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Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For	calend	dar year 2014 or tax year beginning ,	and ending				
Name of foundation						oyer identification number	
KRUTSINGER FAMILY FOUNDATION INC						-4602121	
		d street (or P O box number if mail is not delivered to street address)		om/suite		hone number (see instruction	s)
	715	N 25TH STREET	40:	2-371-9721			
	-	n, state or province, country, and ZIP or foreign postal code			C If exe	mption application is pending,	check here
	ORF						
G	Check		urn of a former public c	narity	D 1 Fo	preign organizations, check he	ere . • [_]
		Final return Amended			į	oreign organizations meeting t	F-3
		Address change Name ch		_	85	5% test, check here and attach	computation .
H	Check	type of organization. $f X$ Section 501(c)(3) exempt privat	e foundation			ate foundation status was tem	ninated under
	Section		ole private foundation		sectio	n 507(b)(1)(A), check here	▶ ⊔
	-	rket value of all assets at J Accounting method:	X Cash Acc	rual	1	foundation is in a 60-month te	
	•	rear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check h	ere P
	ne 16)		t be on cash basis)		L		(4) D
P	art i	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions))	books	Inco	me	ıncome	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	400,000				
	2	Check ▶ ☐ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					
	5a	Gross rents					
<u>a</u>	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10					
Š	b	Gross sales price for all assets on line 6a					
ž	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain				0	
	9	Income modifications					-
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
2	11 12	Other income (attach schedule) Total. Add lines 1 through 11	400,000		0	0	
<u>S</u>	13	Compensation of officers, directors, trustees, etc.	100,000				
n)	14	Other employee salaries and wages					
ense	15	Pension plans, employee benefits				VED	
_ 🖰	16a	Legal fees (attach schedule)			RECE	10	
ŽΨ	b	Accounting fees (attach schedule)				2015	
- <u>8</u>	C	Other professional fees (attach schedule)		الما	MAY 2	ا دوره ا	
ā	17	Interest		1281	••		
ist	18	Taxes (attach schedule) (see instructions)		<u> </u> L		FN IIT	
Ē	19	Depreciation (attach schedule) and depletion		1	OGU	EN, UT	·
ġ	20	Occupancy					
70	21	Travel, conferences, and meetings					
Operating and Administrative Ex	22	Printing and publications					
<u>p</u>	23	Other expenses (att. sch)					
atir	24	Total operating and administrative expenses.			_		_
ē		Add lines 13 through 23	0		0	0	0
Ö	25	Contributions, gifts, grants paid	0				0
_	26	Total expenses and disbursements. Add lines 24 and 25	0		0	0	0
	27	Subtract line 26 from line 12 ⁻	400 000				
		Excess of revenue over expenses and disbursements	400,000				
	l a	Net investment income (if negative, enter -0-)			0		. •

	Part I	Balance Sheets Attached schedules and amounts in the description colu	mn	Beginning of year		End of	year
_	. 4147	should be for end-of-year amounts only (See instruction	ns)	(a) Book Value	(b) Book Valu	ie	(c) Fair Market Value
	1	Cash – non-interest-bearing					
	2	Savings and temporary cash investments			400	,000	400,000
	3	Accounts receivable ▶					
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
ı		Less allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see					
ļ		instructions)					
	7	Other notes and loans receivable (att. schedule)				1	
		Less: allowance for doubtful accounts ▶	0				
ß	8	Inventories for sale or use				ŀ	
Assets	9	Prepaid expenses and deferred charges					
AS	10a	Investments – U S and state government obligations (attach schedule)					
	b	Investments – corporate stock (attach schedule)			-		· - · ·
	С	Investments – corporate bonds (attach schedule)			-		
	11	Investments – land, buildings, and equipment basis					
		Less accumulated depreciation (attach sch.)				[
	12	Investments – mortgage loans					
	13	Investments – other (attach schedule)					
	14	Land, buildings, and equipment. basis					
		Less accumulated depreciation (attach sch.)				[
	15	Other assets (describe ▶)				
	16	Total assets (to be completed by all filers – see the	•				
		instructions Also, see page 1, item I)		o	400	,000	400,000
П	17	Accounts payable and accrued expenses					
	18	Grants payable					
es	19	Deferred revenue					
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable (attach schedule)					
7	22	Other habilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)	,	0		0	
П		Foundations that follow SFAS 117, check here	▶ X				
Se		and complete lines 24 through 26 and lines 30 and 31.					
nces	24	Unrestricted			400	,000	
Net Assets or Fund Bala	25	Temporarily restricted					
8	26	Permanently restricted					
ĭ		Foundations that do not follow SFAS 117, check here	▶ 🗀				
딘		and complete lines 27 through 31.					
Ö	27	Capital stock, trust principal, or current funds					
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund					
155	29	Retained earnings, accumulated income, endowment, or other funds					
t /	30	Total net assets or fund balances (see instructions)		0	400	,000	
ž	31	Total liabilities and net assets/fund balances (see			-		
		instructions)		o	400	,000	
	Part I	Analysis of Changes in Net Assets or Fund Balar	ices		-		<u></u>
1	Total	net assets or fund balances at beginning of year - Part II, column (a), li		st agree with	-		
		f-year figure reported on pnor year's return)	, -	-		1 1	C
2		amount from Part I, line 27a			•	2	400,000
		increases not included in line 2 (itemize) ▶			•	3	·- · · · · · · · · · · · · · · · · · ·
		nes 1, 2, and 3			•••	4	400,000
		eases not included in line 2 (itemize)			• • •	5	, , ,
		net assets or fund balances at end of year (line 4 minus line 5) - Part II	, column (l	o), line 30		6	400,000
_				-11	••••		- 000 DE

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income			
	cribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P Purchase D Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a N/A					
<u>b</u>					
					-
_d	, <u>,</u>				1
e			l		<u> </u>
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) f) minus (g)
_a					
b				-	
С					
<u>d</u>					_
Complete only for exacts above	es and in column (b) and armed by the f	 	20	1	-
(i) F MV as of 12/31/69	g gain in column (h) and owned by the fo (j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any	col (k), but no	t (h) gain minus t less than -0-) or rom cot (h))
a				· · · · · · · · · · · · · · · · · · ·	
b					
С					
d					
e				_	
2 Capital gain net income or (net o	If gain, also enter in If (loss), enter -0- in ss) as defined in sections 1222(5) and (6	Part I, line 7		2	
· -	s, column (c) (see instructions). If (loss),	·		3	
Part V Qualification U	nder Section 4940(e) for Reduc	ed Tax on Net	Investment Inco	ome	
(For optional use by domestic private	e foundations subject to the section 4940	(a) tax on net invest	ment income)		
if section 4940(d)(2) applies, leave the	nis part blank				N/A
	tion 4942 tax on the distributable amoun	• •	pase period?		Yes No
	each column for each year, see the instr	 	no any entres		
(a)		delions before makin		T	(d)
Base penód years Calendar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net value	(c) of nonchantable-use asse		itnbution ratio divided by col. (c))
2013					
2012					
2011					
2010					
2009					
2 Total of line 1, column (d)				2	
	5-year base period – divide the total on l	line 2 by 5, or by the			·
number of years the foundation I	3				
4 Enter the net value of noncharita	4				
5 Multiply line 4 by line 3	5				
6 Enter 1% of net investment incom	6				
7 Add lines 5 and 6				7	
8 Enter qualifying distributions from	n Part XII, line 4 In line 7, check the box in Part VI, line 1b	o, and complete that	 part using a 1% tax	8 rate. See the	
Part VI instructions.			. •		

Form 990-PF (2014) KRUTSINGER FAMIL		46-4602121	Page /
Part VIII Information About Officers, and Contractors (continued)	Directors, Trustees, Foundat	ion Managers, Highly Paid Er	
3 Five highest-paid independent contractors for	professional services (see instructi	ions). If none, enter "NONE."	
(a) Name and address of each person	on paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	- · · · · · · · · · · · · · · · · · · ·		
			-
Total number of others receiving over \$50,000 for profe	essional services		<u> </u>
· · · · · · · · · · · · · · · · · · ·			
Part IX-A Summary of Direct Charita	ble Activities		
List the foundation's four largest direct chantable activities during the ta organizations and other beneficianes served, conferences convened, re		as the number of	Expenses
1 N/A			
2			
3			
4			
Part IX-B Summary of Program-Rela	ted Investments (see instruction	ons)	
Describe the two largest program-related investments made by the found	ndation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-related investments See instructions			
3			

Total. Add lines 1 through 3

3a

3b

4

Suitability test (prior IRS approval required)

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

Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

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

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

P	ert XIII Undistributed Income (see instructions	5)		•	
		(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
	line 7				1,642
2	Undistributed income, if any, as of the end of 2014:	•			
а			<u></u>		
b					
3	Excess distributions carryover, if any, to 2014				
a		4			•
b	From 2010	4			
C	From 2011	4			
d	From 2012	4			
e	From 2013	1			
. T	Total of lines 3a through e				
4	Qualifying distributions for 2014 from Part XII,				
_	line 4: ▶ \$				
	Applied to 2013, but not more than line 2a		7		
D	Applied to undistributed income of prior years				
	(Election required – see instructions)				
C	Treated as distributions out of corpus (Election required – see instructions)				
4	·				
	Applied to 2014 distributable amount	***************************************			
5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2014				
,	(If an amount appears in column (d), the same	, ,·,	 	****	
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
•	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5				
	Prior years' undistributed income. Subtract	***************************************		······································	
_	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		}		
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount – see instructions				
е	Undistributed income for 2013. Subtract line				
	4a from line 2a Taxable amount – see				
	Instructions				
f	Undistributed income for 2014. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2015				1,642
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2009 not				
_	applied on line 5 or line 7 (see instructions)		-		
9	Excess distributions carryover to 2015.				• •
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
a	Excess from 2010	-			
b	Excess from 2011	4			
C	Excess from 2012	1			
d	Excess from 2013	1			
е	Excess from 2014 .	I	1		[

Any restrictions or limitations on awards, such as by geographical areas, chantable fields, kinds of institutions, or other

N/A

factors: N/A

c Any submission deadlines

Form 990-PF (2014) KRUTSINGER FAMILY FOUNDATION INC 46-4602121 Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Recipient Purpose of grant or status of Amount contribution recipient Name and address (home or business) a Paid during the year N/A Total ▶ 3a **b** Approved for future payment N/A

▶ 3b

Total

Part XVI-A	Analysis of Income-Producing A	<u>ctivities</u>				
Enter gross amo	ounts unless otherwise indicated	(a) Business code	ed business income (b) Amount	(c) Exclusion	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program sei	vice revenue:			code		(See instructions)
-						
			-			
				1		
				 		
f		-			w · · · ·	
· —	d contracts from government agencies	_		 		
-				+		
	dues and assessments			╁┈╌╁		
	avings and temporary cash investments			+		·
	nd interest from securities	-				
	come or (loss) from real estate:			-		
	anced property			 -		
	t-financed property			 	·	 -
	come or (loss) from personal property			 		
7 Other invest				+ +		
	s) from sales of assets other than inventory			<u> </u>		
	or (loss) from special events			 		
10 Gross profit	or (loss) from sales of inventory			1		
11 Other reven	ue: a			 		
b		_	,			
c		_		<u> </u>		
d	<u> </u>	_		<u> </u>		
е		_		<u> </u>		
12 Subtotal. Ad	d columns (b), (d), and (e)				0	0
13 Total. Add le	ne 12, columns (b), (d), and (e)				13 _	0
	in line 13 instructions to verify calculations)					
Part XVI-B	Relationship of Activities to the					
Line No.	Explain below how each activity for which incor					
	accomplishment of the foundation's exempt pu	rposes (other than	by providing funds for	or such pur	poses). (See instructi	ons)
N/A						
			· · ·			
				_		
		_				
				-		-
•		· · · · · ·		-		····
		-	 		····	
						···-

orm	<u>1990-PF (20</u>	14) KRUTSINGE	SK PAMI	TTI FOONDY	ATION IN	<u> </u>	4002121		Pa	age 1
Pa	ert XVII	Information Regardanization	_	ansfers To an	d Transactio	ns and Relat	ionships Wi	th Noncharitable		
1	Did the org	anization directly or ind	lirectly engag	ge in any of the foll	lowing with any	other organization	n described		Yes	No
		01(c) of the Code (other								
а	-	rom the reporting found	lation to a no	ncharitable exemp	ot organization o	f:				
	(1) Cash							1a(1)	X
	(2) Other a	issets			•			1a		X
b	Other trans	actions:								
	(1) Sales of	of assets to a noncharita	able exempt	organization				1b	1)	X
	(2) Purcha	ses of assets from a no	onchantable	exempt organization	on	•		1b	2)	X
	(3) Rental	of facilities, equipment,	, or other ass	sets				1b	3)	X
	(4) Reimbi	ursement arrangements	s					1b(4)	X
	(5) Loans	or loan guarantees						1b	5)	X
	(6) Perform	nance of services or me	embership o	r fundraising solicit	tations _.			<u>1b</u> (6)	X
C	Sharing of	facilities, equipment, m	ailing lists, o	ther assets, or par	d employees			10	<u>: </u>	X
d	If the answ	er to any of the above i	s "Yes," com	plete the following	schedule Colu	mn (b) should alv	ways show the fa	air market		
	value of the	e goods, other assets, o	or services g	iven by the reportir	ng foundation If	the foundation re	eceived less that	n fair market		
	value in an	y transaction or sharing	arrangemer	nt, show in column	(d) the value of	the goods, other	assets, or servi	ices received.		
_	(a) Line no	(b) Amount involved	(c) Name	e of nonchantable exemp	ot organization	(d) Desc	inption of transfers, tr	ansactions, and sharing arrange	ments	
1/1	A.									
										
										
		<u></u>								
		 								
										
										
		·· -								
	 -									
		 				 				
	described i	dation directly or indirectly or indirectly of the	Code (other				ations		Yes 2	K No
þ		mplete the following sc	hedule			<u> </u>				
		(a) Name of organization		(b) Type of o	rganization		(c) Descrip	otion of relationship		
	N/A									
								•		
				<u> </u>		<u> </u>				
	Under pe	enalties of perjury, I declare th	at i have exami	I ned this return, including	g accompanying sch	I edules and statement	s, and to the best of	my knowledge and belief, it is	true,	
	correct, a	and complete Declaration of p	preparer (other t	than taxpayer) is based	on all information of	which preparer has a	ny knowledge	May the IRS discuss the	us return	
Sig	n	\circ						with the preparer show		_
ler							_	(see instructions)?	X Yes	∐_N
		Morrald	I 181	11tonio	&/ 13	73-15	TRUS	STEE		
	Sigi	nature of officer or trustee	* 	()	Date		Title			
	Print/T	ype preparer's name			Preparer's signatu	re		Date	Chec	ık 🗍
aid	MADR	BROCKHAUS			man B.	rochhair	CPL	5/11/15	self-e	mploye
rep	arer	name ► KRUSE	SCHUN	ACHER SMI		OCKHAUS	PC .	PTIN P002		9
Jse	Only			ROSPECT AV				Firm's EIN ▶ 47-05		

402-379-2722

NORFOLK, NE

68701

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

Name of the organization

Employer identification number

KRUTSINGER FA	46-4602121						
Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	covered by the General Rule or a Special Rule . '), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e See					
General Rule							
	ling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5 property) from any one contributor. Complete Parts I and II. See instructions for determinitibutions						
Special Rules							
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
contributor, during the contributions totaled riduring the year for an	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, chantable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, chantable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions						
totaling \$5,000 or mo	re during the year	▶ \$					
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).							

Name of organization

KRUTSINGER FAMILY FOUNDATION INC

Employer identification number 46-4602121

Part I	Contributors (see instructions). Use duplicate copies of P	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RONALD AND CAROL KRUTSINGER 715 N 25TH STREET NORFOLK NE 68701	\$ 400,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
110.	Nume, address, and En 14	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)