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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:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Omaha Community Foundation
302 S 36th St #100
Omaha, NE 68131

D Employer identification number
47-0645958

E Telephone number
(402) 342-3458

G Gross receipts \$ 114,423,593.

F Name and address of principal officer
Same As C Above

H(a) Is this a group return for subordinates? ☐ Yes ☒ No
H(b) Are all subordinates included? ☐ Yes ☒ No
 If 'No,' attach a list (see instructions)

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

J Website: omahafoundation.org

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation 1982 **M** State of legal domicile NE

Part I Summary

1 Briefly describe the organization's mission or most significant activities. To serve the community by cultivating generosity and strengthening nonprofits.

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

3 Number of voting members of the governing body (Part VI, line 1a)	3	21
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	21
5 Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	20
6 Total number of volunteers (estimate if necessary)	6	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	-43,902.
7b Net unrelated business taxable income from Form 990-T, line 34	7b	-43,902.

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	161,225,238.	29,848,997.
9 Program service revenue (Part VIII, line 2g)	2,400,057.	2,353,309.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,216,791.	18,508,424.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7,381,304.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	166,842,086.	58,092,034.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	21,926,378.	28,614,924.
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)	1,680,451.	1,529,308.
16a Professional fundraising fees (Part IX, column (A), line 11e)		
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 679,277.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,507,664.	2,424,121.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	27,114,493.	32,568,353.
19 Revenue less expenses. Subtract line 18 from line 12	139,727,593.	25,523,681.
20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21 Total liabilities (Part X, line 26)	280,162,008.	295,689,370.
22 Net assets or fund balances Subtract line 21 from line 20	10,733,620.	11,453,212.
	269,428,388.	284,236,158.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: *Melissa Sunde* Date: 11/16/2015

Type or print name and title: MELISSA SUNDE

Paid Preparer Use Only

Print/Type preparer's name: [Redacted] Preparer's signature: Non-Paid Preparer Date: [Redacted]

Check ☒ if self-employed PTIN: [Redacted]

Firm's name: [Redacted] Firm's EIN: [Redacted]

Firm's address: [Redacted] Phone no: [Redacted]

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☒ No

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

TEEA0113L 05/28/14

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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.To serve the community by cultivating generosity and strengthening nonprofits.**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 \$ 30,599,504. including grants of \$ 28,614,924.) (Revenue \$)To promote philanthropy to fund charitable programs and organizations primarily serving our community - Omaha/Metro area, Southeast Nebraska and Southwest Iowa.**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 **▶** 30,599,504.

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 4		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1 b 24		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		X
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 20		
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	X	
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 2		
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		X
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?		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
10 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	
11 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	
12 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12 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
16 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)

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			
(1) Christina V. Castro-Matukewicz Director	1 0	X					0.	0.	0.
(2) Robert D. Bates Director	1 0.5	X					0.	0.	0.
(3) Mike Cassling Director	1 0.5	X					0.	0.	0.
(4) Tim Clark Director	1 0.5	X					0.	0.	0.
(5) Patrick J. Corrigan Director	1 0.5	X					0.	0.	0.
(6) Jennifer Hamann Director	1 0.5	X					0.	0.	0.
(7) Carey Hamilton Director	1 0.5	X					0.	0.	0.
(8) Mary S. Jones Treasurer	2 1	X		X			0.	0.	0.
(9) Janet Melchior-Kopp Director	1 0.5	X					0.	0.	0.
(10) Sharon Kresha Director	1 0.5	X					0.	0.	0.
(11) John P. Nelson Director	1 0.5	X					0.	0.	0.
(12) Thomas K. Nichting Director	1 0.5	X					0.	0.	0.
(13) Jeff Gordman Director	1 0.5	X					0.	0.	0.
(14) Mary Reckmeyer Director	1 0.5	X					0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Constance M. Ryan Vice Chairman	1 0.5	X		X				0.	0.	0.
(16) John A. Scott Director	1 0.5	X						0.	0.	0.
(17) Todd D. Simon Vice Chairman	4 2	X		X				0.	0.	0.
(18) Jeffrey L. Snyder Director	1 0.5	X						0.	0.	0.
(19) Mark A. Weber Secretary	4 0.5	X		X				0.	0.	0.
(20) Katie Weitz Director	1 0	X						0.	0.	0.
(21) Thomas H. Warren Director	1 0.5	X						0.	0.	0.
(22) Steve Baumert Director	1 0	X						0.	0.	0.
(23) Sara R. Boyd President & CEO	30 10			X				228,171.	0.	17,080.
(24) Melisa Sunde CFO	30 10			X				122,348.	0.	26,503.
(25) Mike Leighton CEO	0 0						X	24,875.	0.	1,208.
1 b Sub-total								375,394.	0.	44,791.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								375,394.	0.	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 **2**

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

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

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

	Yes	No
3	X	
4	X	
5		X

Section B. Independent Contractors

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

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

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

Part VIII Statement of 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 3,682,822.				
	e Government grants (contributions)	1 e 274,327.				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 25,891,848.				
	g Noncash contributions included in lines 1a-1f	\$ 10,408,870.				
	h Total. Add lines 1a-1f		29,848,997.			
Program Service Revenue	Business Code					
	2 a <u>Administrative Fees</u>		2,353,309.	2,353,309.		
	b -----					
	c -----					
	d -----					
	e -----					
	f All other program service revenue					
	g Total. Add lines 2a-2f		2,353,309.			
Other Revenue	3 Investment income (including dividends, interest and other similar amounts)		1,917,090.		-43,902.	1,960,992.
	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				
		72922893.				
	b Less: cost or other basis and sales expenses		56331559.			
	c Gain or (loss)		16591334.			
	d Net gain or (loss)		16,591,334.			16,591,334.
	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 <u>Chg in Ben. Int. in CLAT</u>	900099	7,381,304.	7,381,304.			
b -----						
c -----						
d All other revenue						
e Total. Add lines 11a-11d		7,381,304.				
12 Total revenue. See instructions		58,092,034.	9,734,613.	-43,902.	18,552,326.	

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	28,614,924.	28,614,924.		
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	350,290.	105,087.	140,116.	105,087.
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	924,935.	342,226.	240,483.	342,226.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	47,386.	17,533.	12,320.	17,533.
9 Other employee benefits	119,270.	44,130.	31,010.	44,130.
10 Payroll taxes	87,427.	32,348.	22,731.	32,348.
11 Fees for services (non-employees)				
a Management	1,256,310.	1,256,310.		
b Legal	711.	71.	604.	36.
c Accounting	59,950.		59,950.	
d Lobbying	6,601.	6,601.		
e Professional fundraising services See Part IV, line 17				
f Investment management fees	334,129.		334,129.	
g Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	101,965.	77,047.	19,055.	5,863.
12 Advertising and promotion	147,680.	22,152.	95,992.	29,536.
13 Office expenses	252,866.	39,354.	163,274.	50,238.
14 Information technology	45,901.	6,885.	29,836.	9,180.
15 Royalties				
16 Occupancy	108,855.	16,328.	70,756.	21,771.
17 Travel	30,454.	5,086.	19,399.	5,969.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	61,261.	9,742.	39,397.	12,122.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,661.	999.	4,330.	1,332.
23 Insurance	10,068.	2,575.	5,730.	1,763.
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 Real Estate Taxes	709.	106.	460.	143.
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	32,568,353.	30,599,504.	1,289,572.	679,277.
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	11,664,699.	2	12,865,943.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	588,171.	4	701,110.
	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 2,530,528.		
	b Less: accumulated depreciation	10b 162,331.	1,445,789.	10c 2,368,197.
	11 Investments — publicly traded securities	119,106,776.	11	127,975,476.
	12 Investments — other securities. See Part IV, line 11	7,519,654.	12	7,824,811.
	13 Investments — program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	139,836,919.	15	143,953,833.
16 Total assets. Add lines 1 through 15 (must equal line 34)	280,162,008.	16	295,689,370.	
Liabilities	17 Accounts payable and accrued expenses	141,671.	17	169,191.
	18 Grants payable		18	
	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	10,591,949.	25	11,284,021.
	26 Total liabilities. Add lines 17 through 25	10,733,620.	26	11,453,212.
	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		70,966,042.	27	78,866,834.
28 Temporarily restricted net assets		181,509,005.	28	188,415,983.
29 Permanently restricted net assets		16,953,341.	29	16,953,341.
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		269,428,388.	33	284,236,158.
34 Total liabilities and net assets/fund balances		280,162,008.	34	295,689,370.

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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	58,092,034.
2	Total expenses (must equal Part IX, column (A), line 25)	2	32,568,353.
3	Revenue less expenses Subtract line 2 from line 1	3	25,523,681.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	269,428,388.
5	Net unrealized gains (losses) on investments	5	-10,715,911.
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	284,236,158.

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?		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	X	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both		
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		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		

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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

Employer identification number

47-0645958

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 it 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'.)	13961690.	25570841.	18679929.	161225238.	29848997.	249286695.
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	13961690.	25570841.	18679929.	161225238.	29848997.	249286695.
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)						146587238.
6 Public support. Subtract line 5 from line 4						102699457.

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	13961690.	25570841.	18679929.	161225238.	29848997.	249286695.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,742,883.	2,047,097.	2,085,474.	2,084,717.	2,595,846.	10,556,017.
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						259842712.
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	39.52 %
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	35.02 %
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"/>		

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Schedule A (Form 990 or 990-EZ) 2014

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. ▶ <input type="checkbox"/>						

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		
b 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		
c 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		
b 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		
c 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)		
b 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?		
c 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		
b 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		
c 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		
b 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?

11a

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

11b

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

11c

Section B. Type I Supporting Organizations

1 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

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

2

Section C. Type II Supporting Organizations

1 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)

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?

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)

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

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

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

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

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

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 C
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

- **Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.**
► **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

OMB No 1545-0047

2014**Open to Public Inspection****If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations. Complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) (see instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see instructions), then

- Section 501(c)(4), (5), or (6) organizations. Complete Part III.

Name of organization

Omaha Community Foundation

Employer identification number

47-0645958

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ► \$ _____
- 3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ _____ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ _____ 0.
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4 a Was a correction made? ☐ Yes ☐ No
b If 'Yes,' describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ► \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter 0.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

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

Schedule C (Form 990 or 990-EZ) 2014

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check ☐ if the filing organization checked box A and 'limited control' provisions apply

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount. Enter the amount from the following table in both columns															
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a. If zero or less, enter -0-															
i Subtract line 1f from line 1c. If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?															

☐ Yes ☐ No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

BAA

Schedule C (Form 990 or 990-EZ) 2014

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?	X		601.
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		6,000.
j Total. Add lines 1c through 1i			6,601.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

- | | Yes | No |
|---|-----|----|
| 1 Were substantially all (90% or more) dues received nondeductible by members? | | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | |
| 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? | | |

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

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

Name of the organization

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**

Employer identification number

Omaha Community Foundation

47-0645958

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	222	
2 Aggregate value of contributions to (during year)	18,274,104.	
3 Aggregate value of grants from (during year)	18,027,720.	
4 Aggregate value at end of year	242,496,731.	

- 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

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

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	19,187,151.	17,574,047.	15,393,132.	15,201,964.	13,611,581.
b Contributions		100,000.	1,023,224.	840,000.	864,700.
c Net investment earnings, gains, and losses	735,397.	2,232,842.	1,609,943.	-85,635.	1,354,586.
d Grants or scholarships	822,241.	535,327.	283,221.	399,052.	463,622.
e Other expenditures for facilities and programs	72,395.	70,344.	66,986.	67,252.	66,267.
f Administrative expenses	118,264.	114,067.	102,045.	96,893.	99,013.
g End of year balance	18,909,648.	19,187,151.	17,574,047.	15,393,132.	15,201,964.

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?

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land	1,435,000.			1,435,000.
b Buildings				
c Leasehold improvements				
d Equipment				
e Other	915,570.	179,958.	162,331.	933,197.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,368,197.

BAA

Schedule D (Form 990) 2014

Part VII Investments – Other Securities.

N/A

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

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

Part VIII Investments – Program Related.

N/A

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

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

Part IX Other Assets.

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) Beneficial Interest in CLAT	143,595,793.
(2) Other Assets	358,040.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15.) ▶	143,953,833.

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) Annuities Payable	2,384,355.
(3) Funds Held for Others	8,899,666.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) ▶	11,284,021.

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	47,376,123.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
	a Net unrealized gains (losses) on investments	2 a	-10,715,911.	
	b Donated services and use of facilities	2 b		
	c Recoveries of prior year grants	2 c		
	d Other (Describe in Part XIII)	2 d		
	e Add lines 2a through 2d	2 e	-10,715,911.	
3	Subtract line 2e from line 1		3	58,092,034.
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	4 a		
	b Other (Describe in Part XIII)	4 b		
	c Add lines 4a and 4b	4 c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	58,092,034.

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	32,568,353.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.			
	a Donated services and use of facilities	2 a		
	b Prior year adjustments	2 b		
	c Other losses	2 c		
	d Other (Describe in Part XIII.)	2 d		
	e Add lines 2a through 2d	2 e		
3	Subtract line 2e from line 1		3	32,568,353.
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	4 a		
	b Other (Describe in Part XIII)	4 b		
	c Add lines 4a and 4b	4 c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	32,568,353.

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 recognized 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.

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.

OMB No 1545-0047

2014

**Open to Public
Inspection**

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

Name of the organization

Omaha Community Foundation

Part I General Information on Grants and Assistance

Employer identification number

47-0645958

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) <u>Abbott Northwestern Hospital</u> <u>PO BOX 43 2925 Chicago Ave</u> <u>Minneapolis, MN 55407</u>	04-3643816 3		25,000.	0.			Health - General & Rehabilitative
(2) <u>Accelerated Schools of Overla</u> <u>10713 Barkley</u> <u>Overland Park, KS 66211</u>	20-3821478 3		7,000.	0.			Educational Institutions
(3) <u>ACLU Nebraska Foundation Inc.</u> <u>941 O Street Suite 706</u> <u>Lincoln, NE 68508</u>	23-7259984 3		20,000.	0.			Civil Rights, Social Action, Advoca
(4) <u>Admission Possible/College Po</u> <u>540 Fairview Ave. North Ste 3</u> <u>St. Paul, MN</u>	41-1968798 3		10,000.	0.			Educational Institutions
(5) <u>Ak-Sar-Ben Scholarship Fund</u> <u>6910 Pacific St. Ste. 102</u> <u>Omaha, NE 68106</u>	47-0447496 3		15,750.	0.			Philanthropy, Voluntarism, Grantmak
(6) <u>American Cancer Society</u> <u>9850 Nicholas St. Ste. 200</u> <u>Omaha, NE 68114</u>	13-1788491 3		33,650.	0.			Disease, Disorders, Medical Discipl
(7) <u>American Enterprise Institut</u> <u>1150 17th St. NW</u> <u>Washington, DC 20036</u>	53-0218495 3		50,000.	0.			Public, Society Benefit
(8) <u>American Heart Association</u> <u>9900 Nicholas St. Ste. 200</u> <u>Omaha, NE 68114</u>	13-5613797 3		30,000.	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								Employer Identification Number 47-0645958			
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				
Alaska Whale Foundation,4739 University Way NE 1239 Seattle, WA 98105 Total	91-1712495	501(C)(3)	50,000.00	0			Animal Related				
Allplay Foundation, Inc.,13414 Paul Street Omaha, NE 68154 Total	20-8418481	501(C)(3)	5,000.00	0			Recreation, Sports, Leisure, Athletics				
Alpine Theatre Project,c/o Luke Walrath P.O. Box 1959 Whitefish, MT 59937 Total	77-0626385	501(C)(3)	12,000.00	0			Arts, Culture, Humanities				
ALS Association - Keith Worthington Chapter,10730 Pacific Street Suite 103 Omaha, Angel Flight-Central,10 NW Richards Road Kansas City, MO 64116 Total	48-1021611	501(C)(3)	25,100.00	0			Disease, Disorders, Medical Disciplines				
Angels Among Us, Inc.,11918 Poppleton Plaza #2 Omaha, NE 68144 Total	43-1699607	501(C)(3)	11,300.00	0			Human Services				
Anti-Defamation League,333 S. 132nd Street Omaha, NE 68154 Total	20-4728470	501(C)(3)	8,500.00	0			Human Services				
Aqua Africa Inc.,1213 Jones St. Omaha, NE 68102 Total	13-1818723	501(C)(3)	15,000.00	0			Public, Society Benefit				
Archdiocese of Omaha,100 North 62nd St. Omaha, NE 68132 Total	20-5675703	501(C)(3)	6,000.00	0			International, Foreign Affairs & National Security				
Arthritis Foundation,600 North 93rd Street Suite 206 Omaha, NE 68114 Total	47-0376538	501(C)(3)	321,200.00	0			Religion, Spiritual Development				
Arts for All, Inc.,P. O. Box 31578 Omaha, NE 68131 Total	26-4639290	501(C)(3)	38,500.00	0			Disease, Disorders, Medical Disciplines				
At Ease USA,PO Box 24465 Omaha, NE 68124 Total	20-4777323	501(C)(3)	10,000.00	0			Arts, Culture, Humanities				
Autism Action Partnership,14301 FNB Parkway Suite 115 Omaha, NE 68154 Total	46-1555291	501(C)(3)	683,900.00	0			Human Services				
Ballet Nebraska,918 S 37th St. Omaha, NE 68105 Total	20-6892034	501(C)(3)	18,500.00	0			Disease, Disorders, Medical Disciplines				
	27-1093011	501(C)(3)	10,000.00	0			Arts, Culture, Humanities				

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization		Omaha Community Foundation		Employer Identification Number				47-0645958	
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		
Baptist Hospital Foundation, 8900 North Kendall Dr Miami, FL 33176 Total	59-1923401	501(C)(3)	25,000.00	0			Health - General & Rehabilitative		
Bellevue University, 1000 Galvin Road Bellevue, NE 68005 Total	47-0491571	501(C)(3)	172,500.00	0			Educational Institutions		
Bemis Center For Contemporary Arts, 724 S. 12th Street Omaha, NE 68102-3202 Total	47-0653927	501(C)(3)	128,250.00	0			Arts, Culture, Humanities		
Benson Baptist Church, 6319 Maple St Omaha, NE 68104 Total	47-0466296	501(C)(3)	37,200.00	0			Religion, Spiritual Development		
Beth El Synagogue, 14506 California Street Omaha, NE 68154 Total	47-0388140	501(C)(3)	80,940.00	0			Religion, Spiritual Development		
Bethany Lutheran Church, 5151 Northwest Radial Highway Omaha, NE 68104 Total	47-0386534	501(C)(3)	18,045.00	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)	85,475.00	0			Youth Development		
Bishop Eustace Preparatory School, Office of Organizational Advancement 5552 Rt. 70	21-0684909	501(C)(3)	10,000.00	0			Religion, Spiritual Development		
Black Family Health and Wellness Association, PO Box 111393 Omaha, NE 68111	47-0834701	501(C)(3)	17,000.00	0			Human Services		
Blue Barn Theatre, 614 South 11th Street Omaha, NE 68102 Total	47-0742394	501(C)(3)	12,000.00	0			Arts, Culture, Humanities		
Boys & Girls Clubs of the Midlands, 2610 Hamilton Street Omaha, NE 68131-1640 Total	47-0467350	501(C)(3)	36,026.04	0			Youth Development		
Briar Cliff University, 3303 Rebecca Street Institutional Advancement Office Sioux City, IA	42-0707124	501(C)(3)	10,000.00	0			Educational Institutions		
Broadway Dreams Foundation Corporation, 8965 Brockham Way Alpharetta, Brownell Talbot School, 400 N. Happy Hollow Blvd. Omaha, NE 68132 Total	26-4771520	501(C)(3)	70,000.00	0			Arts, Culture, Humanities		
	47-0376595	501(C)(3)	113,000.00	0			Educational Institutions		

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization		Employer Identification Number 47-0645958					
Omaha Community Foundation							
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
Cal State Fullerton Philanthropic Foundation, P.O. Box 6850 Fullerton, CA 92834-	33-0567945	501(C)(3)	25,000.00	0			Educational Institutions
CASA for Douglas County, 2412 St. Mary's Avenue Omaha, NE 68105 Total	35-2171298	501(C)(3)	12,100.00	0			Crime, Legal Related
Catholic Charities, 3300 North 60th Street Omaha, NE 68104 Total	47-0376612	501(C)(3)	11,000.00	0			Human Services
Cattlemens Ball of Nebraska, 2464 2nd Rd Wisner, NE 68791 Total	91-1812186	501(C)(3)	55,000.00	0			Philanthropy, Voluntarism, Grantmaking
Central Community College Foundation Inc., 2727 W Second St Suite 211 Hastings, NE	47-0728813	501(C)(3)	25,180.00	0			Educational Institutions
Central High School Foundation, Historic Library Building 1823 Harney St., Suite 203 Omaha, NE	91-1771983	501(C)(3)	5,250.00	0			Educational Institutions
Central Nebraska Humane Society, 1312 Sky Park Rd Grand Island, NE 68801 Total	47-0493705	501(C)(3)	6,000.00	0			Animal Related
Child Saving Institute, 4545 Dodge Street Omaha, NE 68132 Total	45-0489204	501(C)(3)	26,172.50	0			Human Services
Children's Hospital & Medical Center Foundation, 8401 West Dodge Road, #120	47-6105603	501(C)(3)	51,500.00	0			Health - General & Rehabilitative
Children's Respite Care Center, 5321 South 138th St. Omaha, NE 68137 Total	47-0718409	501(C)(3)	7,000.00	0			Human Services
Children's Scholarship Fund, 1111 No. 13th St Suite 101 Omaha, NE 68102 Total	47-0822724	501(C)(3)	35,700.00	0			Educational Institutions
Christ the King Church, 654 So. 86th Street Omaha, NE 68114 Total	47-0399849	501(C)(3)	82,250.00	0			Religion, Spiritual Development
Christian Worship Center, 1435 N. 15th Street Council Bluffs, IA 51501 Total	42-1407712	501(C)(3)	10,000.00	0			Religion, Spiritual Development
City of Rushville, Box 99 Rushville, NE 69360	47-6006342	501(C)(3)	25,000.00	0			Public, Society Benefit
Total							

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation				Employer Identification Number 47-0645958			
(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash	(f) FValuat	(g) Desc	(h) Purpose of Grant or Assistance
Colfax County School District No. 0058, c/o Adam Cerv PO Box 80 Clarkson, NE 68629 Total	47-0738347	501(C)(3)	7,000.00	0			Educational Institutions
College of Saint Mary, 7000 Mercy Road Omaha, NE 68106 Total	47-0424785	501(C)(3)	7,500.00	0			Educational Institutions
Community Information Trust, c/o Heritage Services 10050 Regency Circle, Suite 101	46-3502113	501(C)(3)	250,000.00	0			Arts, Culture, Humanities
Compassion In Action, Inc., 2001 N 35th St. P. O. Box 11483 Omaha, NE 68111 Total	36-3656313	501(C)(3)	10,000.00	0			Religion, Spiritual Development
Completely Kids, 2566 St. Mary's Avenue Omaha, NE 68105 Total	27-5111197	501(C)(3)	109,897.50	0			Youth Development
Comunidad Maya Pixan Ixim Reinforcing Our Roots, Living Our Maya Heritage, 4513 S 32nd	45-5539560	501(C)(3)	20,000.00	0			Arts, Culture, Humanities
Concordia Lutheran Schools of Omaha, Inc., 14258 W Maple Rd Omaha, NE 68164	91-1759397	501(C)(3)	25,000.00	0			Religion, Spiritual Development
Concordia University, 800 No. Columbia Avenue Seward, NE 68434 Total	47-0378777	501(C)(3)	24,800.00	0			Educational Institutions
Countryside Community Church, 8787 Pacific Street Omaha, NE 68114 Total	47-6000646	501(C)(3)	20,000.00	0			Religion, Spiritual Development
Creighton Preparatory School, 7400 Western Avenue Omaha, NE 68114 Total	47-0438012	501(C)(3)	34,200.00	0			Educational Institutions
Creighton University, 2500 California Plaza Office of Development Omaha, NE 68178 Total	47-0376583	501(C)(3)	223,675.00	0			Educational Institutions
CUES - Christian Urban Education Service, 2207 Wirt Street Omaha, NE 68110-2055 Total	47-0818922	501(C)(3)	110,500.00	0			Educational Institutions
CW Youth Resource Center - CW Boxing Club Hotline, 1510 Cass Street Omaha, NE 68102	47-0728264	501(C)(3)	10,000.00	0			Recreation, Sports, Leisure, Athletics
Cystic Fibrosis Foundation, 11917 Pierce Plaza Nebraska Chapter Omaha, NE 68144 Total	47-0527737	501(C)(3)	10,300.00	0			Disease, Disorders, Medical Disciplines

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization		Employer Identification Number 47-0645958					
Omaha Community Foundation							
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
Downtown Omaha, Inc. Foundation, P.O. Box 8312 Omaha, NE 68108 Total	31-1752228	501(C)(3)	78,000.00	0			Arts, Culture, Humanities
Drake University, Carnegie Hall 2507 University Avenue Des Moines, IA 50311 Total	42-0680460	501(C)(3)	32,500.00	0			Educational Institutions
Duchesne Academy, 3601 Burt Street Omaha, NE 68131 Total	47-0376614	501(C)(3)	9,750.00	0			Educational Institutions
Dundee Presbyterian Church, 5312 Underwood Avenue Omaha, NE 68132 Total	47-0378988	501(C)(3)	29,000.00	0			Religion, Spiritual Development
Durham Museum, 801 S. 10th Street Omaha, NE 68108-3299 Total	47-0556061	501(C)(3)	149,767.25	0			Arts, Culture, Humanities
Evangelical Lutheran Church in America, DGM/Global Mission Support 8765	91-1758010	501(C)(3)	25,000.00	0			Religion, Spiritual Development
Family Housing Advisory Services, 2401 Lake Street Ste 201 Omaha, NE 68111 Total	47-0526720	501(C)(3)	10,000.00	0			Human Services
Family Promise of Lawrence, PO Box 266 Lawrence, KS 66044 Total	26-2709610	501(C)(3)	10,000.00	0			Housing, Shelter
Father Flanagan's Boys Home/Boys Town, 14100 Crawford Street P. O. Box 7000	47-0376606	501(C)(3)	28,200.00	0			Religion, Spiritual Development
Film Streams, P.O. Box 8485 Omaha, NE 68108-4701 Total	20-2549448	501(C)(3)	27,950.00	0			Arts, Culture, Humanities
First Responders Foundation, 14916 Miami St. Omaha, NE 68116 Total	26-3499345	501(C)(3)	23,000.00	0			Public Safety, Disaster Preparedness & Relief
Fontenelle Forest, 1111 N. Bellevue Blvd. Bellevue, NE 68005-4000 Total	47-6026109	501(C)(3)	68,070.91	0			Environmental Quality Protection, Beautification
Food Bank for the Heartland, 10525 J Street Omaha, NE 68127 Total	47-0637701	501(C)(3)	79,975.00	0			Agriculture, Food, Nutrition
Foundation for Lake Chapala Charities Inc., 5802 Bob Bullock Suite 328C-4A Laredo, TX	30-0470692	501(C)(3)	10,000.00	0			Philanthropy, Voluntarism, Grantmaking

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization		Omaha Community Foundation		Employer Identification Number: 47-0645958			
(a) Name, address, and zip	(b) EIN	Code	(d) Cash Grant	(e) Non-Cash Grant	(f) Fair Value	(g) Description	(h) Purpose of Grant or Assistance
Fremont Area Community Foundation, 605 North Broad PO Box 182 Fremont, NE 68026-	47-0629642	501(C)(3)	25,000.00	0			Public, Society Benefit
Fremont Area United Way, 445 E 1st St., Suite #1 Fremont, NE 68025 Total	47-6000166	501(C)(3)	50,000.00	0			Philanthropy, Voluntarism, Grantmaking
Friends of Extension and 4-H in Douglas Sarpy County, 8015 W. Center Road Omaha, NE	56-2420037	501(C)(3)	13,000.00	0			Youth Development
Friends of Florence, 4545 W Street, N.W. Washington, DC 20007 Total	91-1878427	501(C)(3)	25,000.00	0			Arts, Culture, Humanities
Friends of York University Inc., 1725 I St, NW Suite 300 Washington, DC 20006-2423 Total	52-2066024	501(C)(3)	45,000.00	0			Educational Institutions
Gethsemane Lutheran Church, 4040 North 108th Street Omaha, NE 68164 Total	05-0753505	501(C)(3)	8,500.00	0			Religion, Spiritual Development
Girls Incorporated of Omaha, 2811 N. 45th Street Omaha, NE 68104-4518 Total	47-0562184	501(C)(3)	17,939.15	0			Youth Development
Glad Tidings Church, 7415 Hickory Omaha, NE 68124 Total	47-0545681	501(C)(3)	112,000.00	0			Religion, Spiritual Development
Good News Bears Club of Omaha, Inc., 3223 North 45th Street Omaha, NE 68104-3711	47-0780892	501(C)(3)	10,000.00	0			Youth Development
Goodwill Industries, Inc., 4805 N 72nd St Omaha, NE 68134 Total	47-0378996	501(C)(3)	34,864.12	0			Employment, Job Related
Grace Family Church, 174 Mount Pleasant Road Newtown, CT 06470 Total	22-2533874	501(C)(3)	6,200.00	0			Religion, Spiritual Development
Great Plains Black History Museum, 105 N 31st Ave Suite 219 Omaha, NE 68131 Total	51-0137279	501(C)(3)	10,000.00	0			Arts, Culture, Humanities
Greater Omaha Alliance for Business Ethics, Creighton University 2500 California	74-3244900	501(C)(3)	30,500.00	0			Public, Society Benefit
Greater Omaha Chamber Foundation, 1301 Harney Street Omaha, NE 68102 Total	47-0633685	501(C)(3)	119,500.00	0			Employment, Job Related

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization		Employer Identification Number: 47-0645958					
Omaha Community Foundation							
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) Description	(h) Purpose of Grant or Assistance
H Lee Moffitt Cancer Center and Research Institute Foundation Inc., 12902 Magnolia Dr.	59-3238636	501(C)(3)	150,000.00	0			Health - General & Rehabilitative
Habitat for Humanity of Omaha, 1701 N 24th St Omaha, NE 68110-2302 Total	36-3283625	501(C)(3)	104,350.00	0			Housing, Shelter
Hastings College Foundation, 11422 Miracle Hills Drive Suite 550 Omaha, NE 68154-9800	51-0247972	501(C)(3)	40,000.00	0			Educational Institutions
Heart Ministry Center, 2222 Binney Street Omaha, NE 68110 Total	81-0614816	501(C)(3)	31,481.00	0			Agriculture, Food, Nutrition
Heartland Family Service, 2101 So. 42nd Street Omaha, NE 68105 Total	47-0390618	501(C)(3)	83,750.00	0			Human Services
Heartland Hope Mission, 5210 South 21st Street Mission for All Nations Omaha, NE	14-1869352	501(C)(3)	5,840.00	0			Agriculture, Food, Nutrition
Heartland United Way, Inc., 1441 North Webb Road Grand Island, NE 68803 Total	47-0469492	501(C)(3)	10,000.00	0			Philanthropy, Voluntarism, Grantmaking
Heartland Workers Center, 4923 S. 24th Street Suite 3A Omaha, NE 68107-2763 Total	27-1709471	501(C)(3)	7,500.00	0			Human Services
Heritage Services, 10050 Regency Cir Ste 101 Omaha, NE 68114 Total	47-0731254	501(C)(3)	700,000.00	0			Philanthropy, Voluntarism, Grantmaking
Holt International Childrens Services, 1195 City View P.O. Box 2880 Eugene, OR 97402 Total	23-7257390	501(C)(3)	75,000.00	0			Human Services
Holy Name School, 2901 Fontenelle Blvd. Holy Name Church Omaha, NE 68104 Total	47-0378993	501(C)(3)	5,500.00	0			Educational Institutions
Hope Center, Inc., 2200 N. 20th Street Omaha, NE 68110-2202 Total	47-0826512	501(C)(3)	22,750.00	0			Youth Development
Inclusive Communities, 6001 Dodge St Room 122 Omaha, NE 68182-0868 Total	20-3290755	501(C)(3)	60,293.00	0			Civil Rights, Social Action, Advocacy
Institute for Priestly Formation, 2500 California Plaza c/o Creighton University Omaha, NE	52-1907182	501(C)(3)	6,250.00	0			Religion, Spiritual Development

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Continuation Sheet for Schedule I (Form 990)

Name of organization		Employer Identification Number					
Omaha Community Foundation		47-0645958					
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 Grant	(f) Fair Value	(g) Description	(h) Purpose of Grant or Assistance
Iowa State University, Financial Aid Office 0210	42-6004224	501(C)(3)	15,500.00	0			Educational Institutions
Beardshear Hall Ames, IA 50011 Total							
Iowa State University Foundation, 2505	42-1143702	501(C)(3)	23,122.50	0			Educational Institutions
University Blvd. Ames, IA 50010-8644 Total							
J's Braintrust Consulting Services Inc., 2505	45-2119142	501(C)(3)	18,000.00	0			Human Services
North 24th St., #211 Omaha, NE 68110 Total							
Jesuit Academy, 2311 No. 22nd Street Omaha,	47-0792128	501(C)(3)	8,250.00	0			Educational Institutions
NE 68110 Total							
Jewish Federation of Omaha, 333 S. 132nd	47-0384659	501(C)(3)	78,188.00	0			Philanthropy, Voluntarism,
Street Omaha, NE 68154 Total							Grantmaking
Jones Harrison Foundation, 3700 Cedar Lake	36-3414818	501(C)(3)	10,000.00	0			Human Services
Ave. Minneapolis, MN 55416 Total							
Joslyn Art Museum, 2200 Dodge Street Omaha,	47-0384577	501(C)(3)	183,910.06	0			Arts, Culture, Humanities
NE 68102-1292 Total							
Junior Achievement of the Midlands,	47-0468426	501(C)(3)	10,110.00	0			Educational Institutions
Inc., 13506 W Maple Rd Suite 101 Omaha, NE							
Justice for Our Neighbors, 2414 E Street	74-3195841	501(C)(3)	66,500.00	0			Human Services
Omaha, NE 68107 Total							
Juvenile Diabetes Research Foundation, 9202	23-1907729	501(C)(3)	20,850.00	0			Disease, Disorders, Medical
West Dodge Road, Ste 304 JDRF International							Disciplines
KANEKO, 1111 Jones Street Jun Kaneko	36-4261067	501(C)(3)	167,500.00	0			Arts, Culture, Humanities
Museum Omaha, NE 68102 Total							
Kansas State University, 102 Anderson Hall	48-0771751	501(C)(3)	6,000.00	0			Educational Institutions
Manhattan, KS 66506 Total							
Kicks for a Cure, Inc., P.O. Box 241603 Omaha,	20-8105379	501(C)(3)	7,414.00	0			Disease, Disorders, Medical
NE 68124 Total							Disciplines
Kids Can Community Center, Social Settlement	47-0376597	501(C)(3)	10,025.00	0			Human Services
Association of Omaha 4860 Q Street Omaha,							

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Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation							Employer Identification Number: 47-0645958		
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)FValueat	(g)Desc	(h)Purpose of Grant or Assistance		
King of Kings Lutheran Church,11615 "I" Street Omaha, NE 68137 Total	47-0520429	501(C)(3)	13,300.00	0			Religion, Spiritual Development		
Knights of Ak-Sar-Ben Foundation,6910 Pacific St Ste 102 Omaha, NE 68106 Total	47-0447496	501(C)(3)	64,900.00	0			Philanthropy, Voluntarism, Grantmaking		
Knowledge Network of Greater Omaha,Metropolitan Omaha Educational	47-0519509	501(C)(3)	16,000.00	0			Public, Society Benefit		
Kountze Memorial Lutheran Church,2650 Farnam Street Omaha, NE 68131 Total	47-0379757	501(C)(3)	20,000.00	0			Religion, Spiritual Development		
KVSS - Spirit Catholic Radio,13326 A Street VSS Catholic Communications Omaha, NE 68144	91-1857425	501(C)(3)	26,700.00	0			Religion, Spiritual Development		
Legal Aid of Nebraska,209 S 19th St Suite 200 Omaha, NE 68102 Total	47-0483506	501(C)(3)	55,018.00	0			Crime, Legal Related		
Leukemia & Lymphoma Society,12100 W. Center Rd Building 1, Suite 202 Omaha, NE	13-5644916	501(C)(3)	10,500.00	0			Disease, Disorders, Medical Disciplines		
Lifegate Church,15555 West Dodge Road Omaha, NE 68154 Total	23-7088203	501(C)(3)	30,000.00	0			Religion, Spiritual Development		
Literacy Center for the Midlands,324 S. 72nd St. Omaha, NE 68114 Total	47-0688932	501(C)(3)	22,100.00	0			Educational Institutions		
Living Hope Lutheran Church,4823 S. 168th St. Omaha, NE 68135 Total	47-0706240	501(C)(3)	26,400.00	0			Religion, Spiritual Development		
LSU Foundation,3838 West Lakeshore Drive Baton Rouge, LA 70808 Total	72-0620969	501(C)(3)	65,000.00	0			Animal Related		
Luther Memorial Lutheran Church,1031 Sunset Trail Omaha, NE 68132 Total	47-0438089	501(C)(3)	9,250.00	0			Religion, Spiritual Development		
Lutheran Family Services of Nebraska,124 South 24th Street Suite 230 Omaha, NE 68102	23-7267972	501(C)(3)	78,200.00	0			Human Services		
Lutheran School of Theology at Chicago,1100 E 55th St. Chicago, IL 60615 Total	36-2246704	501(C)(3)	25,000.00	0			Religion, Spiritual Development		

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Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation			Employer Identification Number 47-0645958				
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
Lynn University Inc.,3601 N Military Trail Boca Raton, FL 33437 Total	59-1023117	501(C)(3)	10,000.00	0			Educational Institutions
Madonna School,6402 N 71st Plz Omaha, NE 68104-4674 Total	47-0491332	501(C)(3)	8,250.00	0			Educational Institutions
Make-A-Wish Foundation of Nebraska,11836 Arbor Street Omaha, NE 68144 Total	47-0671096	501(C)(3)	12,722.50	0			Health - General & Rehabilitative
Marian High School,7400 Military Avenue Omaha, NE 68134-3351 Total	05-0664529	501(C)(3)	40,550.00	0			Educational Institutions
Mary Our Queen Church,3535 So. 119th Street Omaha, NE 68144 Total	47-0490634	501(C)(3)	15,000.00	0			Religion, Spiritual Development
Mayo Clinic,Department of Development 200 First Street SW Rochester, MN 55905 Total	41-6011702	501(C)(3)	52,500.00	0			Health - General & Rehabilitative
Merrymakers Association,12020 Shamrock Plaza Ste 200 Omaha, NE 68154 Total	47-0692363	501(C)(3)	16,750.00	0			Philanthropy, Voluntarism, Grantmaking
Micah House Corporation,1415 Avenue J Council Bluffs, IA 51501 Total	42-1292393	501(C)(3)	5,500.00	0			Housing, Shelter
Mid-America Council, Boy Scouts of America,12401 West Maple Road Omaha, NE 68104-4674 Total	47-0376545	501(C)(3)	39,700.00	0			Youth Development
Midlands Community Foundation,217 N Jefferson St Papillion, NE 68046 Total	51-0191738	501(C)(3)	347,744.16	0			Philanthropy, Voluntarism, Grantmaking
Millard Public Schools,5606 S. 147th Street Omaha, NE 68137 Total	47-6002642	501(C)(3)	50,000.00	0			Educational Institutions
MOSAIC,4980 South 118th Street Omaha, NE 68137 Total	11-3669999	501(C)(3)	34,500.00	0			Arts, Culture, Humanities
Mount Michael Benedictine School,22520 Mount Michael Road Elkhorn, NE 68022-3400	30-0299031	501(C)(3)	15,500.00	0			Educational Institutions
Museum of Danish America,Danish Immigrant Museum 2212 Washington St Elk Horn, IA 51501 Total	42-1204613	501(C)(3)	25,500.00	0			Arts, Culture, Humanities

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Continuation Sheet for Schedule I (Form 990)

Name of organization		Omaha Community Foundation		Employer Identification Number		47-0645958	
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
National Jewish Health, 1400 Jackson Street S731 Denver, CO 80206-2761 Total	74-2044647	501(C)(3)	50,000.00	0			Health - General & Rehabilitative
Nature Conservancy, 1007 Leavenworth St.	53-0242652	501(C)(3)	38,800.00	0			Environmental Quality Protection, Beautification
Nebraska Field Office Omaha, NE 68102 Total							
Nebraska Advanced Manufacturing Coalition, 1299 Farnam St., Suite 530 c/o	20-5544866	501(C)(3)	12,500.00	0			Community Improvement, Capacity Building
Nebraska AIDS Project, 250 S. 77th Street Suite A Omaha, NE 68114 Total	47-0786622	501(C)(3)	11,000.00	0			Health - General & Rehabilitative
Nebraska Appleseed Center for Law in the Public Interest, 941 O Street Suite 920 Lincoln,	47-0798343	501(C)(3)	10,250.00	0			Civil Rights, Social Action, Advocacy
Nebraska Children and Families Foundation, 215 Centennial Mall South Suite	91-1829974	501(C)(3)	20,000.00	0			Human Services
Nebraska Foundation for Cancer Research, 8714 Nicholas St. Omaha, NE 68114	46-2149214	501(C)(3)	13,229.76	0			Disease, Disorders, Medical Disciplines
Nebraska Freemasons Child Identification Program Inc., 1240 North 10th St. Lincoln, NE	20-8412381	501(C)(3)	10,000.00	0			Human Services
Nebraska Humane Society, 8929 Fort Street Omaha, NE 68134 Total	47-0378997	501(C)(3)	9,146.00	0			Animal Related
Nebraska Humanities Council, 215 Centennial Mall S. Suite 330 Lincoln, NE 68508-1836 Total	23-7359778	501(C)(3)	21,950.00	0			Arts, Culture, Humanities
Nebraska Lawyers Trust Account Foundation, P.O. Box 95103 Lincoln, NE 68509	36-3357241	501(C)(3)	10,545.00	0			Crime, Legal Related
Nebraska Lutheran Outdoor Ministries, 27416 Ranch Road Carol Joy Holling Camp Ashland,	47-0488319	501(C)(3)	35,000.00	0			Religion, Spiritual Development
Nebraska Medical Center - Nebraska Medicine, 987421 Nebraska Medical Center	91-1858433	501(C)(3)	12,000.00	0			Health - General & Rehabilitative
Nebraska Methodist Hospital Foundation, 8401 W. Dodge Road, #225 Omaha, NE 68114 Total	47-0595345	501(C)(3)	161,600.00	0			Health - General & Rehabilitative

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Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation		Employer Identification Number 47-0645958					
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 Grant	(f) Fair Value	(g) Description	(h) Purpose of Grant or Assistance
Nebraska Shakespeare Festival, Fine Arts Dept 2500 California Plaza Omaha, NE 68178 Total	47-0699092	501(C)(3)	22,000.00	0			Arts, Culture, Humanities
NET Foundation for Television, Bridget Robbins c/o Stefanie Norton-Lloyd 1800 North 33rd	23-7122088	501(C)(3)	27,363.20	0			Arts, Culture, Humanities
Nevis Public School, 210 Pleasant St. PO Box 138 Nevis, MN 56467 Total	41-6008266	501(C)(3)	21,000.00	0			Educational Institutions
No More Empty Pots, 8511 North 30th St. P.O. Box 12143 Omaha, NE 68112 Total	27-2427728	501(C)(3)	10,000.00	0			Human Services
North Omaha Contractors Alliance, 2505 N 24th St. Suite 409A Omaha, NE 68110 Total	27-1538750	501(C)(3)	10,000.00	0			Employment, Job Related
North Omaha Neighborhood Alliance, 3223 North 45th Street #310 Omaha, NE 68104	45-2696130	501(C)(3)	20,000.00	0			Community Improvement, Capacity Building
NorthStar Foundation, 4242 N 49th St. Omaha, NE 68104 Total	26-0494022	501(C)(3)	48,600.00	0			Youth Development
Nuckolls County Foundation, 145 E 4th St Superior, NE 68978 Total	47-0637939	501(C)(3)	40,000.00	0			Community Improvement, Capacity Building
Nursing Heart Inc., 1680 Highland Pkwy St. Paul, MN 55116 Total	46-1086098	501(C)(3)	20,500.00	0			Human Services
Ocean Reef Foundation Inc., Ocean Reef Cultural Center 200 Anchor Dr., Suite B Key	65-0509255	501(C)(3)	110,000.00	0			Philanthropy, Voluntarism, Grantmaking
Ocean Reef Protestant Chapel, 32 Ocean Reef Dr. Key Largo, FL 33037 Total	65-1002109	501(C)(3)	25,000.00	0			Religion, Spiritual Development
Omaha Archdiocesan Educational Foundation, 3300 North 60th St. Omaha, NE	47-0376538	501(C)(3)	30,000.00	0			Religion, Spiritual Development
Omaha Botanical Center Inc. - Lauritzen Gardens, 100 Bancroft St. Omaha, NE 68108-	47-0659701	501(C)(3)	525,450.00	0			Environmental Quality Protection, Beautification
Omaha by Design, 6001 Dodge St. c/o UNO CEC Building Omaha, NE 68182-0402 Total	45-4457803	501(C)(3)	153,701.80	0			Public, Society Benefit

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Continuation Sheet for Schedule I (Form 990)

Name of organization: Omaha Community Foundation		Employer Identification Number: 47-0645958					
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 Grant	(f) Fair Value	(g) Description of Grant or Assistance	(h) Purpose of Grant or Assistance
Omaha Children's Museum, 500 South 20th Street Omaha, NE 68102 Total	47-0594056	501(C)(3)	18,389.50	0			Arts, Culture, Humanities
Omaha Community Playhouse, 6915 Cass Street Omaha, NE 68132-2696 Total	47-0399856	501(C)(3)	6,639.15	0			Arts, Culture, Humanities
Omaha Conservatory of Music, 3504 S. 108th St. Omaha, NE 68144 Total	47-0834657	501(C)(3)	216,750.00	0			Arts, Culture, Humanities
Omaha Creative Institute, 1516 Cumming St. Omaha, NE 68102 Total	20-0033902	501(C)(3)	32,000.00	0			Arts, Culture, Humanities
Omaha Equestrian Foundation, 1004 Farnam St. Suite 400 Omaha, NE 68102 Total	27-3520778	501(C)(3)	39,000.00	0			Recreation, Sports, Leisure, Athletics
Omaha Healthy Kids Alliance, 5006 Underwood Ave Omaha, NE 68132 Total	20-5085175	501(C)(3)	259,517.63	0			Environmental Quality Protection, Beautification
Omaha Home for Boys, 4343 No. 52nd Street Omaha, NE 68104-9989 Total	47-0376529	501(C)(3)	5,322.50	0			Human Services
Omaha Housing Authority Foundation, 540 S. 27th Street Omaha, NE 68105 Total	47-0710782	501(C)(3)	10,000.00	0			Housing, Shelter
Omaha Multi-Sport Complex, 1004 Farnam St., Suite 400 Omaha, NE 68102 Total	45-5587726	501(C)(3)	40,000.00	0			Recreation, Sports, Leisure, Athletics
Omaha Performing Arts Society, 1200 Douglas Street Holland Performing Arts Center Omaha, NE 68102 Total	47-0832480	501(C)(3)	150,950.00	0			Arts, Culture, Humanities
Omaha Public Library Foundation, 215 South 15th Street Omaha, NE 68102 Total	36-3411575	501(C)(3)	42,700.00	0			Educational Institutions
Omaha Schools Foundation, 3215 Cumming Street Omaha, NE 68131-2024 Total	36-3301526	501(C)(3)	10,850.00	0			Educational Institutions
Omaha Sister Cities Association Inc., P.O. Box 241693 Omaha, NE 68124 Total	47-6038868	501(C)(3)	7,500.00	0			Community Improvement, Capacity Building
Omaha Street School, 3223 No. 45th Street Omaha, NE 68104 Total	47-0811597	501(C)(3)	6,000.00	0			Educational Institutions

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Continuation Sheet for Schedule I (Form 990)

Name of organization **Omaha Community Foundation** Employer Identification Number **47-0645958**

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
Omaha Symphony Association, 1905 Harney St Suite 400 Omaha, NE 68102-2318 Total	47-6039304	501(C)(3)	96,067.25	0			Arts, Culture, Humanities
Omaha Zoo Foundation, 3701 So. 10th Street Omaha, NE 68107 Total	36-3297716	501(C)(3)	33,912.00	0			Animal Related
One World Community Health Centers, Inc., 4920 South 30th St., Suite 103 Omaha, NE	47-0548990	501(C)(3)	24,000.00	0			Health - General & Rehabilitative
Open Door Mission (Rescue Mission), P.O. Box 8340 2828 North 23rd St. East Omaha, NE	47-0411375	501(C)(3)	34,900.00	0			Human Services
Opera Omaha, 1850 Farnam St Omaha, NE 68102 Total	47-6032795	501(C)(3)	63,691.32	0			Arts, Culture, Humanities
Pace University, Dyson College of Arts & Sciences 41 Park Row, 16th Floor New York, NY	13-5562314	501(C)(3)	25,000.00	0			Arts, Culture, Humanities
Partnership 4 Kids, All Our Kids, Inc. 1004 Farnam St., # 200 Omaha, NE 68102 Total	47-0762798	501(C)(3)	8,250.00	0			Educational Institutions
PATH International, Professional Association of Therapeutic Horsemanship PO Box 33150	23-7169769	501(C)(3)	7,000.00	0			Health - General & Rehabilitative
Phoenix Academy Day School, 1110 N 66th St Omaha, NE 68132 Total	02-0732028	501(C)(3)	261,544.41	0			Educational Institutions
Platte Institute for Economic Research Inc., 900 S 74th Plz Ste 400 Omaha, NE 68114 Total	20-8809060	501(C)(3)	21,000.00	0			Educational Institutions
Poor Clare Sisters of Omaha, Franciscan Monastery of St. Clare 22625 Edgewater Rd	47-0358815	501(C)(3)	24,650.00	0			Religion, Spiritual Development
Project Harmony, 11949 Q Street Omaha, NE 68137 Total	47-0789054	501(C)(3)	25,350.00	0			Crime, Legal Related
Project Interfaith ***** 4383 Nicholas St., #302 Omaha, NE 68131 Total	33-1211909	501(C)(3)	47,200.00	0			Civil Rights, Social Action, Advocacy
Purpose Driven Advocacy Center Inc., 6401 N 56th St Attn: Business Office Omaha, NE 68104	27-0803749	501(C)(3)	11,000.00	0			Arts, Culture, Humanities

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Continuation Sheet for Schedule I (Form 990)

Name of organization		Employer Identification Number					
Omaha Community Foundation		47-0645958					
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
Quillayute Valley School District Number 402,411 Spartan Avenue Forks, WA 98331-	91-1012362	501(C)(3)	9,000.00	0			Educational Institutions
Rea Valley Volunteer Fire Department, P.O. Box 913 Flippin, AR 72634 Total	71-0659808	501(C)(3)	7,523.72	0			Public, Society Benefit
Rebuilding Together Omaha, 2316 S 24th St Omaha, NE 68108-3818 Total	47-0793980	501(C)(3)	10,000.00	0			Public, Society Benefit
Riekes Center for Human Enhancement, 3455 Edison Way Menlo Park, CA 94025 Total	94-3224127	501(C)(3)	25,000.00	0			Community Improvement, Capacity Building
Rios De Alabanza, 4815 Harrison St. Omaha, NE 68157 Total	47-0796647	501(C)(3)	10,000.00	0			Arts, Culture, Humanities
Sacred Heart Church, 2207 Wirt Street Omaha, NE 68110 Total	47-0415808	501(C)(3)	6,500.00	0			Religion, Spiritual Development
Sacred Heart School, 2207 Wirt Street Omaha, NE 68110 Total	47-0415808	501(C)(3)	100,500.00	0			Educational Institutions
Salvation Army, 10755 Burt St. Omaha, NE 68114-2065 Total	36-2167910	501(C)(3)	457,885.00	0			Human Services
SAR Unit, Inc., K-9 Search and Rescue 813 Highway 1 Murray, NE 68409-3702 Total	47-0804764	501(C)(3)	10,000.00	0			Animal Related
Saving Grace Perishable Food Rescue Inc., 4611 S 96th St Ste 112 Omaha, NE 68127 Total	46-1852863	501(C)(3)	10,000.00	0			Human Services
Schwab Charitable Fund, 211 Main St. San Francisco, CA 94105 Total	31-1640316	501(C)(3)	200,000.00	0			Philanthropy, Voluntarism, Grantmaking
Service Corps of Lutheran Business Executives, 533 N 86th St Omaha, NE 68114	26-3360275	501(C)(3)	12,500.00	0			Religion, Spiritual Development
Siena Francis House, P.O. Box 217 Downtown Station Omaha, NE 68101-0217 Total	47-0601005	501(C)(3)	75,800.00	0			Housing, Shelter
Skills USA Inc., 301 Centennial Mall S 6th Floor Lincoln, NE 68508 Total	47-6057607	501(C)(3)	10,000.00	0			Human Services

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Continuation Sheet for Schedule I (Form 990)

Name of organization Omaha Community Foundation			Employer Identification Number 47-0645958			
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 Grant	(f) Fair Value	(g) Description of Grant or Assistance
SNAP! Productions Inc., 3225 California St. PO Box 8464 Omaha, NE 68108-0464 Total	47-0785485	501(C)(3)	9,200.00	0		Arts, Culture, Humanities
Southern Methodist University, P. O. Box 750402 Dallas, TX 75275-0402 Total	75-0800689	501(C)(3)	9,750.00	0		Educational Institutions
St. Augustine Indian Mission, P. O. Box GG 1 Mission Road South Winnebago, NE 68071-	47-0398898	501(C)(3)	41,250.00	0		Religion, Spiritual Development
St. Columbkille Catholic Church, 200 East 6th Street Papillion, NE 68046 Total	47-0469648	501(C)(3)	7,000.00	0		Religion, Spiritual Development
St. John's University, P. O. Box 2222 Collegeville, MN 56321 Total	45-3656162	501(C)(3)	75,000.00	0		Educational Institutions
St. Jude's Children's Research Hospital, 501 St. Jude Place Memphis, TN 38105 Total	62-0646012	501(C)(3)	10,000.00	0		Health - General & Rehabilitative
St. Louis Public Schools Foundation, 801 North 11th Street St. Louis, MO 63101 Total	43-1813849	501(C)(3)	23,500.00	0		Educational Institutions
St. Margaret Mary Church, 6116 Dodge Street Bookkeeping Dept. Omaha, NE 68132-2114	47-0429417	501(C)(3)	25,000.00	0		Religion, Spiritual Development
St. Michael Lutheran Church, 13232 Blondo Street Omaha, NE 68164 Total	47-0641425	501(C)(3)	25,000.00	0		Religion, Spiritual Development
St. Patrick's Catholic Church, 422 E. 4th Street Fremont, NE 68025 Total	47-0380478	501(C)(3)	31,000.00	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)	50,000.00	0		Religion, Spiritual Development
St. Pius X/St. Leo School, 6905 Blondo Street Omaha, NE 68104 Total	47-0424937	501(C)(3)	50,000.00	0		Educational Institutions
St. Vincent de Paul Catholic Church, 14330 Eagle Run Drive Omaha, NE 68164 Total	47-0748573	501(C)(3)	57,000.00	0		Religion, Spiritual Development
St. Wenceslaus Catholic Church and School, 15353 Pacific Street Omaha, NE 68154	47-0647888	501(C)(3)	60,200.00	0		Religion, Spiritual Development

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Continuation Sheet for Schedule I (Form 990)

Name of organization. Omaha Community Foundation		Employer Identification Number 47-0645958					
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 Grant	(f) Fair Value	(g) Description	(h) Purpose of Grant or Assistance
Stanford University, 326 Galvez St 3rd Floor Stanford, CA 94305 Total	94-1156365	501(C)(3)	25,000.00	0			Educational Institutions
Stanton Historical Society, P. O. Box 231 Stanton, IA 51573 Total	42-1380754	501(C)(3)	10,000.00	0			Arts, Culture, Humanities
Stephen Center, 2723 Q Street Omaha, NE 68107 Total	36-3363994	501(C)(3)	105,950.00	0			Housing, Shelter
Strategic Air & Space Museum, SAC Museum 28210 West Park Highway Ashland, NE 68003	47-0619646	501(C)(3)	55,200.00	0			Arts, Culture, Humanities
Sts. Peter & Paul Catholic Church, 5912 South 36th Street Omaha, NE 68107 Total	47-0376899	501(C)(3)	8,000.00	0			Religion, Spiritual Development
Sun Devil Club/Sun Angel Foundation Inc., 500 E Veterans Way PO Box 872205 Tempe, AZ	86-0138459	501(C)(3)	32,000.00	0			Community Improvement, Capacity Building
Table Grace Ministries, 1611 1/2 Farnam St Omaha, NE 68102 Total	26-2928095	501(C)(3)	7,237.00	0			Arts, Culture, Humanities
TeamMates Mentoring Program, 11850 Nicholas Street Suite 120 Omaha, NE 68154-	47-0840990	501(C)(3)	61,750.00	0			Crime, Legal Related
Ted E. Bear Hollow, 7811 Farnam Dr Omaha, NE 68114 Total	47-0838482	501(C)(3)	10,000.00	0			Youth Development
Tekamah-Herman Public Schools Foundation, 112 North 13th Tekamah, NE	47-0738777	501(C)(3)	14,885.00	0			Educational Institutions
Tides Foundation, PO Box 29903 San Francisco, CA 94129 Total	51-0198509	501(C)(3)	7,000.00	0			Philanthropy, Voluntarism, Grantmaking
Together, Inc., 812 S 24th St. Omaha, NE 68108 Total	47-0589290	501(C)(3)	11,500.00	0			Human Services
Twin Rivers YMCA, 6100 Twin Rivers Circle Valley, NE 68064 Total	47-0376586	501(C)(3)	7,300.00	0			Human Services
UNF Charitable Gift Fund, 1010 Lincoln Mall Ste 300 Lincoln, NE 68508 Total	20-0288992	501(C)(3)	13,000.00	0			Educational Institutions

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization		Omaha Community Foundation		Employer Identification Number 47-0645958			
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
United States Equestrian Federation, Inc., 4047 Iron Works Parkway Lexington, KY 40211 Total	56-2350714	501(C)(3)	25,000.00	0			Recreation, Sports, Leisure, Athletics
United States Pony Clubs, Inc., 4041 Iron Works Parkway Lexington, KY 40511 Total	61-1352306	501(C)(3)	10,000.00	0			Recreation, Sports, Leisure, Athletics
United Way of the Midlands, Finance Department 2201 Farnam Street Omaha, NE	47-0376605	501(C)(3)	445,871.59	0			Philanthropy, Volunteering, Grantmaking
University of Iowa Foundation, P. O. Box 4550 Iowa City, IA 52244-4550 Total	42-0796760	501(C)(3)	25,000.00	0			Educational Institutions
University of Miami, PO Box 025388 Miami, FL 33102-9811 Total	59-0624458	501(C)(3)	42,500.00	0			Educational Institutions
University of Nebraska Foundation, 2285 S. 67th Street, Ste 200 Omaha, NE 68106 Total	47-0379839	501(C)(3)	1,306,765.38	0			Educational Institutions
University of Nebraska Foundation, P. O. Box 82555 Lincoln, NE 68501-2555 Total	47-0379839	501(C)(3)	316,200.00	0			Educational Institutions
University of Notre Dame, P. O. Box 519 1100 Grace Hall Notre Dame, IN 46556 Total	35-0868188	501(C)(3)	15,000.00	0			Educational Institutions
UNMC - Fred & Pamela Buffett Cancer Center, 986805 Nebraska Medical Center Omaha, NE 68198-6805 Total	47-0049123	501(C)(3)	20,550.00	0			Educational Institutions
Urban League of Nebraska, 3040 Lake Street Omaha, NE 68111-3700 Total	47-0384575	501(C)(3)	11,628.69	0			Human Services
US Bobsled & Skeleton Federation Inc., 1631 Mesa Avenue Copper Building, Suite A Colorado Springs, CO 80906 Total	16-1172380	501(C)(3)	31,000.00	0			Recreation, Sports, Leisure, Athletics
Victory Boxing Club, 3009 R Street Omaha, NE 68107 Total	20-3218646	501(C)(3)	20,000.00	0			Recreation, Sports, Leisure, Athletics
Visiting Nurse Health Services, 12565 West Center Rd, Ste 100 Omaha, NE 68144 Total	47-0690286	501(C)(3)	5,200.00	0			Health - General & Rehabilitative

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization		Omaha Community Foundation		Employer Identification Number		47-0645958	
(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
Voice Advocacy Center, 6655 Sorenson Pkwy Omaha, NE 68152 Total	45-4619431	501(C)(3)	45,000.00	0			Educational Institutions
Volunteers Assisting Seniors, 1941 South 42nd Street Suite 312 Omaha, NE 68105 Total	47-0617717	501(C)(3)	10,165.00	0			Human Services
Water's Edge United Methodist Church, 18035 Oak St. Omaha, NE 68130 Total	45-3789126	501(C)(3)	21,400.00	0			Religion, Spiritual Development
Wayne State College Foundation, 1111 Main Street Wayne, NE 68787 Total	47-6032870	501(C)(3)	10,000.00	0			Educational Institutions
Westside Community Schools Foundation, 909 S. 76th St. Omaha, NE 68114 Total	47-0560469	501(C)(3)	59,000.00	0			Educational Institutions
Whitefish Community Foundation Inc., P.O. Box 1060 Whitefish, MT 59937 Total	81-0533002	501(C)(3)	30,000.00	0			Educational Institutions
WHY ARTS Inc., 1030 S 111th Plaza Omaha, NE 68154 Total	36-3747722	501(C)(3)	12,100.00	0			Health - General & Rehabilitative
Willa Cather Foundation, 413 North Webster Street Red Cloud, NE 68970 Total	47-0485401	501(C)(3)	10,100.00	0			Arts, Culture, Humanities
Women's Center for Advancement, 222 South 29th Street WCA Omaha, NE 68131 Total	27-3205476	501(C)(3)	16,541.32	0			Human Services
Women's Fund of Omaha, 7602 Pacific Street Suite 300 Omaha, NE 68114 Total	47-0840885	501(C)(3)	6,900.00	0			Human Services
World Vision, Inc., 34834 Weyerhaeuser Way South PO Box 9716 Federal Way, WA 98063 Total	95-1922279	501(C)(3)	7,340.00	0			Human Services

2014

Continuation Sheet for Schedule I (Form 990)

Name of organization		Omaha Community Foundation						Employer Identification Number		47-0645958	
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				
World-Herald Goodfellows Charities, Inc., 1314 Douglas Street Suite 125 Omaha, NE 68102	47-6000559	501(C)(3)	20,550.00	0			Human Services				
YMCA of Omaha/Council Bluffs, 430 S 20th St Omaha, NE 68102 Total	47-0376586	501(C)(3)	17,745.54	0			Human Services				
Youth Emergency Services, 2679 Farnam Street, Ste 205 Omaha, NE 68131 Total	47-0586898	501(C)(3)	46,200.00	0			Human Services				

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 organization, 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

47-0645958

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 b

2

4 a

4 b

4 c

5 a

5 b

6 a

6 b

7

8

9

X

X

X

X

X

X

X

X

X

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 R. Boyd	(i) 183,888.	(ii) 44,175.	(iii) 108.	9,882.	7,198.	245,251.	0.
1 President & CEO	(ii) 0.	0.	0.	0.	0.	0.	0.
Mike Leighton	(i) 0.	(ii) 24,875.	(iii) 0.	1,208.	0.	26,083.	0.
2 CEO	(ii) 0.	0.	0.	0.	0.	0.	0.
3	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
4	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
5	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
6	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
7	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
8	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
9	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
10	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
11	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
12	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
13	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
14	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
15	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
16	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.

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Schedule J (Form 990) 2014

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

Employer identification number

47-0645958

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	62	9,301,425.	FMV
10 Securities — Closely held stock		1	121,110.	FMV
11 Securities — Partnership, LLC, or trust interests	X	2	915,570.	FMV
12 Securities — Miscellaneous		3	70,765.	FMV
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

Name of the organization

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**

Employer identification number

Omaha Community Foundation

47-0645958

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

A copy of the return is e-mailed to the Board for review before being filed with the IRS. Each director reviews the 990 and any changes are made accordingly.

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

A conflict of interest letter is sent each year to all directors. Upon receipt of the letter, a form is filled out by the directors disclosing all conflicts. The form is returned to the organizations and kept on file for references.

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

An evaluation form is sent to all board members for their rating and comments. Once the evaluations are received the CEO meets with the Chairman, Vice Chairman and Chairman of the Governance Committee to discuss the review. The compensation committee then meets to discuss salary recommendations. They are given either market analysis from an outside HR consultant or the Council on Foundations salary survey results. The salary recommendation is discussed and voted on in executive session at the next quarterly meeting. Minutes are kept for each meeting.

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

Employees meet on a regular basis with their supervisor. A performance evaluation is given once a year and any salary adjustments are made at that time.

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

The governing documents, conflict of interest policy and financial statements are kept on file at our office at the location of 302 S. 36th St. Suite 100 Omaha, NE 68131 and made available upon request.

SCHEDULE R
(Form 990)Department of the Treasury
Internal Revenue Service

Name of the organization

Omaha Community Foundation

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.

OMB No 1545-0047

2014Open to Public
Inspection

Employer identification number

47-0645958

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) Mammel Family Foundation 8501 Indian Hills Drive Omaha, NE 68114 47-0784607	Charitable	NE	501(c)3	11a	N/A		X
(2) Amy L. Scott Family Foundation 11422 Miracle Hills Dr, Suite 408 Omaha, NE 68154 36-4071890	Charitable	NE	501(c)3	11a	N/A		X
(3) Parker Family Foundation 11422 Miracle Hills Dr, Suite 408 Omaha, NE 68154 36-4071893	Charitable	NE	501(c)3	11a	N/A		X
(4) The McGowan Family Foundation 302 S 36th St, Suite 100 Omaha, NE 68131 47-0795668	Charitable	NE	501(c)3	11a	N/A		X

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
							Yes	No		Yes	No	
(1) -----												

(2) -----												

(3) -----												

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

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

(2) -----									

(3) -----									

Part V Transactions With Related Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**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) Mammel Family Foundation	c	35,000.	
(2) Mammel Family Foundation	l	95,668.	
(3) Amy L. Scott Family Foundation	c	56,000.	
(4) Amy L. Scott Family Foundation	l	20,000.	
(5) Parker Family Foundation	c	126,500.	
(6) Parker Family Foundation	l	20,000.	

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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).

Part II Continuation of Identification of Related Tax-Exempt Organizations

(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
William & Ruth Scott Family Foundation 302 S 36th St, Suite 100 Omaha, NE 68131 47-0815787	Charitable	NE	501(c)3	11a	N/A		X
The Nelson Family Foundation 302 S 36th Street, Suite 100 Omaha, NE 68131 91-1876884	Charitable	NE	501(c)3	11a	N/A		X
Amis Family Foundation 302 S 36th Street, Suite 100 Omaha, NE 68131 47-0799603	Charitable	NE	501(c)3	11a	N/A		X
The Faith Charitable Trust 501 Bay Villa Lane Naples, FL 34108 47-0685423	Charitable	NE	501(c)3	11a	N/A		X
Maginn Family Foundation 302 South 36th Street, Suite 100 Omaha, NE 68131 47-0873687	Charitable	NE	501(c)3	11a	N/A		X
The Enrichment Foundation 302 S 36th St, Suite 100 Omaha, NE 68131 47-0795584	Charitable	NE	501(c)3	11a	N/A		X
Carmen & John Gottschalk Foundation 15671 California St. Omaha, NE 68118 34-2001068	Charitable	NE	501(c)3	11a	N/A		X
Dixon Family Foundation 11422 Miracle Hills Dr, Suite 408 Omaha, NE 68154 36-4071611	Charitable	NE	501(c)3	11a	N/A		X
The David Scott Foundation 11422 Miracle Hills Dr, Suite 408 Omaha, NE 68154 36-4071892	Charitable	NE	501(c)3	11a	N/A		X

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(A) Name of related organization	(B) Transaction type (a-s)	(C) Amount involved	(D) Method of determining amount involved
The McGowan Family Foundation	c	170,000.	
The McGowan Family Foundation	1	59,376.	
William & Ruth Scott Family Foundation	c	45,000.	
William & Ruth Scott Family Foundation	1	54,835.	
The Nelson Family Foundation	1	12,047.	
Amis Family Foundation	1	13,704.	
The Faith Charitable Trust	c	24,000.	
The Faith Charitable Trust	1	24,979.	
Maginn Family Foundation	1	7,998.	
The Enrichment Foundation	1	122,119.	
Carmen & John Gottschalk Foundation	1	12,968.	
Dixon Family Foundation	1	20,000.	
The David Scott Foundation	1	20,000.	
Suzanne & Walter Scott Foundation	c	50,000.	
Suzanne & Walter Scott Foundation	1	100,000.	
All Our Kids, Inc.	1	20,234.	
Southwest Iowa Foundation	c	215,349.	
Southwest Iowa Foundation	1	195,000.	

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

[illegible]