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Department of the Treasury

Internal Revenue Service

DLN: 93491153007586

OMB No 1545-0052

Inspection

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 instructions is at www.irs.gov/form990pf.

Open to Public

, and ending 12-31-2015 For calendar year 2015, or tax year beginning 01-01-2015 A Employer identification number Name of foundation REARDON - MOHR FOUNDATION 39-1896086 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 506 SOUTH BELTLINE (308) 632-7717 C If exemption application is pending, check here ▶ City or town, state or province, country, and ZIP or foreign postal code SCOTTSBLUFF, NE 69361 G Check all that apply Initial return of a former public charity Initial return **D 1.** Foreign organizations, check here Final return Amended return $\textbf{2.} \ \ \text{Foreign organizations meeting the } 85\%$ Name change Address change test, check here and attach computation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method IFair market value of all assets at end If the foundation is in a 60-month termination Cother (specify) under section 507(b)(1)(B), check here of year (from Part II, col. (c), (Part I, column (d) must be on cash basis.) line 16) **>\$** 74,951 Part I Analysis of Revenue and Expenses Disbursements Revenue and Net investment Adjusted net for charitable (The total of amounts in columns (b), (c), and (d) may not expenses per ıncome necessarily equal the amounts in column (a) (see (b) (c) purposes income books (d) (cash basis only) instructions)) Contributions, gifts, grants, etc , received (attach 1 80.000 2 Check ► ☐ If the foundation is **not** required to attach 3 Interest on savings and temporary cash investments 50 50 902 902 Dividends and interest from securities Gross rents 5a Net rental income or (loss) _ b Net gain or (loss) from sale of assets not on line 10 207 6a Revenue Gross sales price for all assets on line 6a 57,924 Capital gain net income (from Part IV, line 2) . . . Net short-term capital gain . . . Income modifications . . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) . . C 11 Other income (attach schedule) Total. Add lines 1 through 11 81,159 1,159 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . . Operating and Administrative Expenses Legal fees (attach schedule). 16a Accounting fees (attach schedule). 卿 b Other professional fees (attach schedule) . c **17** 囱 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 21 Travel, conferences, and meetings. 22 Printing and publications. . 囫 403 23 Other expenses (attach schedule). 24 Total operating and administrative expenses. 398 Add lines 13 through 23 2.293 73,570 73,570 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 75,863 73,570 25 27 Subtract line 26 from line 12 5,296 Excess of revenue over expenses and disbursements a 761 Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of	
	1	Cash—non-interest-bearing	(a) Book Value	(b) Book Value	(c) Fair Market Value
	2	Savings and temporary cash investments	71,841	77,137	74,951
	3	Accounts receivable -	. =, : . =	,==:	,
	,	Less allowance for doubtful accounts			
	4	Pledges receivable			
	7	Less allowance for doubtful accounts -			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	O	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	,	Less allowance for doubtful accounts			
	0	Inventories for sale or use			
왍	8	Prepaid expenses and deferred charges			
Assets	9				
ď	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) -			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) 🟲			
	15	Other assets (describe 🟲)			
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	71,841	77,137	74,951
	17	Accounts payable and accrued expenses			
ا ؞	18	Grants payable			
abilities	19	Deferred revenue			
[[20	Loans from officers, directors, trustees, and other disqualified persons			
Lat	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here 🕨 🔽			
or Fund Balances		and complete lines 24 through 26 and lines 30 and 31.			
흥	24	Unrestricted	71,841	77,137	
8	25	Temporarily restricted			
힏	26	Permanently restricted			
킖		Foundations that do not follow SFAS 117, check here 🕨 🦵			
5		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
٩	29	Retained earnings, accumulated income, endowment, or other funds			
Ř	30	Total net assets or fund balances(see instructions)	71,841	77,137	
	31	Total liabilities and net assets/fund balances(see instructions)	71,841	77,137	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column ((a), line 30 (must agr	ee	
		with end-of-year figure reported on prior year's return)		1	71,841
2		Enter amount from Part I, line 27a		2	5,296
3		Other increases not included in line 2 (itemize)		_ 3	0
4		Add lines 1, 2, and 3		4	77,137
5		Decreases not included in line 2 (itemize)		_ 5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa		e 30 . 6	77.137

	List and describe (a) 2-story brick ward		perty sold (e g , re on stock, 200 shs	•	How acquire P—Purchase (b) D—Donation	(c) (r	ate acquired no , day, yr)	Date sold (d) (mo , day, yr)
1a	See Additional Data	Table						
b								
d								
	e) Gross sales price	(f)	epreciation allowe (or allowable)		or other basis expense of sale			n or (loss) (f) minus (g)
a	See Additional Data		,	(3)	•			()
d								
						-		
e								
Co	mplete only for assets	showing gain in co				┥ .		(h) gain minus
(i)	FMV as of 12/31/69		Adjusted basis as of 12/31/69		cess of col (ı) r col (j), ıf any	(I) ^c		ot less than -0-) or (from col (h))
a	See Additional Data		, == == == ,	(11,111				· · · · · · · · · · · · · · · · · · ·
d						-		
e								
2	Capital gain net inco		· L	If gain, also enter If (loss), enter -0-	ın Part I, line 7	2		207
3	Net short-term capit					,		
	If gain, also enter in in Part I, line 8 .	Part I, line 8, colu	ımn (c) (see ınstru	ctions) If (loss), e	nter -0- • •	3		
Part	V Qualification (Inder Section	4940(e) for R	educed Tax on	Net Investm	ent In	come	
	nonal use by domestic pon 4940(d)(2) applies,			ection 4940(a) tax	on net investmen	tincom	e)	
	e foundation liable for th " the foundation does n					eriod?		┌ Yes ┌ No
1 En	ter the appropriate amo	unt ın each colum	n for each year, s	ee instructions befo	ore making any en	tries		
	(a) period years Calendar or tax year beginning in)	(Ł Adjusted qualify		(c) Net value of nonchai	ritable-use assets		(d) Distributio (col (b) divideo	n ratio
	2014		34,715		80,166		((-) airiaet	0 433039
	2013		31,426		84,465			0 372059
	2012		3,900		80,163			0 048651
	2011		2,500		61,454			0 040681
	2010		500		54,889			0 009109
	Totalof line 1, columi	n (d)			· · · · · · · · · · · · · · · · · · ·	2		0 903539
3	A verage distribution				<u> </u>			
	the number of years t					3		0 180708
4	Enter the net value o	f noncharitable-us	se assets for 201!	5 from Part X, line 5	[4		85,577
5	Multiply line 4 by line				L	5		15,464
6	Enter 1% of net inve	stment income (1	% of Part I, line 2	7b)	[6		8
7	Add lines 5 and 6.				[7		15,472

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

73,570

8

L CI	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49	7 7 0(e),	01 4940—Se	e pag	C 10 01	the in	SCIUCCIO	/IIS <i>)</i>	
1a				1					
	and enter "N/A" on line 1 Date of ruling or determination letter			Į					
	(attach copy of letter if necessary-see instructions)			1					
b	Domestic foundations that meet the section 4940(e) requirements in Part V ,	check			1				8
	here 🟲 🔽 and enter 1% of Part I, line 27b			. '					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizar Part I, line 12, col (b)	tions e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable found enter $-0-$)	dation	s only Othe	rs	2				0
3	Add lines 1 and 2			•	3				8
4	Subtitle A (income) tax (domestic section $4947(a)(1)$ trusts and taxable foun enter -0-)			ers	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, er	nter - 0		•	5				8
6	C redits/P ayments		1						
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a							
b	Exempt foreign organizations—tax withheld at source	6b							
C	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2				8				
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed .				9				8
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount	t overp		•	10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded	_	11				
	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state,	, or loc	al legislatio	n or d	ıd			Yes	No
				٠.			. <u>1a</u>		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p			see Ir	ıstruct	ions	۱.,		
	for definition)?					•	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	ana co	pies of any n	nateria	als				
_	published or distributed by the foundation in connection with the activities. Did the foundation file Form 1120-POL for this year?						1c		No
	Enter the amount (if any) of tax on political expenditures (section 4955) impos	• •	· · · ·				10		NO
a	(1) On the foundation \Rightarrow \$ 0 (2) On foundation managers		= -	0					
e	Enter the reimbursement (if any) paid by the foundation during the year for political forms.				nnead				
-	on foundation managers \blacktriangleright \$0	tical e.	xpenditure to	a	Joseu				
2	Has the foundation engaged in any activities that have not previously been rep	orted	to the IRS2				. 2		No
	If "Yes," attach a detailed description of the activities.	orcea .	to the INS	• •	• •	• •			
3	Has the foundation made any changes, not previously reported to the IRS, in it	e anve	rnina instriii	ment	article	c			
•	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confe	_	_	-			. 3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more du						4a		No
ь	If "Yes," has it filed a tax return on Form 990-T for this year?						4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction dur								No
_	If "Yes," attach the statement required by General Instruction T.	.	,						
6	Are the requirements of section 508(e) (relating to sections 4941 through 494	45) sa	tisfied eithei	r					
	By language in the governing instrument, or	,							
	By state legislation that effectively amends the governing instrument so that	at no n	nandatory di	rectio	ns				
	that conflict with the state law remain in the governing instrument?						. 6		No
7	Did the foundation have at least \$5,000 in assets at any time during the year?	If "Yes	s," complete l	Part II	, col. (c	:),			
	and Part XV.						. 7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)						
	▶ <u>NE</u>								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99								
	General (or designate) of each state as required by General Instruction G? If "	"No," at	tach explanat	ion .			8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the m		_						
	or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (see	ee inst	ructions for	Part >	۲(V IX				
	If "Yes," complete Part XIV						. 9	 	No
10	Did any persons become substantial contributors during the tax year? If "Yes,"			_			_		
	and addresses.						. 10	1 !	No

Par	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)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	. 12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶ <u>N/A</u>			
14	The books are in care of ▶PAUL MOHR JR	3)632	-3378	
	Located at ▶901 FLAMINGO COURT SCOTTSBLUFF NE ZIP+4 ▶69361			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	مه ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			т
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
•	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
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 $4942(j)(5)$)			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes V No			
	If "Yes," list the years > 20, 20, 20			
b	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 statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 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 dispose 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 2015.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Pa	Statements Rega	arding Activities to	r vvr	iich Form 4/20	мау ве кеquired	i (Com	unue	a)	
5a	During the year did the foundatio								
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e leg	ıslatıon (section 49	45(e))? Γ	Yes	✓ No		
	(2) Influence the outcome of any	specific public election	(see	section 4955), or to	carry				
	on, directly or indirectly, any	voter registration drive?				Yes			
	(3) Provide a grant to an individu	ıal for travel, study, or ot	hers	ımılar purposes?	Γ	Yes	✓ No		
	(4) Provide a grant to an organiza		-	· -					
	in section 4945(d)(4)(A)? (s	ee instructions)				Yes	No		
	(5) Provide for any purpose other	r than religious, charitab	le, sc	ientific, literary, or	_		_		
	educational purposes, or for t				•	Yes			
b	If any answer is "Yes" to 5a(1)-(
	Regulations section 53 4945 or							5b Yes	
	O rganizations relying on a currer					►[_		
С	If the answer is "Yes" to question						_		
	tax because it maintained expend					Yes	No		
	If "Yes," attach the statement requ								
6a	Did the foundation, during the yea		-				_		
	a personal benefit contract?				•	Yes			
Ь	Did the foundation, during the yea	ar, pay premiums, direct	y or i	ndirectly, on a perso	onal benefit contract?		•	6b	No
	If "Yes" to 6b, file Form 8870.				_		_		
7a	At any time during the tax year, w	· ·	-		·	Yes			
<u> </u>	If yes, did the foundation receive							7b	
Pa		t Officers, Director	s, T	rustees, Founda	ition Managers,	Highly	Paid	Employee	es,
	and Contractors List all officers, directors, trustee	s. foundation managers	and t	heir compensation (see instructions).				
		İ			(d)				
	(a) Name and address	Title, and average hours per week	(6)) Compensation(If not paid, enter	Contributions	Expense account, (e) other allowances			
	•	(b) devoted to position		-0-)	employee benefit and deferred compe				
MIND	DY GRABAU	CO-CHAIR	1	0					
886	9 PORTICO LANE	1 00							0
LON	IGMONT,CO 80501								
PAUL	MOHR JR	CO-CHAIR		0		0			0
	FLAMINGO COURT	1 00							
	OTTSBLUFF,NE 69361		<u> </u>						
	Compensation of five highest-paid	d employees (other than	thos	e included on line 1–	-see instructions). If Contributi	•	nter "N	IONE."	
	(a)	Title, and ave			employee		[Expense acco	ount,
Na	me and address of each employee more than \$50,000	paid hours per we (b) devoted to pos		(c) Compensatio	pians and d		(e)	other allowan	nces
		(2) acrosses to pos			(d) compens	ation			
иол	NE								
							L		
	al number of other employees paid	over\$50.000				>			0

	(see instructions). If none, enter "NO!	VE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	、	
otal number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
st the foundation's four largest direct charitable activities during the tax year Include re rganizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1	duced, etc	
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1	•	A mount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2 All other program-related investments See instructions	•	Amount
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during 1 2	•	Amount

Form 990-PF (2015) Part X Minimum Investment Return

ГС	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	52,234
b	Average of monthly cash balances	1b	34,646
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	86,880
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	86,880
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions)	4	1,303
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	85,577
6	Minimum investment return. Enter 5% of line 5	6	4,279
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cere check here ► □ and do not complete this part.)	rtaın fore	eign organizations
1	Minimum investment return from Part X, line 6	1	4,279
2a	Tax on investment income for 2015 from Part VI, line 5 2a 8		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	8
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,271
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	4,271
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	4,271
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	73,570
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	A mounts set aside for specific charitable projects that satisfy the		
а	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	73,570
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	8
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	73,562
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	er the fou	ındatıon qualıfıes for

Ρ	art XIIII Undistributed Incor	ne (see instruc	tions)				
			(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015	
1	Distributable amount for 2015 from Pa	art XI, line 7					4,271
2	Undistributed income, if any, as of the	end of 2015					
а	Enter amount for 2014 only				0		
	Total for prior years 20, 20_			0			
	Excess distributions carryover, if any,			-			
	From 2010						
	From 2011						
c	From 2012						
d	From 2013	27,223					
	From 2014	30,779					
f	Total of lines 3a through e		58,002				
	Qualifying distributions for 2015 from						
	XII, line 4 🕨 \$ 73,						
а	Applied to 2014, but not more than lin				0		
	Applied to undistributed income of prior			0			
_	(Election required—see instructions).	•					
c	Treated as distributions out of corpus required—see instructions)		0				
d	Applied to 2015 distributable amount.						4,271
е	Remaining amount distributed out of c	orpus	69,299				
5	Excess distributions carryover applied	d to 2015	0				0
	(If an amount appears in column (d), the same amount must be shown in col						
6	Enter the net total of each column as indicated below:						
а	Corpus Add lines 3f, 4c, and 4e Subti	ract line 5	127,301				
	Prior years' undistributed income Subt						
	line 4b from line 2b			0			
C	Enter the amount of prior years' undist						
	income for which a notice of deficiency						
	been issued, or on which the section 4 tax has been previously assessed	, ,		0			
А	Subtract line 6c from line 6b Taxable						
u	—see instructions			0			
е	Undistributed income for 2014 Subtra	act line					
	4a from line 2a Taxable amount—see				0		
f	Undistributed income for 2016 Subtra	oct.					
•	lines 4d and 5 from line 1 This amoun						
	be distributed in 2015						0
7	Amounts treated as distributions out of	of					
	corpus to satisfy requirements impose	, , , , , , , , , , , , , , , , , , ,					
	section 170(b)(1)(F) or 4942(g)(3) (E		0				
_	be required - see instructions)		, , , , , , , , , , , , , , , , , , ,				
8	Excess distributions carryover from 2 applied on line 5 or line 7 (see instruct		0				
۵	Excess distributions carryover to 2016	· · · · · · · · · · · · · · · · · · ·					
9	Subtract lines 7 and 8 from line 6a.		127,301				
10	Analysis of line 9						
	Excess from 2011						
b	Excess from 2012						
c	Excess from 2013	27,223					
d	Excess from 2014	30,779					
е	Excess from 2015	69,299					

NONE

	n 990-PF (2015) art XIV Private Operating Foundat	tions (see instru	ictions and Part	VII-A question	. 9)	Page
	If the foundation has received a ruling or determ	•			1 9)	
-	foundation, and the ruling is effective for 2015,					
b	Check box to indicate whether the organization	ıs a prıvate operat	ing foundation de	scribed in section		
3	Enter the lesser of the adjusted net	Tax year	(a) Total			
	income from Part I or the minimum investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	year listed					
ξ	35% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
	Amounts included in line 2c not used directly for active conduct of exempt					
	activities					
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
	Complete 3a, b, or c for the					
	alternative test relied upon					
	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed "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					
	(4) Gross investment income					
	rt XV Supplementary Information (Complete this	part only if th	e organizatio	n had \$5,000 o	r more in
	assets at any time during the	year—see inst	ructions.)	_		
	Information Regarding Foundation Managers:					
	List any managers of the foundation who have c before the close of any tax year (but only if the					ation
	List any managers of the foundation who own 10)% or more of the s	stock of a corpora	tion (or an equally	large portion of the	9
	ownership of a partnership or other entity) of wh				3 1	
-	Information Regarding Contribution, Grant, Gif	t. Loan. Scholarshi	p. etc Programs:			
	Check here ► if the foundation only makes co				nd does not accent	
	unsolicited requests for funds. If the foundation					ıs under
	other conditions, complete items 2a, b, c, and c		, ,	,	J	
	The name, address, and telephone number or e	-mail address of th	ne person to whom	n applications sho	uld be addressed	
	PAUL MOHR	· · •				
	901 FLAMINGO COURT					
	SCOTTSBLUFF, NE 69361					
	(308) 632-7717					
	The form in which applications should be subm	itted and information	on and materials t	they should includ	e	
	LETTER					
	Any submission deadlines					· · · · ·
	NONE					
ı	Any restrictions or limitations on awards, such	as by geographica	ıl areas, charıtabl	e fields, kinds of ii	nstitutions, or other	-
	factors		,	,	•	

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 73,570 **b** Approved for future payment

Form 990-PF (2015) Part XVI-A Analysis of Income-Production	ing Activitie	 S			Page 1 2
Enter gross amounts unless otherwise indicated		siness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
a b					
c					
e					
 g Fees and contracts from government agencies 2 Membership dues and assessments. 3 Interest on savings and temporary cash investments. 			14	50	
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate			14	902	
a Debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income 8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events10 Gross profit or (loss) from sales of inventory			14	598	-39
 11 Other revenue a					
b					
d e					
12 Subtotal Add columns (b), (d), and (e). 13 Total.Add line 12, columns (b), (d), and (e).				1,550 1 3	-39 1,159
(See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to	o the Accomp				
Line No. Explain below how each activity for wh the accomplishment of the foundation instructions)					
8 INVESTMENT SALES & EARNINGS					

Part	XVI	Information Re Noncharitable					sactio	ns and I	Relationships	With			
		organization directly or i	ndırectly e	engage II	n any of t	he following wi						V	N.
		501(c) of the Code (othe	er than se	ction 50	1(c)(3) o	rganizations) (or in sec	tion 527,	relating to politic	al		Yes	No
_		tions?	dation to		a w ta bla d								
										1	2(1)		No
• •											1(2)		NO
			ritable evi	emnt ora	ianizatior	1				1	h(1)		No
										-			No
										_			No
										<u> </u>			No
										—			No
	_		_								et val	ue	
ın a	ny tra	ansaction or sharing arra	angement	, show in	column	(d) the value o	of the go	ods, other	assets, or servic	ces received			
(a) Line	NO	(b) Amount involved	(C) Name	OI HOHCHA	ппаріе ехе	ilipt olganization	(a)	Description	or transfers, transact	ions, and snam	y allal	igemei	its .
3 - I - I	6.	4- 4 4 41											
des	cribe	d in section 501(c) of the complete the following:	ne Code (d schedule		n sectior	n 501(c)(3)) or	'ın secti				•	s 🔽	No
				+									
Sign	the	best of my knowledge a	ınd belief,	ıt ıs true	e, correct					in taxpayer)	ıs bas	ed on	all
Here		*****				2016-06-01	—)	*****		return with the			
	'	Signature of officer or t	rustee			Date	,	Title			r)? 🔽	Yes N	No
		Print/Type preparer's TROY L HILYARD	name	Prepare	er's Sıgn	ature	Date		Check if self- employed ►	PTIN POO	0398	95	
Paid Prepa Use	arei		or loan guarantees. 10(5)										
Only			SUITE 1	00 SCO ⁻	TTSBLUI	FF,			Phone no (308	3)632-6570			

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)
AKRE FOCUS FD RETAIL	Р	2014-03-07	2015-08-21
AKRE FOCUS FD RETAIL	Р	2014-06-24	2015-08-21
JAMES BALANCED GOLDEN RAINBOW FUND	Р	2013-05-13	2015-08-24
WESTCORE PLUS BOND FUND	Р	2014-06-19	2015-08-18
BLACKROCK MULTI ASSET	Р	2014-06-24	2015-08-21
PARNASSUS CORE EQTY FD	Р	2014-06-24	2015-08-21
GLENMEDE LARGE CAP CORE GTLOX	Р	2014-07-15	2015-08-21
INVESCO CONV SECURITIES FD CL A	Р	2013-05-13	2015-02-04
INVESCO CONV SECURITIES FD CL A	Р	2013-12-31	2015-02-04
INVESCO CONV SECURITIES FD CL A	Р	2013-12-31	2015-02-04

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
2,758		2,500	258
1,238		1,130	108
300		285	15
3,077		3,125	-48
3,911		4,185	-274
5,896		5,750	146
3,845		3,700	145
1,666		1,652	14
205		203	2
2,018		2,000	18

Complete only for assets showing gain in column (h) and owned by the foundation on $12/31/69$			Gains (Col (h) gain minus
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			258
			108
			15
			-48
			-274
			146
			145
			14
			2
			18

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
CLEARBRIDGE AGGR GWTH A	Р	2013-12-31	2015-08-21
CLEARBRIDGE AGGR GWTH A	Р	2014-01-08	2015-08-21
OAKMARK EQUITY & INCOME	Р	2013-12-31	2015-01-22
AKRE FOCUS FD RETAIL	Р	2014-12-31	2015-08-21
LOOMIS SAYLES BOND FUND	Р	2014-06-19	2015-02-20
LOOMIS SAYLES BOND FUND	Р	2014-12-31	2015-02-20
BLACKROCK MULTI ASSET	Р	2014-12-31	2015-08-21
BLACKROCK MULTI ASSET	Р	2014-12-31	2015-08-21
BLACKROCK MULTI ASSET	Р	2014-12-31	2015-08-21
BLACKROCK MULTI ASSET	Р	2014-12-31	2015-08-21

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
2,717		2,500	217
2,685		2,500	185
4,350		4,476	-126
85		79	6
4,847		5,200	-353
14		14	0
2		2	0
15		16	-1
14		15	-1
14		15	-1

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			217
			185
			-126
			6
			-353
			0
			0
			-1
			-1
			-1

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)
BLACKROCK MULTI ASSET	Р	2014-12-31	2015-08-21
BLACKROCK MULTI ASSET	Р	2014-12-31	2015-08-21
BLACKROCK MULTI ASSET	Р	2014-12-31	2015-08-21
BLACKROCK MULTI ASSET	Р	2014-12-31	2015-08-21
BLACKROCK MULTI ASSET	Р	2014-12-31	2015-08-21
BLACKROCK MULTI ASSET	Р	2014-12-31	2015-08-21
BLACKROCK MULTI ASSET	Р	2015-02-04	2015-08-21
PARNASSUS CORE EQTY FD	Р	2014-12-31	2015-08-21
PARNASSUS CORE EQTY FD	Р	2014-12-31	2015-08-21
PARNASSUS CORE EQTY FD	Р	2014-12-31	2015-08-21

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
14		15	-1
15		15	0
13		14	-1
2		2	0
19		19	0
12		13	-1
3,924		4,083	-159
14		14	0
31		30	1
98		100	-2

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69		Gains (Col (h) gain minus	
(i) F M V as of 12/31/69	A djusted basıs (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			-1
			0
			-1
			0
			0
			-1
			-159
			0
			1
			-2

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)
PARNASSUS CORE EQTY FD	Р	2014-12-31	2015-08-21
HODGES SMALL CAP HDPSX	Р	2014-06-26	2015-02-20
HODGES SMALL CAP HDPSX	Р	2014-12-31	2015-02-20
HODGES SMALL CAP HDPSX	Р	2014-12-31	2015-02-20
EVENTIDE GILEAD CL N ETGLX	Р	2014-06-27	2015-02-20
EVENTIDE GILEAD CL N ETGLX	Р	2014-12-31	2015-02-20
GLENMEDE LARGE CAP CORE GTLOX	Р	2014-12-31	2015-08-21
GLENMEDE LARGE CAP CORE GTLOX	Р	2014-12-31	2015-08-21
GLENMEDE LARGE CAP CORE GTLOX	Р	2014-12-31	2005-08-21
GLENMEDE LARGE CAP CORE GTLOX	Р	2015-03-24	2005-08-21

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
29		30	-1
985		1,000	-15
9		8	1
4		4	0
281		250	31
			0
8		8	0
117		113	4
11		11	0
5,762		6,006	-244

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))
			-1
			-15
			1
			0
			31
			0
			0
			4
			0
			-244

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
INVESCO CONV SECURITIES FD CL A	Р	2014-12-31	2015-02-04
INVESCO CONV SECURITIES FD CL A	Р	2014-12-31	2015-02-04
INVESCO CONV SECURITIES FD CL A	Р	2014-12-31	2015-02-04
INVESCO CONV SECURITIES FD CL A	Р	2014-12-31	2015-02-04
INVESCO CONV SECURITIES FD CL A	Р	2014-12-31	2015-02-04
INVESCO CONV SECURITIES FD CL A	Р	2014-12-31	2015-02-04
CLEARBRIDGE AGGR GWTH A	Р	2014-12-31	2015-08-21
OAKMARK EQUITY & INCOME	Р	2014-12-31	2015-01-22
OAKMARK EQUITY & INCOME	Р	2014-12-31	2015-01-22
OAKMARK EQUITY & INCOME	Р	2014-12-31	2015-01-22

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
38		38	0
20		20	0
20		20	0
10		10	0
111		110	1
25		24	1
108		110	-2
37		37	0
5		5	0
368		368	0

Complete only for assets show	Complete only for assets showing gain in column (h) and owned by the foundation on $12/31/69$		
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (l) Losses (from col (h))
			0
			0
			0
			0
			1
			1
			-2
			0
			0
			0

<u>-</u>			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)
SCH US DIV EQITY ETF	Р	2015-03-26	2015-08-25
CAPITAL GAINS DIVIDENDS	Р		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
5,579		5,893	-314
598			598

Complete only for assets show	Gains (Col (h) gain minus		
(i) F M V as of 12/31/69	A djusted basıs (j) as of 12/31/69	Excess of col (ı) (k) over col (j), ıf any	col (k), but not less than -0-) or (l) Losses (from col (h))
			-314
			598

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor			
a Paid during the year				
23 CLUB PO BOX 1185 SCOTTSBLUFF, NE 69363		NC	FOR YOUTH BASEBALL	200
YMCA 22 SOUTH BELTLINE HWY EAST SCOTTSBLUFF,NE 69361		PC	FOR YOUTH ASSISTANCE & DEVELOPMENT	2,000
WESTERN NEBRASKA COMMUNITY COLLEGE FOUNDATION 1601 EAST 27TH STREET SCOTTSBLUFF, NE 69361		POF	FOR SECONDARY EDUCATION ASSISTANCE	2,500
FELLOWSHIP OF CHRISTIAN ATHLETES 8701 LEEDS RD KANSAS CITY,MO 64129		PC	FOR DEVELOPMENT OF YOUNG CHRISTIAN ATHLETES	500
FESTIVAL OF HOPE PO BOX 377 SCOTTSBLUFF, NE 69363		PC	FOR CANCER PATIENTS	200
FIRST UNITED METHODIST CHURCH 2002 4TH AVENUE SCOTTSBLUFF, NE 69361		PC	FOR RELIGIOUS ACTIVITIES	10,000
FRIENDS OF THE MIDWEST THEATRE 1707 BROADWAY SCOTTSBLUFF, NE 69361		PC	FOR SUPPORT OF THE ARTS	1,290
WEST NEBRASKA ARTS CENTER 106 EAST 18TH STREET GERING,NE 69361		PC	FOR EDUCATION, AWARENESS & EXCELLENCE IN THE ARTS	290
OREGON TRAIL COMMUNITY FOUNDATION 1115 RAILWAY PLAZA SCOTTSBLUFF,NE 69363		PC	FOR COMMUNITY PROGRAMS	6,910
OREGON TRAIL COMMUNITY FOUNDATION - LIFE CHANGE CONNECTIONS 1115 RAILWAY PLAZA SCOTTSBLUFF, NE 69361		PC	FOR DIABETES EDUCATION	300
SUMMIT CHRISTIAN COLLEGE 2025 2ST STREET GERING,NE 69341		PC	FOR SECONDARY CHRISTIAN EDUCATION	100
REGIONAL WEST FOUNDATION TWO WEST 42ND STREET SCOTTSBLUFF, NE 69361		SO I	FOR NURSING SCHOLARSHIPS	36,780
KIMBALL HOSPITAL FOUNDATION 505 S BURG STREET KIMBALL,NE 69145		SO I	FOR LOCAL HEALTH SUPPORT & EDUCATION	500
YOUNG LIFE PO BOX 520 COLORADO SPRINGS,CO 80901		PC	FOR SAINT VRAIN VALLEY	6,000
CHADRON STATE COLLEGE FOUNDATION PO BOX 1210 CHADRON,NE 69337		POF	FOR GENERAL SCHOLARSHIP FUND	1,000
Total			▶ 3a	73,570

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

			• •	•
Recipient	If recipient is an individual,		Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Contribution	
a Paid during the year				
RIVERSIDE DISCOVERY CENTER 1600 SOUTH BELTLINE HIGHWAY WEST SCOTTSBLUFF, NE 69361		PC	FOR CONSERVATION, EDUCATION, DISCOVERY & RECREATION	5,000
Total				73,570

TY 2015 Accounting Fees Schedule

Name: REARDON - MOHR FOUNDATION

EIN: 39-1896086

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,375	0		0

TY 2015 Other Expenses Schedule

Name: REARDON - MOHR FOUNDATION

EIN: 39-1896086

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	393	393		0
BANK CHARGES	10	0		0

TY 2015 Taxes Schedule

Name: REARDON - MOHR FOUNDATION

EIN: 39-1896086

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAXES	510	0		0
FOREIGN TAXES	5	5		0

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491153007586

OMB No 1545-0047

Schedule B

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

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF. 2015

Department of the Treasury Internal Revenue Service

Name of the organization

REARDON - MOHR FOUNDATION

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

Employer identification number

	39-1896086
Organization type (chec	k one)
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	√ 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
other property) f	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or rom any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
under sections 50 received fromany	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% support test of the regulations 9(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 99 or (ii) Form 990-EZ, line 1 Complete Parts I and II
during the year, to	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, tal contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, of cruelty to children or animals. Complete Parts I, II, and III
during the year, co this box is checked purpose Do not co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, ontributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If d, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively exercise contributions totaling \$5,000 or more during the year.

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization REARDON - MOHR FOUNDATION Employer identification number 39-1896086

Part I	Contributors (see instructions) Use duplicate copies of Part I if	f additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
1	IDEAL LAUNDRY AND CLEANERS INC		Person	।
·	506 S BELTLINE HWY	\$ 90,000	Payroll	Г
		\$ 80,000	Noncash	г
	SCOTTSBLUFF, NE 69361		(Complete Part II contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Г
		Φ.	Payroll	Г
		<u> </u>	Noncash	Г
			(Complete Part II contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Г
		\$	Payroll	Γ
			Noncash	Г
			(Complete Part II contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Γ
		<u> </u>	Payroll	Г
		<u>\$</u>	Noncash	Г
			(Complete Part II contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	
			Person	Г
		\$	Payroll	Γ
		*	Noncash	Г
			(Complete Part II contributions)	for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of con	tribution
			Person	Γ
		•	Payroll	Г
		\$	Noncash	Г
			(Complete Part II contributions)	for noncash

Name of organization REARDON - MOHR FOUNDATION		Employer identification n	Employer identification number	
		39-1896086		
Dort II	Noncash Property			
Part II	(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	
		\$		
(a)	(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	
		<u> </u>		
(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	
		<u> </u>		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	

Schedule B (Form 990, 990-EZ, or 990-F	F)	(201	5)
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chedule B (Form 990,	990-EZ, or 990-PF) (2015)		Page 4	
ame of organization EARDON - MOHR FO			Employer identification number 39-1896086	
total more line entry of \$1,000 c	than \$1,000 for the year from any o	ne contributor. Complete co II, enter the total of <i>exclusive</i> mation once. See instruction	ribed in section 501(c)(7), (8), or (10) that plumns (a) through (e) and the following ely religious, charitable, etc., contributions is.) \$\bigsir \bigsir	
(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, and ZIP4 R		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, and ZIP4 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, and ZIP4		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	
. -				
<u> </u>	Transferee's name, address, and	(e) Transfer of gr d ZIP4	ft Relationship of transferor to transferee	
-				