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Form **990-PF**

Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0052 Open to Public Inspection

Ford	alen	dar year 2014 or tax year beginning JU	JN 1, 2014	, and ending	MAY 31, 2015	5
Nan	ne of	foundation			A Employer identification	n number
E.	NC	EBRETSON FOUNDATION IN	ıc		20-1572020)
		nd street (or P O box number if mail is not delivered to str		Room/suite	B Telephone number	<u> </u>
		7 N. 153RD AVENUE CIRC			402-330-70)99
		own, state or province, country, and ZIP or foreig		L	C If exemption application is	
		HA, NE 68154	postar os as			,
		all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
		Final return	Amended return	,		
		Address change	Name change		Foreign organizations m check here and attach c	eeting the 85% test, omputation
H C	heck	type of organization: X Section 501(c)(3) exempt private foundation		E If private foundation sta	atus was terminated
	Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition	under section 507(b)(1	I)(A), check here 🕨 🗀
l Fa	ır ma	arket value of all assets at end of year J Accou	ıntıng method: X Cash	Accruai	F If the foundation is in a	60-month termination
		Part II, col (c), line 16)	Other (specify)		under section 507(b)(1	l)(B), check here 🕨 🖳
		1,008,484. (Part I, c				Ι
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a))	(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	1,034,158.		N/A	,
	2	Check In the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	4.	4		STATEMENT 1
	4	Dividends and interest from securities	2,170.	2,170	•	STATEMENT 2
		Gross rents .				
		Net rental income or (loss)	9,198.		RECEN	
ne	ba	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 601,748			10	/
Revenue	7	assets on line 6a OUL, / 40 Capital gain net income (from Part IV, line 2)	•	9,198	T funi	2015
æ	8	Net short-term capital gain		2,150	1 2 3 4	
	9	Income modifications				
	10a	Gross sales less returns and allowances			L CIGILENA	
		Less Cost of goods sold				
	C	Gross profit or (loss)		·		
	11	Other income				
	12	Total. Add lines 1 through 11	1,045,530.	11,372		
	13	Compensation of officers, directors, trustees, etc	0.	0		0
	14	Other employee salaries and wages	1,083.	0	•	0
es	١	Pension plans, employee benefits Legal fees				
Sus	108	Accounting fees STMT 3	1,500.	1,500		0
AUO O CERTS and Administrative Expense		Other professional fees	2,550.	1,500		
rative E	17	Interest				
rati	18	Taxes STMT 4	156.	73	•	0
ministr	19	Depreciation and depletion	543.	0		1
<u> </u>	20	Occupancy				
A Adi	21	Travel, conferences, and meetings				
a Z		Printing and publications		2 = 1 2	_	
という Coperating	23	Other expenses STMT 5	2,510.	2,510	•	0
SCANNING Operating	24	Total operating and administrative	5 702	4,083		
2 ô	25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	5,792. 36,695.	±,003	.•	36,695
\(\)		Total expenses and disbursements.	30,093.			30,033
	٦	Add lines 24 and 25	42,487.	4,083		36,695
<i>-</i>	27	Subtract line 26 from line 12:	12,20,1	2,000	•	
	1	Excess of revenue over expenses and disbursements	1,003,043.			
	1	Net investment income (if negative, enter -0-)	i a tet	7,289		
	0	Adjusted net income (if negative, enter -0-)	1 - 44	•	N/A	

D.	art I	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of ye	
<u> </u>	ai t i	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
\neg	1	Cash - non-interest-bearing	2,001.	2,037.	<u>2,037.</u>
	2	Savings and temporary cash investments	2,935.	253,706.	253,706.
		Accounts receivable >			
		Less: allowance for doubtful accounts	1		
-		Pledges receivable	i		
		Less: allowance for doubtful accounts			
	•	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	İ		
		disqualified persons			
	7	Other notes and loans receivable	1	!	
		Less: allowance for doubtful accounts			
g	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 6	2,554.	580,118.	577,195.
	_		877.	176,092.	174,850.
				170,032.	1/4/0301
	111	Investments - land, buildings, and equipment basis			
	ŀ	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis ► 5,827.			
		Less accumulated depreciation 5,131.	1,239.	696.	<u>696.</u>
	15	Other assets (describe			
	1	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	9,606.	1,012,649.	1,008,484.
_	17	Accounts payable and accrued expenses			
	18	Grants payable			
		• •			
Liabilities	19	Deferred revenue			
Ę	20	Loans from officers, directors, trustees, and other disqualified persons			
ia	21	Mortgages and other notes payable .			
_	22	Other liabilities (describe >)			
			_		
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here	į.		
		and complete lines 24 through 26 and lines 30 and 31.	İ		
ės	24	Unrestricted			
Ĕ	25	Temporarily restricted			
3a	26	Permanently restricted			
B	20	Foundations that do not follow SFAS 117, check here			
ڐۣ	1	•			
<u>_</u>	l	and complete lines 27 through 31.		0	
Net Assets or Fund Balanc	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ä	29	Retained earnings, accumulated income, endowment, or other funds	9,606.	1,012,649.	
Š	30	Total net assets or fund balances	9,606.	1,012,649.	
	1		1		
	31	Total liabilities and net assets/fund balances	9,606.	1,012,649.	
			alances		
L	art	Alialysis of Changes in Net Assets of Fund b			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)		11	9,606.
2	•	r amount from Part I, line 27a	••	2	1,003,043.
2		er increases not included in line 2 (itemize)	•	3	0.
3		know 1 0 and 2		4	1,012,649.
4			• •		1,012,049.
5		reases not included in line 2 (itemize)	olumn (h) lung 00	6	1,012,649.
<u>6</u> _	rota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	ounni (v), iine 30		
					Form 990-PF (2014)

ENGEBRETSON FOUNDATION INC

Page 2

20-1572020

Form 990-PF (2014)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

<u>orm</u>	990-PF (2014) ENGEBRETSON FOUNDATION INC		<u> 1572</u>			age 4
Pai	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ir	ıstru	ction	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1				<u>73.</u>
	of Part I, line 27b		1			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3	ļ			73.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	ļ. —			<u>73.</u>
	Credits/Payments:					
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a	_				
b	Exempt foreign organizations - tax withheld at source	_				
C	Tax paid with application for extension of time to file (Form 8868)	_				
d	Backup withholding erroneously withheld	_				_
	Total credits and payments. Add lines 6a through 6d	7	_			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	ļ .			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				73.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u>10</u>				
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	<u> 11</u>				
_	rt VII-A Statements Regarding Activities		<u>.</u>			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervi	ne in			Yes	
	any political campaign?	_		1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definit			1b	-	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials public	shed or				
	distributed by the foundation in connection with the activities.					
	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
		<u>.</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
_	managers. > \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
_	If "Yes," attach a detailed description of the activities.	n or				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	ii, ui		3		х
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		A\V	4b		_ <u>~</u> _
	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-	.1/ A	5		Х
Ð	If "Yes," attach the statement required by General Instruction T.	•		- <u>"</u>		- 22
•	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
v	By language in the governing instrument, or					ļ
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the s 	tate law				
	remain in the governing instrument?			6		х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part	χV		7	Х	
'	bid the foundation have at loads \$6,000 in about at any time during the your in 100, complete i air in, con 100, and i air		•	<u> </u>		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE					1
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
-	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	alendar				
	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

		<u>0-15720</u>	<u> 20</u>	Page 5
Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	L	11	X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privi	leges?		
	If "Yes," attach statement (see instructions)	1	12	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	ζ
	Website address ► N/A	-		
14	The books are in care of ► MICHAEL L. MASSMAN Telephone no. ►	402-330	-709	9
• •		P+4 ▶681		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	-		$\overline{ ightharpoonup}$
	, , , ,	15	N/I	ΑΑ
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	<u></u>		es No
10	securities, or other financial account in a foreign country?	1	16	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of	· -		
	foreign country			j
Pa	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Y	es No
12	During the year did the foundation (either directly or indirectly):			1
		X No		İ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
		X No		
	<u></u>	X No		
		X No	ł	}
	(5) Transfer any income or assets to a disqualified person (or make any of either available	22 110		
		X No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	22, 110		
			1	
	if the foundation agreed to make a grant to or to employ the official for a period after	X No		
		ואנא		
Ļ	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	N/A	1b	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		10	
	Organizations relying on a current notice regarding disaster assistance check here			
(E Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		4.	₹.
_	before the first day of the tax year beginning in 2014?	-	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
•	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	v		
	before 2014? Yes	NO الما	İ	
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	NT / D	۸.	
	statement - see instructions.)	Ņ/A	2b	
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3		(T)		
		X No		
١	of f"Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to disp	ose		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2014.)	N/A	3b	
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<u> </u>	4a	X
١	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose the	iat	_	
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b	X
		Form	990-	PF (2014)

orm 990-PF (2014) ENGEBRETSON FOUNDATION I	NC		<u> 20-15720</u>	20 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be H	lequired (continu	ied)	
5à During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,		
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7	☐ Ye	s 🔀 No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)		☐ Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		
the prevention of cruelty to children or animals?		☐ Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru		•	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined]
expenditure responsibility for the grant?		[/A ☐ Ye	s 🗀 No	
If "Yes," attach the statement required by Regulations section 53.494		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	paj promisino on	┌ va	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	versonal henefit contract?			6b X
If "Yes" to 6b. file Form 8870.	ocisonal penent contract.		1	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	haltar transaction?	□ v _e	s X No	
			——————————————————————————————————————	7b
b If "Yes," did the foundation receive any proceeds or have any net income attributed and the foundation About Officers, Directors, Trust	oes Foundation Ma	nagere Highly		70
Paid Employees, and Contractors	ees, i oundation wa	magers, riigini		
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
LESLIE R. ENGEBRETSON	PRESIDENT	enter-o-j	Compensation	anowanees
	EVESTORMI			
1807 N. 153RD AVENUE CIRCLE	0.00	0.	0.	0.
OMAHA, NE 68154	SECRETARY		0.	•
JAMES D. ENGEBRETSON	BECKEIAKI			
2917 N. 153RD AVENUE	0.00	0.	0.	_
OMAHA, NE 68116		· ·	0.	0.
MICHAEL J. ENGEBRETSON	TREASURER			
1807 N. 153RD AVENUE CIRCLE	- 00		_	
OMAHA, NE 68154	0.00	0.	0.	0.
	-			
	4			
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1) If none	enter "NONE "	<u> </u>	<u> </u>
2 Compensation of live highest-paid employees touter than those in		CINCI NONE.	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	i and deterred	(e) Expense account, other allowances
370379	devoted to position		compensation	allowalices
NONE	-			
				
	4			1
		 		
	-			
		 		
	4			
	<u> </u>			
	4			
	J	1		
Total number of other employees paid over \$50,000				0

Form 990-PF (2014) ENGEBRETSON FOUNDATION INC	20-1	572020 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	r "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		▶ 0
Part IX-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro	stical information such as the duced, etc.	Expenses
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year or	lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3	<u> </u>	0.

Form **990-PF** (2014)

FOUNDATION INC	20-1	72020 Tage 0
Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ındatıons, see	instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	0.
b Average of monthly cash balances	1b	0.
c Fair market value of all other assets	1c	696.
d Total (add lines 1a, b, and c)	1d	696.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	696.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	686.
6 Minimum investment return. Enter 5% of line 5	6	34.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	ind certain	
foreign organizations check here and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1	34.
2a Tax on investment income for 2014 from Part VI, line 5		
b Income tax for 2014. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	73.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	0.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
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	1a	36,695.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	36,695.
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	5	73.
6 Adjusted qualifying distributions Subtract line 5 from line 4	6	36,622.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for the	

Form **990-PF** (2014)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

Corpus Years prior to 2013 2013 2014 1 Distributable amount for 2014 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only b Total for prior years:	0.
line 7 2 Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only b Total for prior years:	0.
2 Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only b Total for prior years:	
a Enter amount for 2013 only b Total for prior years:	
	
3 Excess distributions carryover, if any, to 2014:	
a From 2009 20,973.	
b From 2010 34,919.	
c From 2011 33, 109.	
d From 2012 30,375.	
e From 2013 28, 218.	
f Total of lines 3a through e 147,594.	
4 Qualifying distributions for 2014 from	
Part XII, line 4: ► \$ 36,695.	
a Applied to 2013, but not more than line 2a	
b Applied to undistributed income of prior	
years (Election required - see instructions)	
c Treated as distributions out of corpus	
(Election required - see instructions) 0 •	
d Applied to 2014 distributable amount	0.
e Remaining amount distributed out of corpus 36,695.	0.
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount	<u> </u>
must be shown in column (a))	
6 Enter the net total of each column as indicated below:	
a Corpus Add lines 31, 4c, and 4e Subtract line 5	
b Prior years' undistributed income. Subtract	
line 4b from line 2b	
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	
e Undistributed income for 2013. Subtract line	
4a from line 2a. Taxable amount - see instr.	
f Undistributed income for 2014. Subtract	
lines 4d and 5 from line 1. This amount must	
be distributed in 2015	0.
7 Amounts treated as distributions out of	
corpus to satisfy requirements imposed by	
section 170(b)(1)(F) or 4942(g)(3) (Election	
may be required - see instructions) 0 .	
8 Excess distributions carryover from 2009	
not applied on line 5 or line 7 20,973.	
9 Excess distributions carryover to 2015.	
Subtract lines 7 and 8 from line 6a 163, 316.	
10 Analysis of line 9:	
a Excess from 2010. 34,919.	
b Excess from 2011 33, 109.	
c Excess from 2012 30, 375.	
d Excess from 2013 28, 218.	
e Excess from 2014 36,695.	(2014)

	<u> ISON FOUNDA</u>				72020 Page 10
Part XIV Private Operating Fo	undations (see ins	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter that	it is a private operating			
foundation, and the ruling is effective for	2014, enter the date of t	he ruling	▶		
b Check box to indicate whether the founda	ition is a private operatir	ng foundation described	ın section	4942(j)(3) or 49)42(<u>j)(</u> 5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a	eter-Pleas				
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not			~ ~~~~		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		-		 	
for active conduct of exempt activities.					
•					
Subtract line 2d from line 2c 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:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(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	ı		<u> </u>		
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	ete this part only	/ if the foundation	n had \$5,000 or m	ore in assets
at any time during the	he year-see inst	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who		than 2% of the total co	ntributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed m	ore than \$5,000). (See	section 507(d)(2).)			
LESLIE R. ENGEBRETSO	N				
b List any managers of the foundation who		he stock of a corporation	n (or an equally large port	ion of the ownership of a r	partnership or
other entity) of which the foundation has					
NONE					
2 Information Regarding Contributi	on Grant Gift Loar	Scholarshin etc	Programs		
Check here X if the foundation o				not accept unsolicited ren	uests for funds. If
the foundation makes gifts, grants, etc. (
a The name, address, and telephone numl	`				****
a the name, address, and telephone num	Jei of e-mail address of	the herzon to minim ab	pilications should be addit		
The fact that the state of the	a automitted and inform	steen and materials that	abould include:		
b The form in which applications should b	e submitted and inform	ation and materials they	Siloula iliciade.		
Assessment to the second					
c Any submission deadlines:					
d Any restrictions or limitations on awards	s such as hy geographic	al areas, charitable field	s kinds of institutions or	other factors:	
u Any restrictions of militations on awards	, such as by geographic	on al cas, charlante licit	o, miles of matitutions, U	J.1.01 140101 <i>0</i> .	

423601 11-24-14

Form **990-PF** (2014)

3 Grants and Contributions Paid During the		Pavment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
MATT VAN ORMER			CHARITY - SCHOLARSHIP,	2 240
			BOOKS & FEES	3,340,
·				
PROMISE RANCH THERAPEUTIC RIDING			CHARITY - DONATION	
				5,000,
UNIVERSITY OF NEBRASKA - OMAHA			CHARITY - SCHOLARSHIP AWARDS	6,660,
UNIVERSITY OF NEBRASKA - LINCOLN			CHARITY - SCHOLARSHIP	
			AWARDS	20,000
	Ì			
PAULINA VALDERRABANO			CHARITY -	
		<u> </u>	SCHOLARSHIP/BOOKS	1,695,
b Approved for future payment	· · · · · · · · · · · · · · · · · · ·	 · · ·	> 3a	36 695
u Approved for future payment				
		İ		
NONE				
		1		
	<u></u>			
Total			> 3b	0,

Form 990-PF (2014) ENGEBRETSON FOL	NDATION	INC		20-1	572020 Page 12
Part XVI-A Analysis of Income-Produc	ing Activitie	s			
Enter gross amounts unless otherwise indicated.		ousiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
c					
d					
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments		-			
3 Interest on savings and temporary cash					
investments	j		14	4.	
4 Dividends and interest from securities			14	2,170.	
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	<u> </u>		1		
8 Gain or (loss) from sales of assets other	- 1		 	·	
than inventory			14	9,198.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
			 		
11 Other revenue:				1	
<u>a</u>	 				
b					
c			+ +	-	
d			+ +-		
e				11,372.	
12 Subtotal. Add columns (b), (d), and (e)		0	•		11 272
13 Total. Add line 12, columns (b), (d), and (e)			•	13	11,372.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accor	nplishment of E	xempt P	urposes	
Line No. Explain below how each activity for which inco			A contributed	importantly to the accomp	Dishment of
the foundation's exempt purposes (other than	by providing fund	3 for such purposes).		 	
		·			
					
					
					
					· · · · -
				·	
				 .	
					

Form 990-PF (2		RETSON FOUND				20-157			ge 13
Part XVII	,	garding Transfers	To a	nd Transactions a	ind Relationsl	hips With Nonch	aritable	•	
1 Did the or	Exempt Organi	ectly engage in any of the t	ollowing	with any other organization	n described in secti	on 501(c) of		Yes	No
		(3) organizations) or in sec				0.1 00 1(0) 01			
		tion to a noncharitable exe							
(1) Cash		_	, -				1a(1)	_	Х
(2) Other	assets						1a(2)		Х
b Other tran									
• •	of assets to a noncharitat						1b(1)		X
. ,		ncharitable exempt organiz	ation				1b(2)		X
• •	al of facilities, equipment, o	or other assets				-	1b(3)		X
• •	bursement arrangements				• •		1b(4) 1b(5)		X
	s or loan guarantees	mbership or fundraising so	dicitation				1b(6)		X
		iling lists, other assets, or p			•	-	1c		X
_		"Yes," complete the followi			ways show the fair n	narket value of the goods		ets.	
	•	oundation. If the foundation	-	• •	•	-	-	•	
column (c	i) the value of the goods, (other assets, or services re	ceived.						
(a) Line no	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, an	nd sharing an	rangeme	ents
		<u>N</u>	1/A	 	 				
									<u> </u>
						 			
			-					····	
				· _ ·····		•			
							•		
		.						******	
				· · · · · · · · · · · · · · · · · · ·			• •		
					-				
						 			
O . Jo the four	adates a desath or indepen	the offshoted with or related	to one	or mare toy everent aroon	izationa dagarihad				
	•	tly affiliated with, or related r than section 501(c)(3)) o		• •	izations described		Yes	TY.] No
	omplete the following sch		1 111 3000		• • •			L 43	_ 110
<u>U 11 103, 0</u>	(a) Name of org			(b) Type of organization		(c) Description of relation	nship		
	N/A						,		
		<u> </u>			ļ				
	analtina of personal transfer	that I have examined this return	upol::dr-	a accompanium achadula	d statements and to 45	host of my knowledge			
		mplete Declaration of preparer (s han any knowledge	May the IRS of turn with the		
Here	Liebour	make too	24	107-16-20	15 Executi		shown below X Yes	(see ins	str)?
.	nature of officer or trustee	· Nigoracia		Date	Title	DE KITTELIOT	LAL TES	·	_ No
	Print/Type preparer's na		arer's sı		Date	Check If PTII	N	_	
			11	$2 M_{\odot}$	_	self- employed			
Paid	MICHAEL L.	MASSMAN	fella	el Olma	07/02/15	P	80000	<u>534</u>	<u> </u>
Preparer		SMAN NELSON	REI	NIG PC		Firm's EIN ► 47-			
Use Only						<u> </u>			
	Firm's address ► 13								
	OM	AHA, NE 681:	57			Phone no. (402	330		
							Form 99 0	U-PF	(2014

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (c) Date acquired (d) Date sold (a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo, day, yr.) D - Donation 1a 14.067 ABERDEEN FDS EMERGING MKT 09/12/1308/04/14 Р P 07/25/1408/04/14 b 8.485 ABERDEEN FDS EMERGING MKT 07/25/1408/05/14 P 12.887 ABERDEEN FDS EMERGING MKT 04/28/1408/04/14 P d 14.055 CAUSEWAY EMERGING MKTS 07/2<u>5/</u>14|08/04/14 Ρ e 5.568 CAUSEWAY EMERGING MKTS P 07/25/1408/05/14 f 15.736 CAUSEWAY EMERGING MKTS 07/25/1408/04/14 P g 21.413 JOHN HANCOCK FDS III DISCPIN P 06/21/13<mark>08/04/14</mark> h 31.394 LAUDUS INTL MARKETMASTERS FD P 06/21/13|08/05/14 11.162 LAUDUS INTL MARKETMASTERS FD P 07/25/1408/05/14 1.443 LAUDUS INTL MARKETMASTERS FD P |06/23/06|07/28/14 k 38.805 NUVEEN DIVIDEND VALUE FD 15.866 NUVEEN LARGE CAP GROWTH OPP |07/07/06|07/28/14 P 02/23/0607/28/14 m 3.532 NUVEEN MID CAP GROWTH OPP P 02/23/0607/28/14 P n 2.37 NUVEEN SMALL CAP GROWTH OPP P |07/25/1<u>4|08/04/14</u> o 9.316 T ROWE PRICE GROWTH STOCK (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 11. 207 218 a 155. <23.> 132. b <5.> 202. 207. C 165. 14. 179. đ 71 91. <20.> е 205. 203. <2.> f 410. <11.> 399. g 726. 21. 747. ħ 120. 147. 267 111. <77.> 34. 456. 230. 686 k 225. 439. 664. 1 57. 126. 183. m 62. 54. 8. n 512. <13.> 499. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 11. a <23.> b <5.> C 14. d <20.> e <2.> <11.> g 21. 120. 1 <77.> 230. 225. 5<u>7.</u> m 8. <13.> 0 If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 Capital gain net income or (net capital loss) 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

20-<u>157</u>2020

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. Ρ 07/25/1408/05/14 1a 3.736 T ROWE PRICE GROWTH STOCK P 07/25/1408/04/14 b 18.541 T ROWE PRICE INTL GR & INC P 07/25/1408/05/14 c 21.726 T ROWE PRICE INTL GR & INC 07/28/14|08/04/14 P d 2.662 T ROWE PRICE MID CAP GROWTH e .933 T ROWE PRICE MID CAP GROWTH Ρ 07/28/14|08/05/14 P 07/28/14|08/04/14 1 6.248 T ROWE PRICE MID CAP VALUE 07/25/1408/04/14 g 3.394 VANGUARD 500 INDEX FD P P 07/25/1408/05/14 500 h 1.362 VANGUARD INDEX P |07/28/14|08/04/14 1 23.343 BAIRD AGGREGATE BOND FD P 07/28/14|08/05/14 9.32 BAIRD AGGREGATE BOND FD P 07/28/14|08/04/14 k 19.627 FEDERATED INST HI YLD BOND FD P 07/28/1408/05/14 7.396 FEDERATED INST HI YLD BOND FD P 08/14/0607/28/14 m 51.055 NUVEEN CORE PLUS BOND 02/23/0608/04/14 n 7.061 NUVEEN INFLATION PRO SEC P 07/28/1408/04/14 o 22.957 PIMCO TOTAL RETURN FD P (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price plus expense of sale (e) plus (f) minus (g) (or allowable) 205 202 <3.> a 305. <<u>6.</u>> 299. b 357. 351. <6.> C <4.> 200. 204. d 72. 71 <1.> е 203. 200. <3.> 499. 515. <16.> g 201. 207. <6.> h 250 251. <1.> ١ 100. 0. 100. <3.> 199. 202. k 76. 75. <1.> 53. 598. 545. m 80. 69. 11. n 251. 251. 0. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any <3.> a <6.> b <6.> <4.> d <1.> <3.> <16.> g <6.> h <1.> 0. <<u>3 .</u>> <1.> <u>53.</u> m 11. n 0. { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

N/A

20-1572020 PAGE 3 OF ENGEBRETSON FOUNDATION INC Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. 07/28/1408/04/14 1a 20.492 T ROWE PRICE INTL BOND FD P |05/03/13|08/04/14 b 4.337 NUVEEN REAL ESTATE SECS P P 10/25/1208/04/14 c 9.963 CREDIT SUISSE COMM RET ST CO P 07/25/1408/04/14 d 20.27 CREDIT SUISSE COMM RET D 03/27/1504/06/15 1 BERKSHIRE HATHAWAY INC 03/27/1504/06/15 D f 650 RALPH LAUREN CORP 03/27/1504/29/15 D g 600 ACCENTURE PLC CI A 03/27/1504/29/15 h 555 CONSTELLATION BRANDS INC D D 03/27/1504/29/15 1510 MCDONALDS CORP D 03/27/1504/29/15 45 PRICELINE COM INC 03/27/1504/29/15 D k 463 RALPH LAUREN CORP CAPITAL GAINS DIVIDENDS m n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price plus expense of sale (e) plus (f) minus (g) (or allowable) 201 <1.> 200 a 86. 14. 100. b 83. 73. <10.> C 150. <2.> 148 đ 216,240. 2,248. 218,488 е 85,761. 187. 85,948. f 56,502. <439.> 56,063. g 63,720 459. 64,179. h 49,852. 49,796 56. 3,947. 51,316. 55,263. 63,180. 61.122 2,058. k 132. 132. m П 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any <1.> а 14. b <10.> C <2.> d 2,248. е 187. <439.> g 459. h 56. 3,947. 2,058. m n 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 2 9,198.

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

If gain, also enter in Part I, line 8, column (c).

If (loss), enter "-0-" in Part I, line 8

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, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Name of the organization

Employer identification number

E	INGEBRETSON FOUNDATION INC	20-1572020			
Organization type (check					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule See instructions.			
General Rule					
•	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor				
Special Rules					
sections 509(a)(any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amou EZ, line 1. Complete Parts I and II	, or 16b, and that received from			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contribution, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Feet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

Name of organization

Employer identification number

ENGEBRETSON FOUNDATION INC

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$ 46,083.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$ 56,502.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$61,7 4 7.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$216,240.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$ 63,720.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$ 48,445.	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

ENGEBRETSON FOUNDATION INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$65,699.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$ 44,846.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$\$.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$ 95,513.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$ 51,316.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$\$ <u>146,883.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

ENGEBRETSON FOUNDATION INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
13	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$38,590.	Person Payroll Noncash X (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
14	LESLIE R ENGEBRETSON 1807 N. 153RD AVENUE CIRCLE OMAHA, NE 68154	\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
423452 11-		\$Schedule R / Form	Person Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2014)	

Employer identification number

ENGEBRETSON FOUNDATION INC

art II	Noncash Property (see instructions) Use duplicate copies of Part II i	f additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_	600 SHARES ACCENTURE PLC	-	
_2		\$ 56,502.	03/27/15
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	497 SHARES APPLE INC	_	
		\$\$61,747.	03/27/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1 SHARE BERKSHIRE HATHAWAY INC	-	
4		\$ 216,240.	03/27/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	555 SHARES CONSTELLATION BRANDS INC	-	
<u> </u>		\$ 63,720.	03/27/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	475 SHARES CVS HEALTH CORPORATION	-	
			03/27/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	650 SHARES GILEAD SCIENCES INC	-	
<u>_</u>		_ _ _ \$65,699.	03/27/15

Employer identification number

ENGEBRETSON FOUNDATION INC

No, rom	(6)	(c)	1
	(b)	FMV (or estimate)	(d)
	Description of noncash property given	(see instructions)	Date received
art I	1 FOO GWARDS WARNING OT GORDONATON		
8	1,700 SHARES MARATHON OIL CORPORATION		
_ °			
		\$44,846.	03/27/15
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
om art I	Description of noncash property given	(see instructions)	Date received
21 (1	E10 CHAREC MCDONALDC CODD		
9	510 SHARES MCDONALDS CORP		
		\$49,796.	03/27/15
(a)		(c)	
No. rom	(b)	FMV (or estimate)	(d)
art I	Description of noncash property given	(see instructions)	Date received
	1,460 SHARES MOTOROLA SOLUTIONS INC		
10	17100 51111125 11010110211 5020120115 2110		
		ļ	
		\$ 95,513.	03/27/15
			<u> </u>
(a)		(c)	4.5
No. rom	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
art I	Description of noncastr property given	(see instructions)	Date received
	45 SHARES PRICELINE COM INC		
<u>11</u>			
		\$ 51,316.	03/27/15
(2)			
(a) No.	(b)	(c)	(d)
rom	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
art I		(see insuluctions)	
	1,113 SHARES RALPH LAUREN CORP		
<u>12</u>			
		\$146,883.	03/27/15
		140,003.	
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
rom	Description of noncash property given	(see instructions)	Date received
art I	000 000 000		
1 2	290 SHARES THERMO FISHER SCIENTIFIC		
<u>13</u>	INC		
		\$ 38,590.	03/27/15

Employer identification number

ENGEBRETSON FOUNDATION INC

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1.4	895 SHARES WELLS FARGO CO		
14			
		\$ 48,777.	03/27/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		s	
(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
		-	
		-	
		_ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		. \$	
(a) No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
Part I			
		-	
		\$	
423453 11-0	5-14	Schedule B (Form S	990, 990-EZ, or 990-PF) (2014)

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

Page 4

Name of org	anization		Employer identification number
ENGEDI	DEMICON FOUNDAMION INC		20 1572020
Part III	ETSON FOUNDATION INC Exclusively religious, charitable, etc., contribute year from any one contributor. Complete c completing Part III, enter the total of exclusively religious	olumns (a) through (e) and the following is	20-1572020 ction 501(c)(7), (8), or (10) that total more than \$1,000 for or the year (Enter this info once) \$\\$\\$\$
(-) NI-	Use duplicate copies of Part III if additional	al space is needed.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is heid
		(e) Transfer of gift	
	Transferee's name, address, at	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee
ļ	mansieree s name, auuress, ar	IM ZEIF T T	netationship of transfer to transferee
ļ			

FORM 990-PF INTEREST	ON SAVII	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A REVE: PER B	NUE	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME
USBANK			4.		4.	
TOTAL TO PART I, LINE	3		4.		4.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) VENUE BOOKS	(B) NET INVES MENT INCC	
USBANK	2,302	. 13	2.	2,170.	2,17	70.
TO PART I, LINE 4	2,302	. 13	2.	2,170.	2,17	70.
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM	
ACCOUNTING & TAX PREE	FEES	1,500.		1,500.		0.
TO FORM 990-PF, PG 1,	LN 16B	1,500.		1,500.		0.
FORM 990-PF		TAX	ES			STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS) VEST- NCOME	(C) ADJUSTED NET INCOM	
FEDERAL INCOME TAXES PAYROLL TAXES		73. 83.		73. 0.		0.
TO FORM 990-PF, PG 1,	LN 18	156.		73.		0.

TOTAL TO FORM 990-PF, PART II, LINE 10B

FORM 990-PF	OTHER E	XPENSES		STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
INVESTMENT MANAGEMENT FEES INTERNET EXPENSES POST OFFICE BOX FEE OFFICE SUPPLIES	1,958. 264. 240. 48.	264. 240.			0.0
TO FORM 990-PF, PG 1, LN 23	2,510.	2,510.			0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	
DESCRIPTION		вос	OK VALUE	FAIR MARKE	Т
NUVEEN RE SECURITIES FUND NUVEEN DIVIDEND VALUE FUND NUVEEN SMALL CAP GWTH OPP NUVEEN MID CAP GWTH OPP NUVEEN LARGE CAP GWTH OPP LAUDUS INTL MARKETMASTERS ABERDEEN FDS EMERGING MKT IN CAUSEWAY EMERGING MARKETS JOHN HANCOCK FDS III DISCPLN T ROWE PRICE GROWTH STOCK T ROWE PRICE INTL GWTH & INC T ROWE PRICE MID CAP GROWTH T ROWE PRICE MID CAP VALUE VANGUARD 500 INDEX ADMIRAL PIMCO TOTAL RETURN FD APPLE INC CVS HEALTH CORPORATION GILEAD SCIENCES INC MARATHON OIL CORPORATION MOTOROLA SOLUTIONS INC THERMO FISHER SCIENTIFIC INC	VI		50,887. 0. 0. 0. 389. 258. 40,721. 715. 408. 613. 204. 197. 404. 229. 61,747. 48,445. 65,699. 44,846. 95,513. 38,590. 48,777.	24 38,8 7. 4 5 2: 1:	$\begin{smallmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 8 & 2 \\ 5 & 2 & 4 & 2 & 3 \\ 5 & 2 & 4 & 3 & 1 \\ 6 & 3 & 7 & 2 & 3 \\ 4 & 0 & 0 & 3 \\ 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \\ 0 & 0 &$

577,195.

580,118.

FORM 990-PF COI	RPORATE BONDS	STATEMENT 7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
NUVEEN INFLATION PRO SEC	30,543.	30,174.
NUVEEN HIGH INCOME BOND FD	28,015.	28,007.
NUVEEN CORE PLUS BOND FD	0.	0.
CREDIT SUISSE COMM RET ST CO	0.	0.
BAIRD AGGREGATE BOND FUND	129.	130.
FEDERATED INST HI YLD BD FD	71,296.	71,008.
T ROWE PRICE INTL BD FD	279.	241.
AMER CENT DIVERSIFIED BOND INS	45,830.	45,290.
TOTAL TO FORM 990-PF, PART II, LIN	E 10C 176,092.	174,850.

Depreciation and Amortization (Including Information on Listed Property)

990PF

Attach to your tax return.

Business or activity to which this form relates

OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

▶ Information about Form 4562 and its separate instructions is at www.rs.gov/form4562.

Sequence No 179

Identifying number

								1550000
	EBRETSON FOUNDATION		10.11.2			PAGE		20-1572020
Par		Under Section 1	9 Note: If you have	any listed pi	горепу, со	ompiete Part		
	laximum amount (see instructions)						2	500,000.
_	otal cost of section 179 property placed	•	•	••	•	•	3	2 000 000
	hreshold cost of section 179 property b						4	<u>2,000,000.</u>
4 R	eduction in limitation. Subtract line 3 fr	om line 2. It zero	or less, enter -0-		•		5	
	ollar limitation for tax year Subtract line 4 from line 1					(-) E14		
6	(a) Description of prop	erty	(b) Co	st (business use	only)	(c) Elected	cost	
				<u>-</u>				
		<u>.</u>						
								
	isted property. Enter the amount from I				7			
	otal elected cost of section 179 proper		in column (c), lines	6 and 7			8	
	entative deduction. Enter the smaller of		1500	•			9	
	arryover of disallowed deduction from				. :		10	-
	susiness income limitation. Enter the sm		•	•	line 5	•	11	
	ection 179 expense deduction. Add lin			than line 11			12	
	carryover of disallowed deduction to 20			<u> </u>	13			
	Do not use Part II or Part III below for					4		
Par			··				1	
	special depreciation allowance for qualit	ied property (oth	er than listed prop	erty) placed	in service	during		
	ne tax year		• •		•	-	14	
	Property subject to section 168(f)(1) elec	ction		•	•		15	
	Other depreciation (including ACRS)			otiono \			16	
Pai	t III MACRS Depreciation (Do not	include listed pr			 			
			Section			· · · · · · · · · · · · · · · · · · ·		E 4 2
	MACRS deductions for assets placed in				•	⊢	17 17 T	543.
18 If	you are electing to group any assets placed in servi					eral Deprecia	tion System	
	Section B - Assets i	(b) Month and	(c) Basis for deprec	ation	-	Clai Deprecie	liton Oyst	5111
	(a) Classification of property	year placed in service	(business/investmei only - see instructi	ituse (a	l) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property				·			
<u> </u>	5-year property	}						
	7-year property	Ì						
d	10-year property							
e	15-year property					1		
f	20-year property	1						
g	25-year property	j			25 yrs.		S/L	
		/			7.5 yrs.	ММ	S/L	
h	Residential rental property	/			7.5 yrs	MM	S/L	
		/			 39 yrs.	ММ	S/L	
i	Nonresidential real property	,			, 1	MM	S/L	
	Section C - Assets Pl	aced in Service	During 2014 Tax	rear Using t	the Altern			stem
20a	Class life					<u> </u>	S/L	
<u> </u>	12-year				12 yrs.		S/L	
	40-year	/			40 yrs.	MM	S/L	
	rt IV Summary (See instructions.)		<u> </u>					·
_	isted property. Enter amount from line	28					21	
	otal. Add amounts from line 12, lines 1		es 19 and 20 in co	 umn (a), and	d line 21.		<u> </u>	
	Enter here and on the appropriate lines	-					22	543.
	for assets shown above and placed in s							
		_	,		1 1			
	portion of the basis attributable to section	on 263A costs	··		23			

begins

42 Amortization of costs that begins during your 2014 tax year:

43 Amortization of costs that began before your 2014 tax year

44 Total. Add amounts in column (f) See the instructions for where to report

amount

43 44 Form 4562 (2014)