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

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OMB No 1545 0052 2014

Open to Public Inspection

\*Department of the Treasury Internal Revenue Service

For cal	endar year 2014, or tax year beginning	, 2014	and ending	•	
	Y DURHAM FAMILY FOUNDATION	· · · · · · · · · · · · · · · · · · ·	A	47-0830374	
	OAK CIRCLE A, NE 68124		[8	Telephone number (see inst (402) 390-039	
		_	c	If exemption application is	pending, check here 🕒 🗌
<b>G</b> Ch	eck all that apply Initial return Final return	Initial return of a form Amended return	ner public charity	1 Foreign organizations, chec	
H Che	Address change   eck type of organization.   X Section 501	Name change (c)(3) exempt private for	oundation	2 Foreign organizations meet here and attach computation	
	Section 4947(a)(1) nonexempt charitable tr		private foundation E	If private foundation status under section 507(b)(1)(A)	
	m Part II, column (c), line 16)	Other (specify)  column (d) must be on	JF	If the foundation is in a 60- under section 507(b)(1)(B)	
Part	22/333/233.				<del></del>
	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (attach schedule) 2 Ck I if the foundn is not required to attach Sch B	600,000.			
	3 Interest on savings and temporary cash investments	107.	107	. 107.	
	4 Dividends and interest from securities.	918,735.	918,735		<del></del>
	5 a Gross rents				
	<b>b</b> Net rental income or (loss)				
Ŗ	6 a Net gain or (loss) from sale of assets not on line 10	289,039.			
E V	b Gross sales price for all assets on line 6a 8, 952, 608.		000 000		***************************************
Ė	7 Capital gain net income (from Part IV, line 2)		289,039		·
Ň	8 Net short term capital gain 9 Income modifications			22,511.	······································
Ě	10 a Gross sales less returns and allowances.				:
	<b>b</b> Less Cost of goods sold				
	C Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	-64 047	_61 017	-61 017	
	SEE STATEMENT 1  12 Total Add lines 1 through 11	-64,847. 1,743,034.	-64,847 1,143,034		
	13 Compensation of officers, directors, trustees, etc	1,743,034.	1,140,004	070,300.	
	14 Other employee salaries and wages		-		
	15 Pension plans, employee benefits				
А	16a Legal fees (attach schedule) SEE ST 2	1,739.	1,739		
D M	<b>b</b> Accounting fees (attach sch) SEE ST 3	2,345.	2,345	•	
I N	c Other prof fees (attach sch) SEE ST 4	93,127.	93,127		
PS	17 Interest				
E T	18 Taxes (attach schedule)(see instrs) SEE STM 5	34,692.	34,692		
A A	19 Depreciation (attach sch) and depletion			MEGEL	
NV	20 Occupancy			-	. 1991
GÉ	21 Travel, conferences, and meetings			100 may 10	2015
A E N X	22 Printing and publications			NAI II	
D P E N	23 Other expenses (attach schedule)			OGDEN	I, UT
S E	24 Total operating and administrative expenses Add lines 13 through 23	131,903.	131,903	A	
S	25 Contributions, gifts, grants paid STMT 6	797,150.	131,303	•	797,150.
	26 Total expenses and disbursements. Add lines 24 and 25	929,053.	131,903	. 0.	797,150.
	27 Subtract line 26 from line 12	727,033.	131, 303		131,130.
	a Excess of revenue over expenses				•
	and disbursements	813,981.	1 011 101		
	b Net investment income (if negative, enter 0)		1,011,131	876,506.	
BAA F	C Adjusted net income (if negative, enter 0)	uctions	TEEA0504L 12/1		Form <b>990-PF</b> (2014)

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FD.	1	Attached schedules and amounts in the description	Beginning of year	End o	f year
Par	111	Balance Sheets column should be for end of year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	2,532,252.	2,376,386.	2,376,386.
	3	Accounts receivable	, , , , , , , , , , , , , , , , , , , ,		
		Less allowance for doubtful accounts		•	
	4	Pledges receivable			
		Less. allowance for doubtful accounts			
	5	Grants receivable .			
	6	Receivables due from officers, directors, trustees, and other			
	1	disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach sch). \( \sum_{} \) \( \	STATEMENT 7		
S		Less. allowance for doubtful accounts	459,878.	559,878.	559,878.
Š	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges		<del></del>	
Š	10 a	Investments – U S. and state government obligations (attach schedule)	70,983.		
	ь	Investments — corporate stock (attach schedule)			
	c	Investments — corporate bonds (attach schedule) STATEMENT 8	18,042,732.	19,766,035.	20,055,369.
	11	Investments — land, buildings, and equipment, basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)	789,221.	• •	
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe SEE STATEMENT 9 )		7,500.	7,500.
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	21,895,066.	22,709,799.	22,999,133.
L	17	Accounts payable and accrued expenses.	21,030,000.	<u>uu,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
ļ	18	Grants payable			
A B	19	Deferred revenue			
- !	20	Loans from officers, directors, trustees, & other disqualified persons			
ī	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe ► )			-
Ė					
<u>s</u>	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted			
E U	25	Temporarily restricted			
D	26	Permanently restricted			
A S S A E L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
OE	29	Retained earnings, accumulated income, endowment, or other funds	21,895,066.	22,709,799.	
RS	30	Total net assets or fund balances (see instructions)	21,895,066.	22,709,799.	
	31	Total liabilities and net assets/fund balances (see instructions)	21,895,066.	22,709,799.	
Par	F BEE /	Analysis of Changes in Net Assets or Fund Balance		22, 109, 199.	
				a a weth	· · · · · · · · · · · · · · · · · · ·
1	end-c	net assets or fund balances at beginning of year — Part II, colun f-year figure reported on prior year's return)	nn (a), nne 30 (must agn	1	21,895,066.
2	Enter	amount from Part I, line 27a		2	813,981.
3	Other i	increases not included in line 2 (itemize)	10	3	752.
4	Add I	ines 1, 2, and 3		4	22,709,799.
		ses not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) -	- Part II, column (b), line	e 30	22,709,799.

Pa	rt 10   Capital Gains and I	Losses for Tax on Investme	III IIICOIIIE			
	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)  (b) How acquired P - Purchas D - Donate					(d) Date sold (month, day, year)
1 :	a SEE ATTACHED US BAN	K STATEMENT		P	VARIOUS	VARIOUS
	b SEE ATTACHED US BAN	K STATEMENT		P	VARIOUS	VARIOUS
	c SEE ATTACHED US BAN	K STATEMENT		P	VARIOUS	VARIOUS
	d					
	e	(0.5	(3) 0 1 11 1	<del></del>	(1) (	(1)
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale	•	(h) Gain or (e) plus (f) m	inus (g)
	a 1,359,797.		1,344			14,839.
	b 1,926,603.		1,918		<del></del>	7,672. 266,528.
	c 5,666,208.		5,399	, 660.		200, 328.
	<u> </u>					
		ng gain in column (h) and owned by	the foundation on 12/31/69		(I) Gains (Colu	ımn (h)
	(i) Fair Market Value as of 12/31/69 (j) Adjusted basis over column (i) over column (j), if any		(i) g	ain minus column (k an -0-) or Losses (fr	), but not less	
	a			_		14,839.
	b					7,672.
(	c					266,528.
(	d					
	e				т	
2	Capital gain net income or (net	capital loss).	enter in Part I, line 7 der -0- in Part I, line 7	2		289,039.
3	Net short-term capital gain or (	loss) as defined in sections 1222(5)	and (6).			
		8, column (c) (see instructions) If	(loss), enter -0-			00 511
D.	in Part I, line 8	Section 4040(a) for Bodies	ad Tay on Not Investor	3		22,511.
		r Section 4940(e) for Reduce foundations subject to the section			<u>-</u>	
(1 01	optional use by domestic private	loundations subject to the section	4540(a) tax on het investine			
If se	ction 4940(d)(2) applies, leave th	us part blank				
Was	the foundation liable for the sec	tion 4942 tax on the distributable an	nount of any year in the bas	e period?	Yes	X No
lf 'Y	es,' the foundation does not qual	ify under section 4940(e). Do not co	mplete this part			
1	Enter the appropriate amount in	n each column for each year, see th	e instructions before makin	g any entries.		
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ets (coli	<b>(d)</b> Distribution umn (b) divided	ratio oy column (c))
	2013	58,600.	21,891	,829.		0.002677
	2012	127,025.	21 <u>,1</u> 04	,291.		0.006019
	2011	125,300.	19,962			0.006277
	2010	448,716.	16,641			0.026964
	2009	102,500.	1 <u>1,899</u>	,367.		0.008614
2	Total of line 1, column (d)			•		
				2		0.050551
3		e 5-year base period — divide the to has been in existence if less than !		3		0.050551 0.010110
	number of years the foundation		5 years	]	21	
	number of years the foundation	has been in existence if less than!	5 years	3	21	0.010110
4	number of years the foundation  Enter the net value of nonchari	i has been in existence if less than t	5 years	3	21	0.010110
4 5	Enter the net value of nonchari Multiply line 4 by line 3.  Enter 1% of net investment income	i has been in existence if less than t	5 years	3 4 5	21	0.010110 .,846,872. 220,872.
<b>4 5 6</b>	number of years the foundation  Enter the net value of nonchari  Multiply line 4 by line 3.  Enter 1% of net investment income	has been in existence if less than the table-use assets for 2014 from Part one (1% of Part I, line 27b)	5 years	3 4 5 6	21	0.010110 .,846,872. 220,872. 10,111.

Par	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	ons)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
٠	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		10,	111.
	check here ► X and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
3	Add lines 1 and 2		10,	<u> 111.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	_	10,	111.
6	Credits/Payments.			
а	2014 estimated tax pmts and 2013 overpayment credited to 2014 6a 28,000.			
ь	Exempt foreign organizations — tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		28,	000.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		17,	889.
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 17,889. Refunded 11			0.
Par	t VII-A   Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1 t		X
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1 0		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	, !		
е	(1) On the foundation	0.		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	1	X
2	If 'Yes,' attach a detailed description of the activities.			<del>-</del>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a	1	X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 t	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>	X
	If 'Yes,' attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			]
	NE			
t	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G<sup>2</sup> If 'No,' attach explanation</i>	81	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		X
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Part VII-B   Statements Regarding Activit		n 4720 May Be Red	quired (continued	)	
5a During the year did the foundation pay or incu	•		<u> </u>	¬	
(1) Carry on propaganda, or otherwise attempt	t to influence legislation	n (section 4945(e))?	∐ Yes [∑	K No	
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra	tion drive?		— H F	₹ No	
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?.	∐ Yes ∑	<u> </u> No	
(4) Provide a grant to an organization other than a charitable, etc, organization described in section 4945(d)(4)(A)? (see instructions)			₹ No		
(5) Provide for any purpose other than religious educational purposes, or for the prevention			Yes [	₹ No	
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?					N/A
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ [		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	he foundation claim exe	emption from the	N/A Yes	No	
If 'Yes,' attach the statement required by Regu	lations section 53.4945	-5(d).		-	
6 a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indi	rectly, to pay premiums	∏Yes [∑	XNo	
${f b}$ Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefi	t contract?	6b	X
If 'Yes' to 6b, file Form 8870.			. —	_	
7 a At any time during the tax year, was the found	, , ,			X No	
<b>b</b> If 'Yes,' did the foundation receive any proceed				N/A 7b	
Part VIII Information About Officers, Directors	ectors, Trustees, Fo	oundation Managers	s, migniy Paid Emp	noyees,	
1 List all officers, directors, trustees, foundation	managers and their co	mpensation (see instru	ctions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		e account, lowances
SEE STATEMENT 11					· · · · · · · · · · · · · · · · · · ·
		0.	0		0.
					<del></del>
2 Compensation of five highest-paid employees	(other than those inclu	ided on line 1 - see ins	tructions). If none, en	ter 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation		e account, lowances
NONE					
				-	
				<del></del>	
				4	
Total number of other employees paid over \$50,000				F 000	0

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Paid En	nployees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relev organizations and other beneficiaries served, conferences convened, research papers produce	ant statistical information such as the number of d, etc	Expenses
1 <u>N/A</u>		
2		
3		
	<b></b>	
4		
Part IX-B Summary of Program-Related Investments (se	ee instructions)	
Describe the two largest program-related investments made by the found	dation during the tax year on lines 1 and 2.	Amount
1		
<u>N/A</u>		
2		
All other program-related investments. See instructions		
3		
Table Addition 1 through 2		-
Total. Add lines 1 through 3  BAA		Form <b>990-PF</b> (2014)
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see instructions.)	. I Oleigii	Touridations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		
a Average monthly fair market value of securities	1 a	19,473,153.
<b>b</b> Average of monthly cash balances	1 b	2,238,201.
c Fair market value of all other assets (see instructions) .	1 c	468,211.
d Total (add lines 1a, b, and c)	1 d	22,179,565.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	22,179,565.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	332,693.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	21,846,872.
6 Minimum investment return. Enter 5% of line 5	6	1,092,344.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of and certain foreign organizations check here ► and do not complete this part		
1 Minimum investment return from Part X, line 6	1	1,092,344.
2a Tax on investment income for 2014 from Part VI, line 5 2a 10, 11	1.	
b Income tax for 2014 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	10,111.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	1,082,233.
4 Recoveries of amounts treated as qualifying distributions	4	· · · · · · · · · · · · · · · · · · ·
5 Add lines 3 and 4	5	1,082,233.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	1,082,233.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	797,150.
b Program-related investments — total from Part IX-B	1 b	75772001
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	· · · · · · · · · · · · · · · · · · ·
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	<del></del>
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	797,150.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	10,111.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	787,039.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth qualifies for the section 4940(e) reduction of tax in those years.	er the foun	dation

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## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	<b>(d)</b> 2014
Distributable amount for 2014 from Part XI, line 7				1,082,233.
2 Undistributed income, if any, as of the end of 2014				2,002,2001
a Enter amount for 2013 only			0.	
<b>b</b> Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2014				
a From 2009			I	
<b>b</b> From 2010				
<b>c</b> From 2011			1	
<b>d</b> From 2012				
e From 2013			#	
f Total of lines 3a through e	0.			•••••
4 Qualifying distributions for 2014 from Part			1	
XII, line 4 ► \$ 797, 150.				
a Applied to 2013, but not more than line 2a			0.	
<ul> <li>b Applied to undistributed income of prior years (Election required — see instructions)</li> </ul>		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			202 450
d Applied to 2014 distributable amount				797,150.
e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2014	0.			
(If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a) )			1	
6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		######################################	
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount – see instructions		0.	1	
e Undistributed income for 2013. Subtract line 4a from				······································
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from 2015				205 002
distributed in 2015  7 Amounts treated as distributions out of			1	285,083.
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	0.1			
· · · · · · · · · · · · · · · · · · ·				······································
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	0.			***************************************
10 Analysis of line 9			1	
a Excess from 2010			#	
b Excess from 2011			-	
c Excess from 2012			1	
d Excess from 2013			1	
e Excess from 2014				Form <b>900 PF</b> (2014)

Part XIV Private Operating Foundar	tions (see insti	ructions and Pa	art VII-A, questio	n 9)	N/A
1 a If the foundation has received a ruling or d	etermination letter				
is effective for 2014, enter the date of the r	•	ration formulation d	lacaribad in caption	☐ 4042(\\(2\) or	4942(j)(5)
<ul><li>b Check box to indicate whether the foundati</li><li>2 a Enter the lesser of the adjusted net</li></ul>			Prior 3 years	4942(j)(3) or	4942()(3)
income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2014	<b>(b)</b> 2013	(c) 2012	<b>(d)</b> 2011	(e) Total
<b>b</b> 85% of line 2a					
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed</li> </ul>					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets			<u> </u>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter.					
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income  Part XV   Supplementary Information					
assets at any time during th  1 Information Regarding Foundation Manage a List any managers of the foundation who h close of any tax year (but only if they have NONE	e year — see in ers: ave contributed mo	ore than 2% of the	total contributions re		
<b>b</b> List any managers of the foundation who of a partnership or other entity) of which the f NONE	wn 10% or more of oundation has a 10	the stock of a cor 0% or greater intere	poration (or an equal est	ly large portion of th	e ownership of
2 Information Regarding Contribution, Grant Check here  X if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d	akes contributions gifts, grants, etc (	to preselected cha (see instructions) to	arıtable organizations o individuals or organ	izations under other	
a The name, address, and telephone number	r or e-mail address	or the person to w	vnom applications sn	ouid be addressed	
<b>b</b> The form in which applications should be s	ubmitted and inform	mation and materia	als they should includ	e	
c Any submission deadlines					
d Any restrictions or limitations on awards, si	uch as by geograp	hical areas, charita	able fields, kinds of in	stitutions, or other f	actors.
BAA		EA0310L 06/17/14		F	Form <b>990-PF</b> (2014

3 Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount	
Name and address (home or business)	substantial contributor	recipient			
a Paid during the year	substantial contributor				
Total			► 3a		
b Approved for future payment			<b>▶</b> 3h		

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

nter gross amounts unless otherwise indicated.	Unrelated b	ousiness income	Excluded by	section 512, 513, or 514	(e)
Program service revenue.	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
a					
b					
С					
d					
e					
f		_			
g Fees and contracts from government agencies		· -			
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	107.	
4 Dividends and interest from securities			14	918,735.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			16	-64,847.	
8 Gain or (loss) from sales of assets other than inventory			18	289,039.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
С					
ď					
е					
Subtotal Add columns (b), (d), and (e)				1,143,034.	
13 Total. Add line 12, columns (b), (d), and (e)		-		13	1,143,034

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)
N/A	
<del></del>	
-	

Form **990-PF** (2014)

BAA

Part X		nformation Rec Exempt Organi		sfers To a	and Transa	ctions a	and Re	lationships	With Nonc	haritabl	е	-	
•		<del></del>									, . ,	Yes	No
de	scribed	rganization directly d in section 501(c) o political organiza	of the Code (o	engage in ar other than se	ny of the follo ection 501(c)(	wing with 3) organi	any otł zations)	ner organizatio or in section 5	n 527,				
	-	from the reporting		a nonchari	table exempt	organiza	tion of.						
	Cash		, roundation to	a nonoman	taste skettipt	v.g				1	1 a (1)	1 1	Х
• • •		rassets								-	1 a (2)		X
		nsactions								ŀ	(_)		
		of assets to a noi	acharitable eve	amnt organi	zation					İ	1 b (1)		Х
٠,		nases of assets fro		, .						ŀ	1 b (2)		X
		al of facilities, equi		-	Corganization					 	1 b (3)		X
٠,		bursement arrange	•	assets							1 b (4)		X
		s or loan guarante								-	1 b (5)		X
		ormance of services		an or fundra	neina edicitat	ione					1 b (6)		X
٠,,				•	-		ec.				1 c	-	X
¢ Sn	aring (	of facilities, equipm	ent, maning is	sis, other as	ssets, or paid	employe	62			L	1 6		^_
<b>d</b> If the any	he ans good y trans	wer to any of the a s, other assets, or action or sharing a	above is 'Yes,' services given arrangement, s	complete the by the reposition to the column	he following s orting foundat mn <b>(d)</b> the va	chedule. ion If the lue of the	e goods	, other assets,	or services r	eceived.			
(a) Line r	10	(b) Amount involved	(c) Name	of noncharitab	le exempt organi	zation	(d	) Description of tra	ansfers, transact	ions, and sh	arıng arran	gement	<u> </u>
N/A			ļ										
	_						ļ		<del></del>				
									<u> </u>				
		<del></del>											
_							<u> </u>						
		•											
					•								
				-									
					·	_							
_													
des	scribed Yes,' d	indation directly or in section 501(c) complete the follow	of the Code (o ing schedule	ther than se	ection 501(c)(	3)) or in s	ore tax-e section !	527?			Yes	X	No
	(a)	Name of organizat	ion	(b)	Type of orga	anization		ļ <u>(</u>	(c) Descriptio	n of relat	ionship		
N/A			<u></u>			_							
		<del></del>									·		
								ļ		<del> </del>			
		<del></del>						<u> </u>					
1	Under pe correct, a	nalties of perjury, I declare and complete Declaratio	that I have examine n of preparer (othe	ed this return, inc er than taxpayer	cluding accompany r) is based on all i	ing schedule: nformation	s and state of which p	ments, and to the be reparer has any kn	st of my knowledg owledge	e and belief,	it is true,		
Sign	·			1							May the	IRS disc	uss
Here	٠.	Mag. D	eishan	Li di	154	2/15	• 🕨	PRESIDENT	& CEO		this retur	shown t	elow
	Signat	ure of officer or trustee	~ vary	THE CAR	Date	9/12		itle	4 CHO		(see inst	ructions) Yes	No.
	J	Print/Type preparer's na	ame	Prei	parer's signature			Date	Check	T <sub>d</sub>	PTIN	103	1,,0
		• • •		'	-1100	1_		5-7-15	self empl	□"		2010	
Paid -		STEVEN P. K	-	20/12/2	NVVV	<del>T</del>		12 ( 1)	<del></del>		P00056	2414	
Prepar		_		COMPANY		<del></del>		<del></del>	Firm's EIN	47-06	<u>∠5816</u>		
Use Oi	nly	_		IFORNIA		3/00			-	/ 400	400	0000	
		(	<u> MAHA, NE</u>	68154-	<b>5</b> 336				Phone no	(402)	496-	<u> </u>	

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545 0047

2014

Name of the organization		Employer identification number
SUNNY DURHAM FAMILY FOUN	DATION	47-0830374
Organization type (check one)		<del></del>
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not tru	eated as a private foundation
	527 political organization	·
Form 990-PF	$\boxed{X}$ 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treate	ed as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by	the General Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (1	10) organization can check boxes for both the General Ru	ile and a Special Rule. See instructions.
General Rule		
[X] For an organization filing Form 990, property) from any one contributor.	990-EZ, or 990-PF that received, during the year, contrib Complete Parts I and II See instructions for determining	outions totaling \$5,000 or more (in money or a contributor's total contributions.
Special Rules		
under sections 509(a)(1) and 170(b) received from any one contributor.	ction 501(c)(3) filing Form 990 or 990-EZ that met the 33- (1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ) during the year, total contributions of the greater of (1) \$5 form 990-EZ, line 1. Complete Parts I and II.	), Part II, line 13, 16a, or 16b, and that
during the year, total contributions of	ction 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that of more than \$1,000 <i>exclusively</i> for religious, charitable, somelty to children or animals. Complete Parts I, II, and III	received from any one contributor, scientific, literary, or educational
during the year, contributions exclus \$1,000 If this box is checked, enter charitable, etc., purpose. Do not con	ction 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that sively for religious, charitable, etc., purposes, but no such there the total contributions that were received during the mplete any of the parts unless the <b>General Rule</b> applies to charitable, etc., contributions totaling \$5,000 or more during the second	n contributions totaled more than e year for an <i>exclusively</i> religious, o this organization because
990-PF), but it must answer 'No' on Par Part I, line 2, to certify that it does not n	ered by the General Rule and/or the Special Rules does ret IV, line 2, of its Form 990, or check the box on line H of neet the filing requirements of Schedule B (Form 990, 990)	f its Form 990-EZ or on its Form 990-PF, 0-EZ, or 990-PF)
DAA FOR Paperwork Reduction Act Not	tice, see the Instructions for Form 990, 990EZ,	Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2014)

	B (Form 990, 990-EZ, or 990-PF) (2014)	raye	1 OF 1 OF TAR
Name of org SUNNY	DURHAM FAMILY FOUNDATION	' '	er identification number 830374
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional sp	ace is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARLES W. DURHAM CLAT  C/O U.S. BANK NA, PO BOX 64713  ST. PAUL, MN 55164-0713	\$500,000.	Person X Payroll
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHARLES W. DURHAM CLAT II  C/O U.S. BANK NA, PO BOX 64713  ST. PAUL, MN 55164-0713	\$100,000.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2014)

Page

1 to

of Part II

SUNNY DURHAM FAMILY FOUNDATION

Employer identification number 47-0830374

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	ace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
	ļ		
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		1	
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<u> </u>		
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	<b></b>
BAA	Sche	dule <b>B</b> (Form 990, 990-EZ	, or 990-PF) (2014)

1 to

of Part III

Name of organization Employer identification number SUNNY DURHAM FAMILY FOUNDATION 47-0830374 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8) or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions.) Use duplicate copies of Part III if additional space is needed. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (a) No. from Part I N/A (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (d) Description of how gift is held (c) Use of gift (a) No. from Part I (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (a) No. from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (b) Purpose of gift (d) Description of how gift is held (c) Use of gift (a) No. from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

## **SUNNY DURHAM FAMILY FOUNDATION**

## **SCHEDULE OF CONTRIBUTIONS**

		AMOUNT
DATE	ORGANIZATION	CONTRIBUTED
Jan-14	OMAHA ZOO FOUNDATION	100,000
Jan-14	GOODWILL INDUSTRIES INC	20,000
Jan-14	PROJECT HARMONY	30,000
Jan-14	WHY ARTS	5,000
Jan-14	WEST HILLS CHURCH	50,000
Jan-14	OMAHA EQUESTRIAN FOUNDATION	20,000
Jan-14	OMAHA SYMPHONY	20,000
Jan-14	CHILDREN'S HOSPITAL & MEDICAL CENTER FOUNDATION	50,000
Jan-14	HEARTLAND FAMILY SERVICE	30,000
Jan-14	AMERICAN CONSERVATORY OF MUSIC	10,000
Jan-14	NEBRASKA FOUNDATION	30,000
Jan-14	THE DURHAM MUSEUM	30,000
Feb-14	YOUTH CARE AND BEYOND	1,000
Feb-14	COMPLETELY KIDS	21,000
March-14	NEBRASKA MEDICAL CENTER	2,000
March-14	OMAHA PERFORMING ARTS	65,000
April-14	AMERICAN CANCER SOCIETY	250
June-14	HEARTLAND FAMILY SERVICE	10,000
June-14	TANGIER SHRINE	10,000
Aug-14	NEBRASKA HUMANE SOCIETY	16,000
Aug-14	METRO AREA YOUTH FUND	1,000
Sept-14	NEBRASKA HUMANE SOCIETY	100,000
Sept-14		2,500
Sept-14	LEAGUE OF AMERICAN ORCHESTRAS	100
Sept-14	WASHBURN UNIVERSITY	200
Sept-14	WEST HILLS CHURCH	50,000
Oct-14	ANGELS AMONG US	20,000
Nov-14	FIRST COVENANT CHURCH	100
Nov-14	WEST HILLS CHURCH	100,000
Dec-14		2,000
Dec-14	OMAHA SYMPHONY	1,000
	TOTAL	\$ 797,150

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SUNNY DURHAM FOUNDATION Recipient's Name and Address: C/O MARY LUNDGREN 9636 OAK CIRCLE OMAHA, NE 68124 2nd TIN notice 150012627900 XX-XXX0374 NE (877)209-7529 41-1818433 Payer's Federal ID Number: Recipient's Tax ID Number: Payer's State ID Number: Account Number: Corrected **Questions?** State: U.S. BANK NATIONAL ASSOCIATION **MILWAUKEE**, WI 53201-0634 Payer's Name and Address: PO BOX 0634

# 2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked)

Description of property (Box 1a)

State Tax Withheld	(Box 16)		0.00		0.00		0.00		0.00	0.00
Federal Income Tax Withheld	(Box 4)		00:0		00.0		00.0		00.0	0.00
Net Gain or Loss			-330.33		15,705,96		-907.89		371.65	14,839.39
Adjustments	(Box 1g)		0.00		3,887.56		0.00		00.0	3,887.56
Code if any	(Box 1f)		:		۵					
Cost or Other Basis	(Box 1e)		576,447.57		629,904.72		56,944.14		77,773.13	1,341,069.56
Proceeds	(Box 1d)		576,117.24		649,498.24		56,036.25		78,144.78	1,359,796.51
Form 8949 Checkbox			∢		. ⋖	717	∢	29/19	<b>4</b> ::	
Date Acquired	(Box 1b)	<b>999-B</b> .200% 6/15/18	4 Various	5% 5/15/20	4 Various	LIMITED BRANDS 6.900% 7/15/17	12/16/2014 05/28/2014	WILLIS NORTH AME 7.000% 9/29/19	12/05/2014 10/06/2014 A	on 1099-8
Date Sold or Disposed	(Box 1c)	Short Term Sales Reported on 1099-B 492000.0 HUMANA INC 7.200% 6/15/18	12/04/2014 Various	IBM CORP 1.625% 5/15/20	10/16/2014 Various	LIMITED BRAND	12/16/2014	WILLIS NORTH ,	12/05/201	Total Short Term Sales Reported on 1099-B
Cusip Number		Short Term Sale 492000.0	444859AY8	664000.0	459200HM6	51000.0	532716AM9	67000.0	970648AE1	Total Short Ten

Report on Form 8949, Part I, with Box A checked

This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. The taxpayer is ultimately responsible for the accuracy of their own tax return.

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SUNNY DURHAM FOUNDATION Recipient's Name and Address: C/O MARY LUNDGREN **OMAHA, NE 68124** 9636 OAK CIRCLE 2nd TIN notice 150012627900 XX-XXX0374 (877)209-7529 41-1818433 Payer's Federal ID Number: Recipient's Tax ID Number: Payer's State ID Number: Account Number: Corrected Questions? State: U.S. BANK NATIONAL ASSOCIATION MILWAUKEE, WI 53201-0634 Payer's Name and Address:

PO BOX 0634

# 2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS. Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property (Box 1a)

State Tax Withheld	(Box 16)		0.00		0:00 ::		00.0		0.00		0.00		0.00		00.0
			•		•		•		•		:				:
Federal Income Tax Withheld	(Box 4)		00.0		00.0		0.00		0.00		0.00		00.0		0.00
F									:						;
Net Gain or Loss			35.45		-11,934.11		-1.79		-1.26		-292.23		-1.49		17.97
													:		:
Adjustments	(Box 1g)		0.00		0.00		0.00		0.00		0.00		0.00		00.0
	110										:				
Code of any	(Box 1f)				:				,		:				:
											:				
Cost or Other Basis	(Box 1e)		348,687.05		262,569.71		2,518.16		1,861.85		41,569.42		2,311.73		5,242.03
Proceeds	(Box 1d)		348,722.50		250,635.60		2,516.37		1,860.59		41,277.19		2,310.24		5,260.00
<u> </u>			34		25		;				4.		:		:
Form 8949 Checkbox										_		_	:		•
Ç, e			œ	23	Ф.	/25/18	œ	/25/18	<b>æ</b>	/25/18	80	/25/18	∞.		<b>.</b>
Date Acquired	(Box 1b)	5/15/18	sno	5% 5/15/	· sno	4.500% 8,	snoi	4.500% 8	. snoi	4.500% 8	snöi	4.500% 8	snoi	1/01/18	721/2013
	(B0)	<b>8-660</b>	4. Vari	N 3.87	4 Vari	HOME	4 Vari	HOME	4 Vari	HOME	4 Var	HOME	4 Var	175% 1	4 .06/
Date Sold or Disposed	(Box 1c)	Short Term Sales Reported on 1099-8 350000.0 BRINKER INTL 2.600% 5/15/18	03/18/2014 Various	BRINKER INTL IN 3.875% 5/15/23	01/31/2014 Various	COUNTRYWIDE HOME 4.500% 8/25/18	01/25/2014 Various	COUNTRYWIDE HOME 4.500% 8/25/18	02/25/2014 Various	COUNTRYWIDE HOME 4.500% 8/25/18	03/18/2014 Various	COUNTRYWIDE HOME 4.500% 8/25/18	03/25/2014 Various	DAVITA INC 6.375% 11/01/18	06/04/2014 06/21/2013
		n Sales 0 B	AF7		AG5		XW1		XW1		W.			_	AL2
CUSIP Number		<b>Short Term</b> 350000.0	109641AF7	270000.0	109641AG5	2516.37	12669EXW1	1860.59	12669EXW1	41542.54	12669EXW1	2310.24	12669EXW1	5000.0	23918KAL2

noncovered securities shown on this statement, cost basis information is not being reported to the Internal Revenue Service. The taxpayer is ultimately This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. For

responsible for the accuracy of their own tax return.

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SUNNY DURHAM FOUNDATION Recipient's Name and Address: C/O MARY LUNDGREN 9636 OAK CIRCLE OMAHA, NE 68124 2nd TIN notice 150012627900 (877)209-7529 XX-XXX0374 41-1818433 Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: Corrected **Questions?** State:

Payer's Name and Address: U.S. BANK NATIONAL ASSOCIATION

MILWAUKEE, WI 53201-0634

PO BOX 0634

Reported to the IRS is proceeds less commissions and option premiums.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS. Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property (Box 1a)

State Tax Withheld	(Box 16)	0.00		0.00		0.00		0.00		0.00		0.00	0.00			0.00
Federal Income Tax Withheld	(Box 4)	0.00		00.0		0.00		0.00		00.0		00.0	0.00			. 0.00
Net Gain or Loss		565.10		-848.15		14.40		17,912,02		-1,338.63		3,573.82	7,672.30			47,134.09
Adjustments	(Box 1g)	0.00		0.00		00.0		00.00		00.00		00:0	0.00			0.00
Code if any	(Box 1f)							:		:						:
Cost or Other Basis	(Box 1e)	172,891.15		67,716.75		510.52		598,775.48		94,601.13		319,676.18	1,918,931.16			549,513.11
Proceeds	(Box 1d)	173,456.25		66,868.60		496.12		616,687.50		93,262.50		323,250.00	1,926,603.46			596,647.20
Form 8949 Checkbox		æ	5/42	<b>a</b> );	5/42	89		<b>6</b> 0	18	<b>.</b>	2/15/20	Ф			% 1/15/18	ш <sup>.</sup>
Date Acquired	( <i>Box 1b)</i> 75% 11/01/18	06/17/2014 06/21/2013	F N M A GTD REMIC 4.000% 8/25/42	01/09/2014 07/01/2013	F N M A GTD REMIC 4.000% 8/25/42	07/01/2013	% 2/15/20	Various	SCOTTS MIRACLE 7.250% 1/15/18	01/15/2014 06/26/2013	SCOTTS MIRACLE GRO 6.625% 12/15/20	01/14/2014 09/18/2013	on 1099-8	ith Box B checked	Reported on 1099-8 AMERICAN TOWER CORP 4.500% 1/15/18	. Various
Date Sold or Disposed	(Box 1c) (Box 1b) DAVITA INC 6.375% 11/01/18	06/17/2014	F N M A GTD REI	01/09/2014	F N M A GTD REI	3136A7PU0 01/25/2014 07/01/2013	HCA INC 6.500% 2/15/20	02/13/2014 Various	SCOTTS MIRACL	01/15/2014	SCOTTS MIRACL	01/14/2014	Total Short Term Sales Reported on 1099-8	Report on Form 8949, Part I, with Box B checked	Long Term Sales Reported on 1099-8 555000.0 AMERICAN TOWER C	
CUSIP Number	165000.0	23918KAL2	65799.35	3136A7PU0	496.12	3136A7PU0	550000.0	404121AC9	900000	810186AH9	300000.0	810186AK2	Total Short Terr	Report on For	Long Term Sales 555000.0	029912BD3

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SUNNY DURHAM FOUNDATION Recipient's Name and Address: C/O MARY LUNDGREN **OMAHA, NE 68124** 9636 OAK CIRCLE 2nd TIN notice 150012627900 XX-XXX0374 (877)209-7529 41-1818433 Payer's Federal ID Number: Recipient's Tax ID Number: Payer's State ID Number: Account Number: Corrected **Questions?** State:

Reported to the IRS is proceeds less commissions and option premiums.

U.S. BANK NATIONAL ASSOCIATION

Payer's Name and Address:

MILWAUKEE, WI 53201-0634

PO BOX 0634

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS. Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property (Box 1a)

State Tax Withheld	(Box 16)	0.00		0.00		00.0		0.00		00.0		00.0		00.00		00.0		 0.00
Federal Income Tax Withheld	(Box 4)	00.0		0.00.		. 00.0		00.0		00.00		. 00.00		00.0		0.00		00.00
Net Gain or Loss		9,451.39		8,446.98		15,112.97		-60.61		4.61		-1,379.84		-1,530.51		44,279.81		-2.81
Adjustments	(Box 1g)	00.0		00.0		0.00		00.0		0.00		0.00		0.00		00.0		0.00
Code if any	(Box 1f)											•						;
Cost or Other Basis	(Box 1e)	333,765.11		306,308.02		290,577.03		4,305.09		339.30		131,967.97		438,110.51		531,907.69		549.28
Proceeds	(Box 1d)	343,216.50		314,755.00		305,690.00		4,244,48		334.69		130,588.13		436,580.00		576,187.50		546.47
Form 8949 Checkbox	1/01/18	Ш	′21	w,	/21		1/25/34	ш :	1/25/34	ш	1/25/34			: :	1,16		1/15/19	; ш,
Date Acquired	(Box 1b) ONICS 3.000% 3	10/16/2014 06/19/2013	C 5.500% 3/15/	Various	C 5.500% 3/15,	03/12/2014 Various E	GE FIN 5.000%	01/25/2014 04/25/2011	CHASE MORTGAGE FIN 5.000% 1/25/34	02/25/201404/25/2011	GE FIN 5.000%	02/27/2014 04/25/2011	75% 11/01/18	06/04/2014_05/30/2013	DONNELLEY SONS 8.600% 8/15/16	Various	FHLMCMLTCLMTG 5.000% 4/15/19	01/15/2014 12/07/2004
Date Sold or Disposed	(Box 1c) (Box 1b) ARROW ELECTRONICS 3.000% 3/01/18	10/16/2014	BEST BUY CO INC 5.500% 3/15/21	02/10/2014 Various	BEST BUY CO INC 5.500% 3/15/21	03/12/2014	CHASE MORTGAGE FIN 5.000% 1/25/34	01/25/2014	CHASE MORTGA	02/25/2014	CHASE MORTGAGE FIN 5.000% 1/25/34	02/27/2014	DAVITA INC 6.375% 11/01/18	06/04/2014	DONNELLEY SO	11/18/2014 Various	FHLMCMLTC	01/15/2014
CUSIP Number	330000.0	042735885	322000.0	086516AL5	308000.0	086516AL5	4244.48	16162WDM8	334.69	16162WDM8	130181.31	16162WDM8	415000.0	23918KAL2	525000.0	257867AV3	546.47	31395KFW8

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responsible for the accuracy of their own tax return.

Account Number:

150012627900 XX-XXX0374 41-1818433 Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number:

띨

State:

Recipient's Name and Address: SUNNY DURHAM FOUNDATION C/O MARY LUNDGREN **OMAHA, NE 68124** 9636 OAK CIRCLE

Page 12 of 33

Payer's Name and Address: U.S. BANK NATIONAL ASSOCIATION MILWAUKEE, WI 53201-0634 PO BOX 0634

2nd TIN notice (877)209-7529 Corrected Questions?

Reported to the IRS is proceeds less commissions and option premiums.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS. Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property (Box 1a)

State Tax Withheld	(Box 16)	0ò 0		0.00		0.00		0.00		00.0		0.00		00.0		00.00		00.00
Federal Income Tax Withheld	(Box 4)	0.00		0.00		0.00		0.00		00.0		0.00		. 0.00		0.00		0.00
		•		•		:								:				•
Net Gain or Loss		-3.47		-2.89		-2.37		-5.19		-160.88		-1,007.46		732.87		-2,094.81		404.91
40	_	_						_		o.		_				:		
Adjustments	(Box 1g)	00.0		0.00		0.00		0.00		0.00		0.00		00:0		00.0		0.00
Adjus	2	٠								:		:				•		•
<u>e</u> ⊱	(Box 1f)			·										•				÷
Code if any	(Bo							•		•								
				,						m		· ·				<b>_</b> :		_
Cost or Other Basis	(Box 1e)	705.49		610.34		522.13		173.04		102,448.38		77,319.96		81,170.37		332,094.81		70,663.11
Proceeds	(Box 1d)	702.02		607.45		519.76		167.85		102,287.50		76,312.50		80,437.50		330,000.00		70,258.20
Form 8949 Checkbox	/15/19	ш	/15/19		/15/19	т,	/15/19	w		ш'		ш		; ш				
Date Acquired	(Box 1b) MTG 5.000% 4/	02/15/2014 12/07/2004	F H L M C MLTCL MTG 5.000% 4/15/19	03/15/2014 12/07/2004	MTG 5.000% 4,	12/07/2004	F H L M C MLTCL MTG 5.000% 4/15/19	04/22/2014 12/01/2004	50% 4/15/19	03/01/2012	50% 4/15/19	Various.	50% 4/15/19	10/01/2014 02/28/2012	50% 4/15/19	Various	200% 6/15/18	12/04/2014 09/10/2012
Date Sold or Disposed	(Box 1c) (Box 1b) FHLMCMLTCLMTG 5.000% 4/15/19	02/15/2014	FHLMCMLTCL	03/15/2014	FHLMCMLTCL MTG 5.000% 4/15/19	04/15/2014 12/07/2004	FHLMCMLTCL	04/22/2014	HERTZ CORP 6.750% 4/15/19	09/16/2014 03/01/2012	HERTZ CORP 6.750% 4/15/19	09/30/2014 Various	HERTZ CORP 6.750% 4/15/19	10/01/2014	HERTZ CORP 6.750% 4/15/19	10/02/2014, Various	HUMANA INC 7.200% 6/15/18	12/04/2014
CUSIP Number	702.02	31395KFW8	607.45	31395KFW8	519.76	31395KFW8	172.26	31395KFW8	98000.0	428040CJ6	74000.0	428040CJ6	78000.0	428040CJ6	320000.0	428040CJ6	600000	444859AY8

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## 2014 Tax Information Statement

2nd TIN notice 150012627900 (877)209-7529 XX-XXX0374 41-1818433 Payer's Federal ID Number: Recipient's Tax ID Number: Payer's State ID Number: Account Number: Corrected **Questions?** State:

U.S. BANK NATIONAL ASSOCIATION

Payer's Name and Address:

MILWAUKEE, WI 53201-0634

PO BOX 0634

SUNNY DURHAM FOUNDATION Recipient's Name and Address: C/O MARY LUNDGREN **OMAHA, NE 68124** 9636 OAK CIRCLE

Reported to the IRS is proceeds less commissions and option premiums.

Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS.

Description of property (Box 1a)

CUSIP Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
88000.0	(Box 1c) INTL GAME TECH	(Box 1c) (Box 1b) INTL GAME TECH 7.500% 6/15/19	o.	(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
459902AR3	07/01/2014 Various	Various		100,029 60	103,915.23	·	0.00	-3,885.63	00.00	0.00
521000.0	LIMITED BRANDS	LIMITED BRANDS 6.900% 7/15/17	7							
532716AM9	12/16/2014 Various	Various	: 	572,448.75	538,301.73		00.0	34,147.02	0.00	0.00
180000.0	SCOTTS MIRACLI	SCOTTS MIRACLE 7.250% 1/15/18	80							
810186AH9	01/15/2014 07/10/2012	07/10/2012	w	186,525.00	195,292.82	•	00.00	-8.767.82	00.0	00.0
72000.0	SEAGATE TECH!	SEAGATE TECH HDD 6.800% 10/01/16	1/16							
81180RAE2	12/24/2014	12/24/2014 12/15/2010	ш,	79,188.24	72,295.05		0.00	6,893.19	00.00	0.00
333000.0	VALMONT INDUS	VALMONT INDUSTRIES 6.625% 4/20/20	/20/20							
920253AD3	. 09/19/2014 Various	Various		400,805 46	339,260.33		0.00	61,545.13	. 00.0	0.00
65000.0	WILLIS NORTH A	WILLIS NORTH AME 7.000% 9/29/19	/19							
970648AE1	·	12/05/2014 08/14/2012		75,812.10	75,409.84		0.00	402.26	0.00	00.00
465000.0	WILLIS NORTH A	WILLIS NORTH AMERICA 6.200% 3/28/17	3/28/17							
970648AD3	12/12/2014 Various	. Various	ш	505,613.10.	450,620.75		0.00	. 54,992.35	00.00	oô·ó
325000.0	XEROX CORPOR	XEROX CORPORATION 6 350% 5/15/18	/15/18							
984121BW2	08/19/2014	08/19/2014 01/25/2013	ш	375,703.25	371,533.55		00.0	4,169.70	00.0	00.00
Total Long Tern	Total Long Term Sales Reported on 1099-8	on 1099-B		5,666,208.25	5,399,680.04		0.00	266,528.21	0.00	0.00

Report on Form 8949, Part II, with Box E checked

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2014	FEDERAL STATEMENTS	PAGE 1
s	UNNY DURHAM FAMILY FOUNDATION	47-083037
STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME		
		(C) ADJUSTED ET INCOME
OTHER INVESTMENT INCOME	TOTAL $\frac{\$}{\$} - \frac{64,847}{-64,847} = \frac{\$}{\$} - \frac{64,847}{-64,847} = \frac{\$}{\$}$	-64,847. -64,847.
STATEMENT 2 FORM 990-PF, PART I, LINE 16A LEGAL FEES		
LEGAL FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 1,739. \$ 1,739. \$ 0. \$	(D) CHARITABLE PURPOSES 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
ACCOUNTING FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 2,345. \$ 2,345. \$ 0. \$	(D) CHARITABLE PURPOSES 0.

## STATEMENT 4 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MANAGEMENT FEES TRUST FEES	TOTAL	\$ 75,825. 17,302. \$ 93,127.	\$ 75,825. 17,302. \$ 93,127.	<u>\$ 0.</u>	<u>\$ 0.</u>

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## FEDERAL STATEMENTS

PAGE 2

**SUNNY DURHAM FAMILY FOUNDATION** 

47-0830374

STATEMENT 5 FORM 990-PF, PART I, LINE 18 **TAXES** 

2013 BALANCE DUE 2014 ESTIMATED PAYMENT

(A) (B) NET (C) (D) **EXPÈNSES** INVESTMENT ADJÚSTED CHARITABLE NET INCOME **PURPOSES** PER BOOKS INCOME 6,692. 6,692. \$ Ŝ 28,000. 34,692. <u>\$</u> 28,000. 0. TOTAL \$ 34,692.

## STATEMENT 6 FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

SEE ATTACHED SCHEDULE OF CONTRIBUTIONS

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

NONE

501 (C) (3)

Ś 797,150.

TOTAL \$ 797,150.

## **STATEMENT 7** FORM 990-PF, PART II, LINE 7 OTHER NOTES AND LOANS RECEIVABLE

OTHER NOTES AND LOANS DURHAM CLAT #2 DURHAM CLAT #2

DOUBTFUL FAIR MARKET **ACCOUNTS** BOOK VALUE ALLOWANCE VALUE 159,878. \$ \$ 159,878. \$ 0. 400,000. 0<u>.</u> 400,000. TOTAL \$ <del>559,878.</del> \$ 559,878.

<u>0.</u> ALLOWANCE FOR DOUBTFUL ACCOUNTS NET OTHER NOTES/LOANS REC. - BOOK VALUE 559,878.

## **STATEMENT 8** FORM 990-PF, PART II, LINE 10C **INVESTMENTS - CORPORATE BONDS**

CORPORATE BONDS	VALUATION	BOOK VALUE	FAIR MARKETVALUE
CORPORATE BONDS FOREIGN ISSUE BONDS	COST COST TOTAL	1,188,344.	\$ 18,869,710. 1,185,659. \$ 20,055,369.

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## **FEDERAL STATEMENTS**

PAGE 3

## **SUNNY DURHAM FAMILY FOUNDATION**

47-0830374

STATEMENT 9 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

MISCELLANEOUS RECEIVABLE

 BOOK VALUE
 FAIR MARKET VALUE

 TOTAL
 \$ 7,500.
 \$ 7,500.

 \$ 7,500.
 \$ 7,500.

STATEMENT 10 FORM 990-PF, PART III, LINE 3 OTHER INCREASES

OTHER INCREASES

TOTAL \$ 752.

## STATEMENT 11 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	
MARY D. LUNDGREN 9636 OAK CIRCLE OMAHA, NE 68124	PRESIDENT & CEO 1.00	\$ 0.	\$ 0.	\$ 0.
ANDREW D. LUNDGREN 9636 OAK CIRCLE OMAHA, NE 68124	VICE PRESIDENT 1.00	0.	0.	0.
JENNIFER LUNDGREN GEENEN 9636 OAK CIRCLE OMAHA, NE 68124	VICE PRESIDENT 1.00	0.	0.	0.
MICHAEL D. JONES 9290 WEST DODGE ROAD, STE 303 OMAHA, NE 68114	SECRETARY 1.00	0.	0.	0.
DENNIS LUNDGREN 9636 OAK CIRCLE OMAHA, NE 68124	DIRECTOR 1.00	0.	0.	0.
	TOTAL	\$0.	\$ 0.	\$ 0.

2014	FEDERAL SUPPORTING DETAIL		PAGE 1
,	SUNNY DURHAM FAMILY FOUNDATION		47-0830374
OTHER INCOME PRODUINTEREST ON SAVINGS US BANK BC REALTY US BANK-OID	UCING ACTIVITIES S & CASH INVESTMENTS	TOTAL	\$ 57. 17. 33. 107.
OTHER INCOME PRODU DIVIDENDS/INTEREST F U.S BANK NAT'L ASSO BOND PREMIUM-DOMEST BOND PREMIUM-FOREIG U.S. BANK NAT'L ASS	FROM SECURITIES.  OC-INTEREST INCOME TIC ON	TOTAL	\$ 1,067,693. -143,730. -5,571. 343. 918,735.