	
St. Wenceslaus Catholic Church and School,15353 Pacific Street Omaha, NE 68154	47-0647888	501(C)(3)	59,300.00	0			Religion, Spiritual Development	

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization	Omaha Community Foundation Donor Directed Depository	Employer Identification Number	36-3738990
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Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) FValuat	(g) Desc	(h) Purpose of Grant or Assistance
Stephen Center, 2723 Q Street Omaha, NE 68107	36-3363994	501(C)(3)	18,050.00	0			Housing, Shelter
Strategic Air & Space Museum, SAC Museum 28210 West Park Highway Ashland, NE 68003 Stuhr Museum Foundation, 3133 W Hwy 34 Grand Island, NE 68801	47-0619646	501(C)(3)	33,700.00	0			Arts, Culture, Humanities
	47-0632772	501(C)(3)	10,000.00	0			Arts, Culture, Humanities
Suburban Rotary Charitable Foundation, 4089 S. 84th St. PMB 317 Omaha, NE 68127 Take Flight Farms, 1004 Farnam Street, Suite 400 Omaha, NE 68102	36-3544327	501(C)(3)	21,500.00	0			Community Improvement, Capacity Building
	40-0001019	501(C)(3)	39,932.28	0			Mental Health, Crisis Intervention
TeamMates Mentoring Program, 11850 Nicholas Street Suite 120 Omaha, NE 68154-4476 TeamMates Mentoring Program, 6801 O Street Lincoln, NE 68510	47-0840990	501(C)(3)	6,250.00	0			Crime, Legal Related
	47-0840990	501(C)(3)	20,000.00	0			Crime, Legal Related
TeamMates Mentoring Program, 11850 Nicholas Street Suite 120 Omaha, NE 68154-4476 Temple Israel, 13111 Sterling Ridge Dr Omaha, NE 68144 Thanksgiving Lutheran Church, 3702 370th Plaza Bellevue, NE 68123-1206 The Madonna Foundation, 5401 South Street Lincoln, NE 68506	47-0840990	501(C)(3)	5,100.00	0			Crime, Legal Related
	47-0376590	501(C)(3)	37,970.00	0			Religion, Spiritual Development
	47-0664528	501(C)(3)	10,500.00	0			Religion, Spiritual Development
	23-7159940	501(C)(3)	10,000.00	0			Philanthropy, Voluntarism, Grantmaking
Together, Inc., 812 S 24th St. Omaha, NE 68108	47-0589290	501(C)(3)	7,850.00	0			Human Services

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization	Omaha Community Foundation Donor Directed Depository	Employer Identification Number	36-3738990
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Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Fair Value	(g) Description	(h) Purpose of Grant or Assistance
Trinity Lutheran Church, c/o Church Treasurer 330 West Halleck St. Papillion, NE 68046	47-0545608	501(C)(3)	10,000.00	0			Religion, Spiritual Development
Trinity Lutheran Church, 6340 North 30th Financial Secretary Omaha, NE 68111	47-6006881	501(C)(3)	59,075.00	0			Religion, Spiritual Development
Trinity Lutheran Church-Blair, 141 S 20th St Blair, NE 68008	47-6060416	501(C)(3)	7,200.00	0			Religion, Spiritual Development
Truman State University Foundation, McClain Hall 100 100 E. Normal Kirksville, MO 63501- 4221	43-1381504	501(C)(3)	12,500.00	0			Educational Institutions
Tulane University, Tulane Medical School 6823 Saint Charles Avenue New Orleans, LA 70118	72-0423889	501(C)(3)	5,250.00	0			Educational Institutions
Underwood Hills Presbyterian Church, 851 North 74th Street Omaha, NE 68114	47-0649321	501(C)(3)	34,362.00	0			Religion, Spiritual Development
UNF Charitable Gift Fund, 1010 Lincoln Mall Ste 300 Lincoln, NE 68508	20-0288992	501(C)(3)	10,800.00	0			Educational Institutions
Union for Contemporary Art, 2417 Brudette St. Omaha, NE 68111	45-2274312	501(C)(3)	5,400.00	0			Arts, Culture, Humanities
Union for Reform Judaism, 633 3rd Avenue. Floor 7 New York, NY 10017	13-1663143	501(C)(3)	7,100.00	0			Religion, Spiritual Development
United Faith Church, P.O. Box 115 Sidney, IA 51652	46-0859928	501(C)(3)	30,716.00	0			Religion, Spiritual Development
United States Artists Inc., 980 N Michigan Ave. Suite 1300 Chicago, IL 60611	22-3903993	501(C)(3)	25,000.00	0			Arts, Culture, Humanities
United Way of the Desert, P.O. Box 1990 Palm Springs, CA 92263-1990	95-2783993	501(C)(3)	25,000.00	0			Philanthropy, Voluntarism, Grantmaking

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization	Omaha Community Foundation Donor Directed Depository	Employer Identification Number	36-3738990
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Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) FValuat	(g) Desc	(h) Purpose of Grant or Assistance
United Way of the Midlands, Finance Department 1805 Harney Street Omaha, NE 68102	47-0376605	501(C)(3)	316,029.30	0			Philanthropy, Voluntarism, Grantmaking
University of Nebraska Foundation, P. O. Box 82555 Lincoln, NE 68501-2555	47-0379839	501(C)(3)	42,500.00	0			Educational Institutions
University of Nebraska Foundation, 2285 S. 67th Street, Ste 200 Omaha, NE 68106	47-0379839	501(C)(3)	11,869,450.00	0			Educational Institutions
University of Nebraska Omaha, 6001 Dodge Street Annex 26 Omaha, NE 68182	47-0049123	501(C)(3)	25,000.00	0			Educational Institutions
University of Notre Dame, P. O. Box 519 1100 Grace Hall Notre Dame, IN 46556	35-0868188	501(C)(3)	41,000.00	0			Educational Institutions
UNO Alumni Association, 6705 Dodge Street Thompson Alumni House Omaha, NE 68182	47-6027511	501(C)(3)	12,650.00	0			Educational Institutions
Visiting Nurse Health Services, 12565 West Center Rd, Ste 100 Omaha, NE 68144	47-0690286	501(C)(3)	6,950.00	0			Health - General & Rehabilitative
Volunteers Assisting Seniors, 1941 South 42nd Street Suite 312 Omaha, NE 68105	47-0617717	501(C)(3)	6,000.00	0			
Water's Edge United Methodist Church, 18035 Oak St. Omaha, NE 68130	45-3789126	501(C)(3)	48,050.00	0			Human Services
West Point Auditorium Foundation Inc., 141 E. Grove St PO Box 217 West Point, NE 68788	20-2365139	501(C)(3)	7,500.00	0			Recreation, Sports, Leisure, Athletics
Westside Community Schools Foundation, 909 S. 76th St. Omaha, NE 68114	47-0560469	501(C)(3)	21,985.00	0			Educational Institutions
Willa Cather Foundation, 413 North Webster Street Red Cloud, NE 68970	47-0485401	501(C)(3)	100,250.00	0			Arts, Culture, Humanities

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization: Omaha Community Foundation Donor Directed Depository Employer Identification Number: 36-3738990

Part II - Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)

(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) Valuation	(g) Description	(h) Purpose of Grant or Assistance
Women Employed, 65 E. Wacker Place Suite 1500 Chicago, IL 60601	36-2969526	501(C)(3)	15,000.00	0			Civil Rights, Social Action, Advocacy
Women's Center for Advancement, 222 South 29th Street WCA Omaha, NE 68131	27-3205476	501(C)(3)	6,200.00	0			Human Services
World-Herald Goodfellows Charities, Inc., 1314 Douglas Street Suite 125 Omaha, NE 68102	47-6000559	501(C)(3)	12,690.00	0			Human Services
YFC, Inc., Maha Music Festival PO Box 24173 Omaha, NE 68124	06-1839109	501(C)(3)	25,100.00	0			Arts, Culture, Humanities
YMCA of Omaha/Council Bluffs, 430 S 20th St Omaha, NE 68102	47-0376586	501(C)(3)	7,750.00	0			Human Services
Young Life, P. O. Box 520 420 N Cascade Ave Colorado Springs, CO 80903	84-0385934	501(C)(3)	15,100.00	0			Youth Development
Young Life, 2324 Bob Boozer Drive #100 Omaha, NE 68130	84-0385934	501(C)(3)	11,000.00	0			Philanthropy, Voluntarism, Grantmaking

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

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

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.**Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.**

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

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

Omaha Community Foundation

Employer identification number

36-3789990

Part I Questions Regarding Compensation

- 1 a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |
- b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain.
- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?
- 3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.
- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |
- 4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:
- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.
- Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**
- 5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- a** The organization?
- b** Any related organization?
- If 'Yes' to line 5a or 5b, describe in Part III.
- 6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a** The organization?
- b** Any related organization?
- If 'Yes' to line 6a or 6b, describe in Part III.
- 7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III.
- 8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III.
- 9** If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1 a		
1 b		
2		
3		
4 a		X
4 b		X
4 c		X
5 a		X
5 b		X
6 a		X
6 b		X
7		X
8		X
9		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2014

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
Sara Boyd	(i)	0.	0.	0.	0.	0.	0.
1 President & CEO	(ii)	183,888.	44,175.	108.	7,198.	245,251.	0.
Mike Leighton	(i)	0.	0.	0.	0.	0.	0.
2 CEO	(ii)	24,875.	0.	1,208.	0.	26,083.	0.
3	(i)						
	(ii)						
4	(i)						
	(ii)						
5	(i)						
	(ii)						
6	(i)						
	(ii)						
7	(i)						
	(ii)						
8	(i)						
	(ii)						
9	(i)						
	(ii)						
10	(i)						
	(ii)						
11	(i)						
	(ii)						
12	(i)						
	(ii)						
13	(i)						
	(ii)						
14	(i)						
	(ii)						
15	(i)						
	(ii)						
16	(i)						
	(ii)						

TEEA4102L 06/19/14

Schedule J (Form 990) 2014

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Part III Supplemental Information

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

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2014

**Open To Public
Inspection**

Name of the organization

Omaha Community Foundation
Donor Directed Depository

Employer identification number

36-3789990

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art – Works of art				
2 Art – Historical treasures				
3 Art – Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities – Publicly traded	X	301	26,555,618.	Fair Market Va
10 Securities – Closely held stock	X	10	3,915,668.	Fair Market Va
11 Securities – Partnership, LLC, or trust interests				
12 Securities – Miscellaneous				
13 Qualified conservation contribution – Historic structures				
14 Qualified conservation contribution – Other				
15 Real estate – Residential				
16 Real estate – Commercial				
17 Real estate – Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If 'Yes,' describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If 'Yes,' describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

	Yes	No
30a		X
31	X	
32a		X
33		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2014)

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

Omaha Community Foundation
Donor Directed Depository

Employer identification number

36-3789990

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

Omaha Community Foundation can elect directors.

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

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

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

This policy is covered under the related organization.

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

This policy is covered under the related organization.

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

This policy is covered under the related organization.

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

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

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

No documents available to the public.

SCHEDULE R
(Form 990)

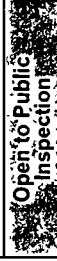
Related Organizations and Unrelated Partnerships

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

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2014



Name of the organization

Employer identification number

Omaha Community Foundation Donor Directed Depository

36-3789990

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

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

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

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

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

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

(2) -----												

(3) -----												

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

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

(2) -----									

(3) -----									

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Schedule R (Form 990) 2014

Part V Transactions With Related Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity**b** Gift, grant, or capital contribution to related organization(s)**c** Gift, grant, or capital contribution from related organization(s)**d** Loans or loan guarantees to or for related organization(s)**e** Loans or loan guarantees by related organization(s)**f** Dividends from related organization(s)**g** Sale of assets to related organization(s)**h** Purchase of assets from related organization(s)**i** Exchange of assets with related organization(s)**j** Lease of facilities, equipment, or other assets to related organization(s)**k** Lease of facilities, equipment, or other assets from related organization(s)**l** Performance of services or membership or fundraising solicitations for related organization(s)**m** Performance of services or membership or fundraising solicitations by related organization(s)**n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)**o** Sharing of paid employees with related organization(s)**p** Reimbursement paid to related organization(s) for expenses**q** Reimbursement paid by related organization(s) for expenses**r** Other transfer of cash or property to related organization(s)**s** Other transfer of cash or property from related organization(s)

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Omaha Community Foundation	b	2,135,958.	
(2) Omaha Community Foundation	c	37,754.	
(3) Omaha Community Foundation	1	142,840.	
(4)			
(5)			
(6)			

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TEEA5003L 08/22/14

Schedule R (Form 990) 2014

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

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

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

(2) -----													

(3) -----													

(4) -----													

(5) -----													

(6) -----													

(7) -----													

(8) -----													

Part VII **Supplemental Information**

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