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# Form 990-PF

EXTENDED TO AUGUST 15, 2016
Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. OMB No 1545-0052

For calend	dar year 2015 or tax year	beginning			, and ending				
Name of	foundation -					A Employer identification number			
LOTE	OTHLORIEN FOUNDATION					47-0816447			
	per and street (or P.O. box number if mail is not delivered to street address) Room/sui					B Telephone number			
1325	LYNNWOOD L	ANE				(402) 451-	-8051		
City or to	wn, state or province, cou	ntry, and ZI	P or foreign p	postal code	<del></del>	C If exemption application is			
OMAH	IA, NE 6815	2				}			
G Check	all that apply:	Initial returi	n	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here		
		Final return		Amended return					
		Address ch		Name change		Foreign organizations m check here and attach c	eeting the 85% test, omputation		
1 Check t	type of organization:	X Section	n 501(c) <u>(3)</u> e	xempt private foundation		E If private foundation sta	atus was terminated		
Sec Sec	tion 4947(a)(1) nonexemp	pt charitable	trust	Other taxable private founda	ition	under section 507(b)(1	)(A), check here		
Fair mar	ket value of all assets at e	nd of year	J Account	ing method: X Cash	Accrual	F If the foundation is in a	60-month termination		
	art II, col. (c), line 16)			ther (specify)		under section 507(b)(1	)(B), check here >L_		
▶\$			(Part I, colu	ımn (d) must be on cash b	pasis.)		<del> </del>		
Part I	Analysis of Revenue and (The total of amounts in colum		d (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes		
	necessarily equal the amount	s in column (a	))	expenses per books	income	income	(cash basis only)		
,	Contributions, gifts, grants			237,800.		N/A			
-	Check I if the foundation interest on savings and tempor		attach Sch B				<u> </u>		
3	cash investments	rary		13.	13.		STATEMENT 1		
4	Dividends and interest from	m securities	;	29,980.	29,980.		STATEMENT 2		
5a (	Gross rents						RECEIVER		
b i	Net rental income or (loss)				<del></del>	<u>-</u>	1350516-11		
<u>ω</u> 6a :	Net gain or (loss) from sale of a			6,605.		10	Matrice and the second		
g b	Gross sales price for all assets on line 6a	<u> 381</u>	,007.			33	MAY 27 2016		
Revenue	Capital gain net income (from F	Part IV, line 2)		}	6,605.				
8	Net short-term capital gair	1					IGDEN, UT		
	Income modifications Gross sales less returns								
10a 2	and allowances						<del> </del>		
1	Less Cost of goods sold						<u> </u>		
1	Gross profit or (loss)					<del> </del>	<del> </del>		
1	Other income			074 200	26 500		<del> </del>		
	Total Add lines 1 through		<del></del>	274,398.	36,598.	 	<del> </del>		
i	Compensation of officers, direc		, etc	0.	0.		0		
ſ	Other employee salaries ai	-		}		ļ	<del> </del>		
ທ່	Pension plans, employee t	penetits					<del> </del>		
S 16a	Legal fees			<del></del>		······································	<del> </del>		
9 0	Accounting fees	CIII.	MT 3	11,241.	11,241.	<del> </del>	0		
(iii) (iii)	Other professional fees	51	MT 3	11,441.	11,241.		<del> </del>		
	nterest	CIM.	MT 4	301.	301.		0		
18 18	Taxes		171 4	301.	201.	<del> </del>	† <del>-</del>		
19 [	Depreciation and depletion	ſ		<del></del>		<del> </del>	<del> </del>		
20	Occupancy Fravel, conferences, and n	naatinaa		1,259.	0.	<del> </del>	0		
Ž 21 1	rravei, conferences, and n Printing and publications	neemiys		1,239.	<u>U•</u>	<del></del>	†		
E 23 (	Other expenses	çm:	MT 5	1,520.	0.		0		
23 (	Other expenses Fotal operating and admi		111 J	1,540	<u>y.</u>		1		
	expenses. Add lines 13 th			14,321.	11,542.		0		
Ø 25	Contributions, gifts, grants	-		127,116.	<u> </u>		127,116		
26 1	Fotal expenses and disbu								
	Add lines 24 and 25			141,437.	11,542.		127,116		
27 8	Subtract line 26 from line	12.							
2 -	Excess of revenue over expens		rements	132,961.			1		
}	excess of revenue over expens Net investment income (if			+2212010	25,056.		1		
0 1	vet investinent income (if nei Adjusted net income (if nei				23,030.	N/A	<u> </u>		
23501 1-24-15	LHA For Paperwork Re			i		41/4	Form <b>990-PF</b> (201		

1

## Part 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	T	
•	(must agree with end-of-year figure reported on prior year's return)	1	1,050,625.
2	Enter amount from Part I, line 27a	2	132,961.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	1,183,586.
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) - Part II, column (b), line 30	6	1,183,586.

Form 990-PF (2015)

Page .		Page	1
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(a) List and desc 2-story brick w	ribe the kin arehouse; o	d(s) of property sold (e.g. r common stock, 200 shs	, real estate, . MLC Co.)		( <b>b</b> )	How ac - Purc - Don	cquired hase ation	(c) Date (mo.,	acquired day, yr.)	(d) Date sold (mo., day, yr.)
b SEE ATTACHED	CMAM	TEMTENIMO								<del></del>
b SEE ATTACHED	DIMI	EMEN12			├─	<del></del>				
d										
е	,									
(e) Gross sales price		epreciation allowed (or allowable)		st or other basis expense of sale					Sain or (loss s (f) minus (	
<u>a</u>										<del> </del>
b										<del></del>
d d		*************	<del></del>					<del></del>		
e 381,007.				374,40	2.					6,605.
Complete only for assets shown	ng gain in ci	olumn (h) and owned by t	ne foundation		2.		(	I) Gains ((	Col. (h) gain	
		Adjusted basis	(k) E>	cess of col. (I)			ćò	l. (k), but	not less than (from col. (	n -0-) <b>or</b>
(i) F.M.V. as of 12/31/69		as of 12/31/69	over	col. (j), if any				LUSSES	(iroin col. (	'')) 
_a	·						· · · · · · · · · · · · · · · · · · ·			
<u>b</u>	· 									
c d	<del></del>	····								
e										6,605.
C	L	C If goin plan enter	in Dart I. lina	<del></del>	7					
2 Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-	ın Part I, iine ın Part I. line	7		2				6,605.
3 Net short-term capital gain or (los	ss) as define									
If gain, also enter in Part I, line 8,			. (0).		3					
If (loss), enter -0- in Part I, line 8		ection 4940(e) for	n	-		3			N/A	
<del></del>		<del></del>		<del></del>			16111 1111	201118	<del></del>	
(For optional use by domestic private	e foundation	is subject to the section 4	940(a) tax or	i net investment in	come	e.)				
If section 4940(d)(2) applies, leave to	his part blar	ık.								
Was the foundation liable for the sec	tion 4942 ta	ax on the distributable am	ount of any vi	ear in the base per	rod?					Yes X No
If "Yes," the foundation does not qua				•						
1 Enter the appropriate amount in					ntries	3.				
(a) Base period years	}	(b)		** * * *	(c)			}	Distrib	(d) oution ratio
Calendar year (or tax year beginni	ng in)	Adjusted qualifying dist		Net value of no					(col. (b) div	ided by col. (c))
2014			956.		_1		1,057			.182512
2013			0,234.				0,274 4,886			.157518 .149896
2012 2011			9,664. 3,769.				8,453			.253256
2010			5,884.				4,849			.213003
	<del> </del>	<del></del>	<u> </u>				<u> </u>		[	
2 Total of line 1, column (d)								2	1	.956185
3 Average distribution ratio for the	5-year base	period - divide the total o	n line 2 by 5,	or by the number	of ye	ars				
the foundation has been in existe	nce if less tl	han 5 years						3	<b> </b>	.191237
								1	1	
4 Enter the net value of nonchantal	ile-use asse	its for 2015 from Part X, li	ne 5					4	<b></b>	1,197,115.
								_		228,933.
5 Multiply line 4 by line 3								5	<del> </del>	220,333.
6 Enter 1% of net investment incon	ne / 1% of P	art I line 27h)						6	}	251.
Criter 178 Ornet investment incom	10 6(1)	art i, into 2101							<u> </u>	
7 Add lines 5 and 6								7		229,184.
• •										
8 Enter qualifying distributions from	n Part XII, h	ne 4						8	<u> </u>	127,116.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, che	ck the box in Part VI, line	lb, and comp	lete that part using	g a 19	% tax r	ate.			

	990-PF (2015) LOTHLORIEN FOUNDATION		-0816			Page 4
1	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948	- see i	nstru	CTIO	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.	l				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1	1		_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   and enter 1%	1	<b>├</b>		5	01.
	of Part I, line 27b	1	j			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	}	Į.			_
2		2	<del></del>	-	<del></del> -	0.
3	Add lines 1 and 2	3	<del> </del>		5	01.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<del> </del>		<del></del>	<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	<del></del>		5	01.
6	Credits/Payments:	{	{			
	2015 estimated tax payments and 2014 overpayment credited to 2015  6a 1,028.	1	1			
	Exempt foreign organizations - tax withheld at source	1	1			
	Tax paid with application for extension of time to file (Form 8868)  Bellow with both an application for extension of time to file (Form 8868)	1	1			
_	Backup withholding erroneously withheld 6d	┨	1		1 ^	20
7		7	<del> </del>		T / O	28.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	<del> </del>			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<del> </del>			27
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	<del> </del> -			27.
11 Do	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ 527. Refunded ▶ art VII-A Statements Regarding Activities	11				0.
	<del></del>				Vae	No
12	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interveni	: III		-	163	X
_	any political campaign?	.\0		1a 1b		X
Ð	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition			10		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ea or		}		ł
	distributed by the foundation in connection with the activities.			1.		
	Did the foundation file Form 1120-POL for this year?			1c		X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1		ĺ
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.	-		1 1		ļ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. > \$0.			2		x
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities.					-
,	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	nr.		1 1		
3	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	J1		3		Х
Aa	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	-	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N.	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-	.,	5		X
	If "Yes," attach the statement required by General Instruction T.			-		-
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					ł
Ū	By language in the governing instrument, or					ĺ
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	e law				ļ
	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 XI	/		7	X	
•	on the foundation have at four popular in account at any time coming the year.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				:	
- Ou	NE			1		!
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			1 1		}
	of each state as required by General Instruction G? If "No," attach explanation			8ь	X	ł
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	ndar				
J	year 2015 or the taxable year beginning in 2015 (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
			Fo	rm <b>990</b>	-PF	(2015)

Yes   No	Pa	art VII-A   Statements Regarding Activities (continued)						
section 512(b)(13)? If Yes, attach schedule (see instructions)  10 dit for foundation make a distribution to a divine a divide yand over which the foundation or a disqualified person had advisory privileges?  If Yes, attach statement (see instructions)  13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  14 The books are in care of Yes (Complete)  15 Section 4917(a)(1) nonexempt charitable trusts filing from 990-FF in less of Form 14-1-Check here and enter the amount of tax exemptine interest received on accured during the year  16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, see the instructions of exemptions and filing requirements for FinCEN Form 114, If Yes, enter the name of the form 4720 ff any term is checked in the "Yes" column, unless an exception applies.  18 The Form 4720 ff any term is checked in the "Yes" column, unless an exception applies.  19 Furnating pods, services, or facilities to (or accept with a disqualited person?  20 Furnating pods, services, or facilities to (or accept mem tom) a disqualited person?  21 Furnating pods, services, or facilities to (or accept mem tom) a disqualited person?  22 Furnating pods, services, or facilities to (or accept mem tom) a disqualited person?  23 Furnating pods, services, or facilities to (or accept mem tom) a disqualited person?  24 Furnating pods, services, or facilities to (or accept mem tom) a disqualited person?  25 Form 4720 ff any time is checked in the "Yes" column, unless an exception a described in Regulations agreed to make a grant to or to employ the official for a period after termination of government for the exemptions of the form of t			T	Yes	No			
12 Did the foundation make a distribution to a dinore advised fund over which the foundation or a disqualified person had advisory privileges?  13 Did the foundation comply with the gubbic inspection requirements for its annual returns and exemption application?  Website address ► N/A  13 The blooks are note of ► GRACE_LONGLEY  Telephone no. ► (40.2) 45.1 = 80.51  The blooks are note of ► GRACE_LONGLEY  Located at ► 1.325 LYNNIVOOD_LANE, OMAHA, NE  Telephone no. ► (40.2) 45.1 = 80.51  Section 4937(91) honesempt charable trusts thing form 89.0°F in les of form 1041 - Check here and elert the amount of tax-exempt inferest received or accrued during the year  A dary time disenglication and particles that the section has an interest in or a signature or other authority over a bank, securities, or other financial account on a foreign country?  See the instructions for exceptions and filling requirements for FinCEN Form 114. If Yes, eater the name of the foreign country.  See the instructions for exceptions and filling requirements for FinCEN Form 114. If Yes, eater the name of the foreign country.  See the instructions for exception and filling requirements for FinCEN Form 114. If Yes, eater the name of the foreign country.  See the instructions for exception and filling requirements for FinCEN Form 114. If Yes, eater the name of the foreign country.  See the instructions for exceptions and filling requirements for FinCEN Form 114. If Yes, eater the name of the foreign country.  See the instructions for exception and filling requirements for FinCEN Form 114. If Yes, eater the name of the foreign for	11		{					
If Yes, attach statement (see instructions)  12 X  13 M  Website address > N/A  15 The books are in care of PARCE LONGLEY  15 Section 4937(a)(1) nonesempt charibable rusts filing form 990-FP in less of Form 1041 - Check here and enter that amount of tax-exempts inferest received or accured during the year  16 Allary time during calendary year 2015, do the foundation have an interest in or a signature or other authority over a bank, securings, or order framonal account in a foreign country?  See the instructions for exceptions and filing requirements for FinCEN Form 114. If Yes, enter the name of the foreign country?  Part VII-8 Statements Regarding Activities for Which Form 4720 May 8e Required  Filin Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  19 Uning they said dith feoridation (either direct) or advice(b);  (1) Engage in the sale or exchange, or lessing of property with a degualited person?  (2) Borrow money from, lend money for, or flowties eached ced to (or accept tit from) a desqualited person?  (3) Furnation goods, services, or facilities to (or accept tit from) a desqualited person?  (3) Furnation goods, services, or facilities to (or accept tit from) a desqualited person?  (3) Furnation goods, services, or facilities to (or accept tit from) a desqualitied person?  (4) Pay compensation to, or pay or remittives the expenses of, a desqualited person?  (5) Transfer any income or assets to a dequalitied person or make any of either available for the benefit or use of a dequalitied person?  (6) Agree to pay money or property to a government officiar? (Exception, Check 'No'  1) If the foundation engage in a prior year in any of the acts described in Regulations section 53.4941(1)-30 or in a current notice regarding destater assistance (see instructions)?  Organizations relying on a current notice regarding destater assistance (see instructions)?  Organizations relying on a current notice regarding destater assistance (see instructions)?  Organizations relying on a curre			11		X			
13 Dut the foundation comply with the public inspection requirements for its annual returns and exemption application?  14 The books are in care of ▶ GRACE_LONGLEY Telephone no. ▶ (402) 451–8051 Located at ▶ 1325 LYNNWOOD LANR, OMAHA, NE	12							
Website address > N/A  The books are in cars of > GRACE_LONGLEY  Located at > 1225_LYNNWOOD_LANR_, OMAHA, NE  2014-4 > 683.52-5239  15. Section 4947(a)(1) nonexempt charitable trusts thing form 990-PF in leve of Form 1041- Check here and enter the amount of tax-eventy interest received or accrued during the year  16. All any time during calendar year 2015, of the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?  See the instructions for exceptions and filing requirements for FinCEN Form 114, If Yes,* onler the name of the foundation for exceptions and filing requirements for FinCEN Form 114, If Yes,* onler the name of the foundation for exceptions and filing requirements for FinCEN Form 114, If Yes,* onler the name of the foundation for exceptions and filing requirements for FinCEN Form 114, If Yes,* onler the name of the foundation for exceptions and filing requirements for FinCEN Form 114, If Yes,* onler the name of the foundation (letter decide) for indirectly.  18 Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  19 During the year of the foundation (letter decide) for indirectly.  19 Early Interest of the foundation (letter decide) for indirectly.  19 Early Interest of the foundation (letter decide) for indirectly from a disqualitied person?  20 Early Interest or year of adaptities to (or accept them from) a disqualited person?  21 Finanser any inceme or assets to a disqualited person or letter available for the benefit or use of a disqualited person?  22 Early Interest or year of adaptities to (or accept them from) a disqualited person?  23 Finanser any inceme or assets to a disqualited person (or make any of either available for the promoted or year or year or the complex the official for a period after termastion of government sequalities of person years (letter available) for the year in the foundation and year or year in any of the acts fail to quality under the exceptions descri								
14. The books are in care of ▶ GRACE LONGLEY Telephone no. ▶ (402) 451-8051 Located at № 12.32 5 LYNNNOOD LANE, OMAHA, NE  2P-4 ▶ 68.152-5239 15 Section 4947(a)(1) nonexempt charitable trusts himp form 990.PF in lieu of Form 1041 - Check here and enter the amount of tize-exempt enterest received or accrued during the year  A larry time during calendary set 2015, did the foundation heve an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign occunity?  See the instructions for exceptions and fining requirements for FinCEN Form 114. If "Yes," either the name of the foreign country.  Part VIII-8   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.  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  File Form 4720 if any item is checked in the "Yes" column, unless any item 4720 if any ite	13		13	A				
t. Coated at ► 1.3.2 5. LYNNWCOOD LANE, OMAHA, NE  Section 4947(a)(1) necessmpt charitable trusts filing form 990-PF in two of Form 1041-Check here and either the amount of tax-exempt indirect received or accrued during the year  16. All any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, so the financial socient in a foreign country?  See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.  Part 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.  1 a fluring they said did the foundation (either directly or indirectly):  (1) Engage in the sale or exchange, or leasing of property with a desqualited person?  (2) Borrow movely from, lend movely, or 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?  (4) Pay compensation to, or pay or reinflures the exponses of, a disqualified person?  (5) Transfer any income or assets to a dequalified person (or make any of either available for the benefit or use of a disqualified person (or make any of either available for the benefit or use of a disqualified person (or make any of either available for the person or or seed to make a grant to or to employ the official for a period after termination of government service, it termination with 90 days.)  10) Agree to pay money or property to a government official? (Exception, Check No' of the foundation eagge in a prior year any of the acts described in 1s, other than excepted acts, that were not corrected before the first day of the tax year beginning of issater assistance check here  10) Official of the year's instell of a port year in any of the acts described in 1s, other than excepted acts, that were not corrected before the first day of the tax year beginning i	4.4		151	-80	51			
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defined in section 4942(i)(3) or 4942(i)(5)):  a 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?  If "Yes," list the years \			1c		_X_			
a 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?  If "Yes," list the years	2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		]				
before 2015?  If "Yes," list the years   Description 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.)  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  If the provisions of section 4942(a)(2) are being applied to any of the years listed, answer "No" and attach stated in 2a, list the years here.  If the provisions of section 4942(a)(2) to all years listed, answer "No" and attach stated in 2a, list the years here.  If the provisions of section 4942(a)(2) to all years listed, answer "No" and attach stated in 2a, list the years here.  If the provisions of section 4942(a)(2) to all years listed, answer "No" and attach stated in 2a, list the years here.  If the provisions of section 4942(a)(2) to all ye								
b Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer 'No' and attach statement - see instructions.)  c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	a							
b Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement - see instructions.)  c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			1					
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.)  c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  ——————————————————————————————————		· · · · · · · · · · · · · · · · · · ·		}				
statement - see instructions.)  c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	U							
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  3a 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.)  4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  4b 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?			2b					
Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?    Yes   X   No	c	•						
3a 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.)  13b April 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.)  13b April 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.)  14a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  25a 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?								
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.)  N/A  Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  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?  X	3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time						
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.)  1		• •	}					
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Form 4720, to determine if the foundation had excess business holdings in 2015.)  1 A Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  2 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?  3 B			}					
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  4a X  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 X		#-	0.					
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 X	1.	· · · · · · · · · · · · · · · · · · ·	<del></del>		- <del>v</del> -			
had not been removed from jeopardy before the first day of the tax year beginning in 2015?			4a					
	Û		46	ļ	x			
				)-PF				

Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their	compensation.	. <del> </del>		
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
MICHAEL C. LONGLEY	PRESIDENT			
1325 LYNNWOOD LANE				
OMAHA, NE 68152	1.00	0.	0.	0.
KATHARINE CORBIN	TREASURER			
4126 WINDCHIME LN			}	
LAKELAND, FL 33811	1.00	0.	0.	0.
GRACE M. LONGLEY	SECRETARY			
1325 LYNNWOOD LANE			}	
	1.00	0.	0.	0.
OMAHA, NE 68152	1.00	· · · ·	U •	<u> </u>
	i		[	
	1		l l	
	Judad on line 4\ If need	enter "NONE "		
Compensation of five highest-paid employees (other than those inc.)		enter "NONE."	(d) Contributions to	(a) Evnanca
	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	(b) Title, and average		(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
Compensation of five highest-paid employees (other than those inc.)	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and detered compensation	(e) Expense account, other allowances
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterted compensation	(e) Expense account, other allowances
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
Compensation of five highest-paid employees (other than those inc     (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances

Form 990-PF (2015) LOTHLORIEN FOUNDATION  Part VIII Information About Officers, Directors, Trustees, Foundation		0816447 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "I	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  Part IX-A   Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers product	I information such as the ed, etc.	Expenses
N/A		
<u> </u>		
<u> </u>	<del></del>	
·		
·		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2.	Amount
N/A		
·		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3	<b>•</b>	0.
otal, rad miles 1 timough o		Form <b>990-PF</b> (2015)

	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	1	
а	Average monthly fair market value of securities	1a	1,124,408.
b	Average of monthly cash balances	1b	57,322.
	Fair market value of all other assets	1c	33,615.
ď	Total (add lines 1a, b, and c)	1d	1,215,345.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,215,345.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	18,230.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,197,115.
6_	Minimum investment return. Enter 5% of line 5	6	59,856.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	id certair	1
	foreign organizations check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	59,856.
	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)		F 0.1
_	Add lines 2a and 2b	2c	501.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	59,355.
4	Recoveries of amounts treated as qualifying distributions	4	<u>0</u> .
5	Add lines 3 and 4	5	59,355.
6	Deduction from distributable amount (see instructions)	6	<u> </u>
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	59,355.
٢	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	127,116.
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	127,116.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	127,116.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies 1	for the section
	4940(e) reduction of tax in those years.		

Form **990-PF** (2015)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	( <b>d)</b> 2015
1 Distributable amount for 2015 from Part XI,				<del> </del>
line 7				59,355.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
ь Total for prior years:				
7 1 1 1 1 1 1 1		0.	<u> </u>	
3 Excess distributions carryover, if any, to 2015:				
a From 2010 74,608. b From 2011 103,987.				
c From 2012 67,380.				
d From 2013 97,582.				
e From 2014 146,755.	}			
f Total of lines 3a through e	490,312.			
4 Qualifying distributions for 2015 from	130/3121		<del></del>	<del></del>
Part XII, line 4: ▶\$ 127,116.	ļ		n n	
a Applied to 2014, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				59,355.
e Remaining amount distributed out of corpus	67,761.	<del> </del>		
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	ļ			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	558,073.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which	j			
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable		_	•	
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line			0	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract			-	
lines 4d and 5 from line 1. This amount must be distributed in 2016	{			0.
7 Amounts treated as distributions out of	· · · · - · · · · · · · · · · · · · · ·			
corpus to satisfy requirements imposed by	{			
section 170(b)(1)(F) or 4942(g)(3) (Election	ļ			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	74,608.	į		
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	483,465.			
10 Analysis of line 9:			<del></del>	
a Excess from 2011 103,987.		•		
b Excess from 2012 67,380.	{			
c Excess from 2013 97,582.	{			
d Excess from 2014 146,755.				
e Excess from 2015 67,761.	<u>_</u>			Form 990-PF (2015)

	TEN FOUNDAT				STOAA! Lane II			
Part XIV   Private Operating F	<del></del>	<del></del>	I-A, question 9)	N/A				
1 a If the foundation has received a ruling o			}					
foundation, and the ruling is effective fo			<b>▶</b> !	<del>, , , , , , , , , , , , , , , , , , , </del>				
<b>b</b> Check box to indicate whether the found		ng foundation described i		4942(j)(3) or4	942(j)(5)			
2 a Enter the lesser of the adjusted net	Tax year	(1) 0044	Prior 3 years	741,0040	4.3 7.4.4			
income from Part I or the minimum	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total			
investment return from Part X for			}					
each year listed			<b></b>	<del></del>	<del> </del>			
<b>b</b> 85% of line 2a		ļ	<u> </u>	<del></del>	<del> </del>			
<ul> <li>Qualifying distributions from Part XII,</li> </ul>			ł	•	}			
line 4 for each year listed								
d Amounts included in line 2c not			į					
used directly for active conduct of			<b>j</b>		Ì			
exempt activities	<u></u>	<u> </u>	<del></del>	<del> </del>	<del> </del>			
<ul> <li>Qualifying distributions made directly</li> </ul>			ļ					
for active conduct of exempt activities.			}		}			
Subtract line 2d from line 2c								
3 Complete 3a, b, or c for the			}		1			
alternative test relied upon;  a "Assets" alternative test - enter;			j					
(1) Value of all assets		,			\			
(2) Value of assets qualifying								
under section 4942(j)(3)(B)(i)  b "Endowment" alternative test - enter	<del></del>		<del> </del>	<del></del>	<del> </del>			
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,			·	<u> </u>				
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				Ţ				
an exempt organization			}					
(4) Gross investment income								
Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundatior	n had \$5,000 or m	ore in assets			
at any time during t	he year-see instr	uctions.)						
1 Information Regarding Foundatio	n Managers:							
a List any managers of the foundation who			ributions received by the	e foundation before the clo	ose of any tax			
year (but only if they have contributed in	nore than \$5,000). (See s	ection 507(d)(2).)						
MICHAEL C. LONGLEY								
b List any managers of the foundation who			or an equally large porti	on of the ownership of a p	partnership or			
other entity) of which the foundation has	s a 10% or greater interes	st.						
NONE				<del> </del>				
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:					
Check here 🕨 🔲 if the foundation o								
the foundation makes gifts, grants, etc.	(see instructions) to indiv	iduals or organizations u	nder other conditions, c	omplete items 2a, b, c, an	d d.			
a The name, address, and telephone numl	per or e-mail address of t	he person to whom appli	cations should be addre	ssed:				
GRACE LONGLEY, SECRE								
1325 LYNNWOOD LANE,	OMAHA, NE 6	8152						
b The form in which applications should b	e submitted and informa	ion and materials they sh	rould include:					
CONTACT ADDRESS FOR								
c Any submission deadlines:								
NONE								
d Any restrictions or limitations on awards	s, such as by geographica	il areas, charitable fields,	kınds of institutions, or	other factors:				
NONE	,	,	- ·, ·	•				

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or **Amount** status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year AFRICAN ENTERPRISE NONE PUBLIC AFRICAN LEADERSHIP PO BOX 727 TRAINING 2,420. MONVROVIA CA 91017 ENGLISH LANGUAGE INSTITUTE CHINA NONE PUBLIC OPERATING COST OF PO BOX 265 NON-PROFIT ORG SAN DIMAS, CA 91773 1,200, FAMILY RESEARCH COUNCIL NONE PUBLIC POLICY DEVELOPMENT & 801 G STREET NW EDUCATION WASHINGTON, DC 20001 5,000. FIRST FEDERATED CHURCH NONE PUBLIC OPERATING COSTS OF NON-PROFIT ORG 4801 FRANKLIN AVE DES MOINES, IA 50310 11,000, FOCUS ON THE FAMILY OPERATING COSTS OF NONE PUBLIC NON-PROFIT ORG 8605 EXPLORER DRIVE COLORADO SPRINGS CO 80920 2 424. SEE CONTINUATION SHEET(S) ➤ 3a 127,116. Total b Approved for future payment NONE Total

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

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
•	(a) Business	( <b>b)</b> Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Aillouit	
a	-				
b	-		<del> </del>		<del></del>
·	- }	<del></del>	<del> </del>	<del></del>	
d		<del></del>			
e	- }			<b></b>	<del></del>
g Fees and contracts from government agencies	- }		<del> </del>		<del></del>
g Fees and contracts from government agencies 2 Membership dues and assessments	<del> </del>		<del> </del> -	<del></del>	
3 Interest on savings and temporary cash	<b></b>	<del></del>			
investments	{		14	13.	
4 Dividends and interest from securities	ļ		14		<del></del>
5 Net rental income or (loss) from real estate:		<del></del>		25/5001	
a Debt-financed property	<del> </del>		<del> </del>	<del></del>	<del></del>
b Not debt-financed property					
6 Net rental income or (loss) from personal		<del> </del>			<del></del>
property	{ {				
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory	} }		18	6,605.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					<del></del>
b					<del></del>
c	1 1			L	_ <del></del>
d	. }		ļ		
e	-		<b> </b>		
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	<u> </u>	لـــــــــــــــــــــــــــــــــــــ	36,598.	<u> </u>
13 Total. Add line 12, columns (b), (d), and (e)				13	36,598.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acco	emplishment of Ex	cemp	t Purposes	
Line No. Explain below how each activity for which inc			contrib	uted importantly to the accom	plishment of
the foundation's exempt purposes (other that	ווו פוויטואסוק עם ז	ius ioi sucii purposes).		<del> </del>	

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

		Exempt Organ	izations								
1	Did the o	rganization directly or indi	rectly engage in any of the f	followi	ng with any other organization	on describ	ed in sect	ion 501(c) of	T	Yes	No
	the Code	(other than section 501(c)	(3) organizations) or in sec	ction 5	27, relating to political organ	nizations?			}		
a	Transfers	frem the reporting found	ation to a noncharitable exe	mpt or	ganization of:				}	} }	
	(1) Cast	1							1a(1)	l {	X
	(2) Othe	r assets							1a(2)		Х
b	Other tra	nsactions:									
	(2) Other transactions:  (1) Sales of assets to a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Rembursement arrangements  (5) Loans or foan guarantees  (6) Performance of services or membership or fundraising solicitations  (6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees  (8) It the answer to any of the abuse or "Key, complete the following schedule. Column (b) should always show the fair market value of the goods, other or services govern by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, sho column (d) be value of the goods, other assets, or services received.  (a) Namount involved  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Description of variaties, bransactions, and analysis of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the properties of prayir, I declare that I have exempted the fail of the praying schedules.  (a) Namou of organization  (b) Type of organization  (c) Description of relationship  PRESIDENT  Title  Prim		16(1)	} }	X						
	(2) Puro	hases of assets from a nor	ncharitable exempt organiz	ation					1b(2)		X
	(3) Rent	al of facilities, equipment,	or other assets						1b(3)		X
	(4) Rein	bursement arrangements	<b>;</b>						1b(4)		X
	(5) Loar	is or loan guarantees							1b(5)		X
	(6) Perfe	ormance of services or me	embership or fundraising so	olicitatio	ons				16(6)		X
C	Sharing o	of facilities, equipment, ma	uling lists, other assets, or p	oaid en	nployees				10		X
	-					ways show	w the fair r	narket value of the goods, o	ther as:	ets,	
			· ·	-							
	column (	d) the value of the goods,	other assets, or services re-	ceived.							
a)ı	ine no	(b) Amount involved	(c) Name of nonch	arıtabl	e exempt organization	(d)	Description	of transfers, transactions, and	sharing ar	rangeme	nts
			N	I/A							
						1					
						$\top$					
								<del></del>			
						7					
_											
						7					
2a	Is the fou	ndation directly or indirect	tly affiliated with, or related	to, one	or more tax-exempt organi	zations de	scribed				
	in section	501(c) of the Code (other	r than section 501(c)(3)) or	in sec	tion 527?				Yes	X	] No
b	If "Yes," c	omplete the following sche	edule.								
					(b) Type of organization			(c) Description of relations	lip		
							<del>-,</del>				
_											
	Under	penalties of perjury, I declare t	that I have examined this return,	ıncludir	ng accompanying schedules and	statements	, and to the	best of my knowledge May	the IRS o	liscuss t	his
Si	gn   and b	elief, it is true, correct, and corr	holete Declaration of preparer (o	ther tha	in taxpayer) is based on all inform	nation of wh	ich preparer	nas any knowledge retu	rn with the wn below	e prepare	er l
He	ere	(31) (1				P:	RESII		Yes		No
	Sigi	nature of officer or trustee			Date	Title					
		Print/Type preparer's na	ime Prepa	rer's s	ignature	Date		Check If PTIN			
		JOHN J. RO	DERIQUE,	1	. 1	,	, 1	self- employed			
		1		$\mathbb{W}^{H}$	tallen CPA	5 17	16				
c Sharing of facilities, equipment, mailing list of lift the answer to any of the above is "Yes," or services given by the reporting foundat column (d) the value of the goods, other a lift in section 501(c) of the Code (other than some lift "Yes," complete the following schedule.  (a) Name of organization in section 501(c) of the Code (other than some lift "Yes," complete the following schedule.  (a) Name of organization in section in section 501(c) of the Code (other than some lift "Yes," complete the following schedule.  (a) Name of organization in section in section 501(c) of the Code (other than some lift "Yes," complete the following schedule.  (b) Amount involved  (a) Name of organization in section in section 501(c) of the Code (other than some lift "Yes," complete the following schedule.  (a) Name of organization in section in section 501(c) of the Code (other than some lift "Yes," complete the following schedule.  (a) Name of organization in section 501(c) of the Code (other than some lift "Yes," complete the following schedule.  (b) Amount involved  (a) Name of organization in section 501(c) of the Code (other than some lift "Yes," complete the following schedule.  (a) Name of organization in section 501(c) of the Code (other than some lift "Yes," complete the following schedule.  (b) Amount involved  (c) Amount involved  (c) Amount involved  (d) Amount involved  (e) Amount involved  (f) Amount involved  (h) Amount involved  (a) Name of organization in section 501(c) of the Code (other than some lift in section 501(c) of the Code (other than some lift in section 501(c) of the Code (other than some lift in section 501(c) of the Code (other than some lift in section 501(c) of the Code (other than some lift in section 501(c) of the Code (other than some lift in section 501(c) of the Code (other than some lift in section 501(c) of the Code (other than some lift in section 501(c) of the Code (other than some lift in section 501(c) of the Code (other than some lift in section 501(c) of the Code (other than		C ORIZON LLC	1	V							
Us	se Only										
		Firm's address ▶ 16	924 FRANCES	ST.							
								Phone no. 402-33	30-7	800	
_								Fo	rm <b>990</b>	)-PF (	2015)

## 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.lrs.gov/form990.

OMB No 1545-0047

Name of the organization

Employer identification number

<u>L</u>	OTHLORIEN FOUNDATION	47-0816447				
Organization type (check	one):					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> 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					
	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the General Rule and a Speci	al Rule. See instructions.				
General Rule						
<del>-</del>	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to y one contributor. Complete Parts I and II. See instructions for determining a contrib					
Special Rules						
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supplied and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the aid, line 1. Complete Parts I and II.	16a, or 16b, and that received from				
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received futions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or cruelty to children or animals. Complete Parts I, II, and III.					
year, contribution is checked, enter purpose. Do not c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received for sexclusively for religious, charitable, etc., purposes, but no such contributions totals there the total contributions that were received during the year for an exclusively religionship to the parts unless the <b>General Rule</b> applies to this organization because, etc., contributions totaling \$5,000 or more during the year	ed more than \$1,000 If this box gious, charitable, etc,				
but it <b>must</b> answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Sched n Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on it the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

## LOTHLORIEN FOUNDATION

47-0816447

	OKIEN FOUNDATION		-0010441
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	MICHAEL AND GRACE LONGLEY  1325 LYNNWOOD LANE  OMAHA, NE 68152	\$120,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SALLY AND PETER FREYMARK  10139 NW 106TH  GRANGER, IA 50109	\$\$	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
3	LOTHLORIEN ENTERPRISES, LP  1325 LYNNWOOD LANE  OMAHA, NE 68152	\$103,600.	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
			Person Payroll Noncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

#### LOTHLORIEN FOUNDATION

47-0816447

Part II	Noncash Property (see instructions). Use duplicate copies of F	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) 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
		\$	
from	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I  (a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
$ \begin{bmatrix} \\ \end{bmatrix}$			

ame or organi				Employer identification number			
COTHLOR Part III	EXClusively religious, charitable, etc., contributed the year from any one contributor. Complete column completing Part III, enter the total of exclusively religious, charused duplicate copies of Part III if additional sp	nns (a) through (e) and the follo uitable, etc., contributions of \$1,000 o	Wing line entry, For organizations				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held			
		(e) Transfer of gif	t				
-	Transferee's name, address, and Z	IP + 4	Relationship of tran	sferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held			
	Transferee's name, address, and Zi	(e) Transfer of gif	t Relationship of tran	sferor to transferee			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descri	iption of how gift is held			
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee						
	Trunsferee s name, address, and 2.1						
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descri	ption of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and Zi	P + 4	Relationship of tran	steror to transferee			

Part IV   Capital Gains and Los	ses for Tax on Investment Income		<del></del>				
(a) List and 2-story bri	(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.  (b) How acquired P - Purchase D - Donation  (c) Date acquired (mo., day, yr.)						
1a RUSSELL INVEST	MENT		P VARIOUS 07/07/1				
b SCOUT INTERNAT	<del></del>		P VARIOUS 07/07/1				
c TEMPLETON GLOBA			P VARIOUS 07/07/1				
d VANGUARD GNMA			P VARIOUS 07/07/1				
e INTEL CORP	<del></del>		P 03/12/1512/09/1				
f ISHARES PREFERE	RED	<del></del>	P 02/20/1510/23/1				
g CHEVRON CORPORA			P 03/12/1403/24/1				
h CONOCO PHILLIPS			P VARIOUS 02/23/1				
ISHARES PREFERE		<del></del>	P 10/24/1310/23/1				
SYSCO CORPORAT:	<del></del>	P 01/17/1406/24/1					
k TORTOISE MLP		<del></del>	P 10/15/1412/04/1				
UNION PACIFIC	<del></del>		P 12/03/13/03/24/1				
		P 10/24/1302/20/1					
m VANGUARD REIT	TM		P 04/29/1412/04/1				
n WASTE MANAGEMEN	A.T.	<del> </del>	P VARIOUS 12/31/1				
o ADJUSTMENT	(C) Decrease to a ciliano	( ) O and an other basis					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale 4,035.	(h) Gain or (loss) (e) plus (t) minus (g)				
a 4,000.		_35					
b 3,756.							
c 2,250.	<del> </del>	2,403.					
d 4,138.	·	4,164.	-26				
e 33,640.		30,105.	3,535				
1 30,702.	<del></del>	31,266.	-564				
g 15,693.	<del></del>	17,342.	-1,649				
h 34,274.		28,158.	6,116				
1 47,188.		46,048.	1,140				
28,596.		27,181.	1,415				
k 42,764.		71,877.	-29,113				
36,134.		25,955.	10,179				
m 39,615.		32,972.	6,643				
$ \begin{array}{ccc}  & & & 11,760. \\  & & & 342. \end{array} $	<del></del>	9,835.	1,925				
	a goin in column (b) and owned by	the foundation on 12/21/60	342				
Complete only for assets showing	gain in column (h) and owned by t		(I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k),				
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	but not less than "-0-")				
<u>a</u>	<del></del>		-35				
b			-163				
С	· · · · · · · · · · · · · · · · · · ·		-153				
d			<u>-26</u>				
<u>e</u>	<del></del>		3,535				
1							
9			-1,649				
h			6,116				
<u>-</u>			1,140				
1	<del></del>		1,415				
<u>k</u>			-29,113 10,179				
1							
m			6,643				
<u>n</u>			1,925				
0			342				
2 Capital gain net income or (net cap	oital loss) { If gain, also enter If (loss), enter *-0	in Part I, line 7 -" in Part I, line 7	2				
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, of (loss), enter "-0-" in Part I, line 8	s) as defined in sections 1222(5) an	<b>\</b> 1	3				

(a) List and 2-story br	describe the kind(s) of property so ick warehouse; or common stock, :		((b) How acquired   P - Purchase   D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a CAPITAL GAINS	DIVIDENDS			B Bondion		
b .						
C .				<del> </del>		<del></del>
d				ļ		
f e	<del></del>	<del></del>			<del> </del>	
_ <del>'</del>						<del></del>
h						
. <del></del>	<del></del>					<del></del>
k						
1		· · · · · · · · · · · · · · · · · · ·				
m						
n						<del></del>
0		<del></del>	<del></del>	L	L	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) (e) n	Gain or (loss) lus (f) minus (g)	
a 9,001.	(or anowable)	pius experise di sale	<del></del>	(6) p	103 (1) (1111103 (9)	9,001.
a 9,001.	<del></del>	<del> </del>	+			3,001.
C	<del></del>	<del></del>	+		<del></del>	
d	<del></del>	<del> </del>	<del></del>		<del></del>	····
e			+			
f		<del> </del>	1			<del></del>
g	<del></del>	<del> </del>	1	<del> </del>		
h			1			
]						
L						
k			<u> </u>	<del> </del>		
1	<del></del>	ļ	<del> </del>			
n	<del></del>					
<u>n</u>			<del> </del>	<del></del>	<del> </del>	
Complete only for accets shown	g gain in column (h) and owned by	the foundation on 12/21/50			(6	<del></del>
	(j) Adjusted basis	(k) Excess of col. (i)	-	Gains (excess o	ses (from col. (h)) of col. (h) gain over	col. (k),
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any			ot less than "-0-")	
a	<del></del>		ļ			9,001.
b		<del> </del>	ļ			<del></del>
<u>c</u>			<del> </del>			
d		ļ	<del> </del>		<del></del>	
e		<del> </del>	<del></del>			
<u>f</u>			-			
9	<del></del>		<del></del>			
1		<del> </del>	┼	<del></del>	<del></del>	
!			<del> </del>			
k		<del> </del>	<del> </del>	<del></del>		
<u> </u>		_				
n						
n						
D			ļ			
Capital gain net income or (net cap	oital loss) { If gain, also enter "-	r in Part I, line 7 0-" in Part I, line 7	2			6,605.
Net short-term capital gain or (loss if gain, also enter in Part I, line 8, or If (loss), enter "-0-" in Part I, line 8	s) as defined in sections 1222(5) ar column (c).	•			NI / A	

LOTHLO	DRIEN FOUNDATION		47-081	6447
Part XV Supplementary Informat			···	
3 Grants and Contributions Paid During the Recipient	If recipient is an individual,	<del></del>	<del></del>	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
,				
INSTITUTE FOR CREATION RESEARCH	NONE	PUBLIC	OPERATING COST OF	
PO BOX 2667	HONE	FORMIC	NON-PROFIT ORG	
EL CAJON, CA 92021		<del> </del>		2,272
LINGONIER MINISTRIES	NONE	PUBLIC	OPERATING COST OF	
PO BOX 547500			NON-PROFIT ORG	200
ORLANDO FL 32854		<del>                                     </del>		800
NAVI GAMONG	1017			
NAVIGATORS PO BOX 6000	NONE	PUBLIC	TRAINING OF TEACHERS FOR INTL POSITIONS	
COLORADO SPRINGS, CO 80934		ļ		1,248,
PROJECT MEDSEND	none	PUBLIC	OPERATING COST OF	
999 ORONOQUE LANE			NON-PROFIT ORG	
STRATFORD, CT 06614		<del> </del>	-	5,000,
SEARCH MINISTRIES 5038 DORSEY HALL DRIVE	NONE	PUBLIC	OPERATING COST OF NON-PROFIT ORG	
ELLICOTT CITY MD 21042			HON TROTTI ONG	2,436,
SEND INTL	NONE	PUBLIC	ENGLISH LITERACY	
PO BOX 513			DEVELOPMENT & CAMP	
FARMINGTON MI 48332		<del> </del>	WORK - JAPAN	1,224,
SIM PO BOX 7900	NONE	PUBLIC	AFRICAN LITERACY WORK	
CHARLOTTE NC 28241				1,260,
THE BUNGEY TON ALLTANDE WIGGEN	NONE	DURL TO	DDEDAMING COCK OF	
THE EVANGELICAL ALLIANCE MISSION (TEAM)	NONE	PUBLIC	OPERATING COST OF NON-PROFIT ORG	
PO BOX 969				
WHEATON, IL 60187			-	14,210,
CAMPUS CRUSADE FOR CHRIST	NONE	PUBLIC	OPERATING COST OF	
PO BOX 628222 ORLANDO, FL 32862-8222			NON-PROFIT ORG	9,560.
				<del></del>
PAN-AFRICAN ACADEMY OF CHRISTIAN	NONE	PUBLIC	OPERATING COST OF	
SURGEONS (PAACS) PO BOX 9906			NON-PROFIT ORG	
FAYETTEVILLE, NC 28311-9906				5,000,
Total from continuation sheets				105 072.

3 Grants and Contributions Paid During the		<del></del>	<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
		}	}	
WYCLIFFE ASSOCIATES	NONE	PUBLIC	OPERATING COST OF	
PO BOX 620143 ORLANDO FL 32862		{	NON-PROFIT ORG	1 2
JRLANDO, FL 32002	<del></del>	<del> </del>		1,21
TIMVI TOUR	NONE	PUBLIC	ODED AMILIO COCM OF	
CITYLIGHT LO23 N 40TH ST	NONE	POBLIC	OPERATING COST OF NON-PROFIT ORG	
DMAHA NE 68131			HOLL THOUSE ONG	42,30
HUNTER FIRST BAPTIST	NONE	PUBLIC	OPERATING COST OF	
593 TENNESSEE 91			NON-PROFIT ORG	
ELIZABETHTON, TN 37643		ļ		4,35
KILGORE UNITED METHODIST MISSION	none	PUBLIC	OPERATING COST OF	
14630 STATE ROUTE 854			NON-PROFIT ORG	
RUSH, KY 41168				1,20
		}		
NEBRASKA FAMILY ALLIANCE	иоие	PUBLIC	OPERATING COST OF	
1106 E ST #3			NON-PROFIT ORG	
LINCOLN, NE 68508	<del></del>	<del></del>	-	6,00
ALLIANCE DEFENDING FREEDOM	NONE	PUBLIC	OPERATING COST OF	
15100 N. 90TH STREET SCOTTSDALE AZ 85260			NON-PROFIT ORG	1.00
SCUITSDAUE, AZ 03200		<del> </del>		1,00
2142	Low	DUDI TO	ODEDAMENG GOOM OF	
CAMP RIVERCREST 2840 CO RD 13	NONE	PUBLIC	OPERATING COST OF NON-PROFIT ORG	
FREMONT NE 68025		}	Non Thoras one	1,00
SLOBAL FRIENDS	NONE	PUBLIC	OPERATING COST OF	
2511 SCOTCH PINE DRIVE		1	NON-PROFIT ORG	
DAKVILLE, ONTARIO, CANADA L6M 4C3				1,00
CENTER FOR SCIENCE & CULTURE	NONE	PUBLIC	OPERATING COST OF	
208 COLUMBIA STREET	}	1	NON-PROFIT ORG	
SEATTLE, WA 98104		<del> </del>		1,00
		1		
DMAHA FOR DECENCY	NONE	PUBLIC	OPERATING COST OF	
PO BOX 45144		1	NON-PROFIT ORG	
MAHA, NE 68145  Total from continuation sheets		1		50

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	,
•				
BETHLEHEM BAPTIST CHURCH	NONE	PUBLIC	OPERATING COST OF	
720 13TH AVENUE S		}	NON-PROIFT ORG	
MINNEAPOLIS MN 55415	<u></u>	<u> </u>		2,000,
ORLANDO GRACE CHURCH	NONE	PUBLIC	OPERATING COST OF	}
2828 EDGEWATER DR STE 200	10112	TODDIC	NON-PROFIT	{
ORLANDO, FL 32804			( KON-1 KOT 1 1	500
ONDANDO, PH 32004				300,
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		1		
•				
		1		
Total from continuation sheets	<del>                                     </del>	<del></del>		

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE	REVE	REVENUE NET IN		(B) VESTMENT COME	(C) ADJUSTED NET INCOME	3	
WELLS FARGO BANK		<del></del>	13.		13.		
TOTAL TO PART I, LI		13.		13.			
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 INCO		
CHARLES SCHWAB NORTHWESTERN	21,282			21,282.	•		
MUTUAL	17,699	9,00	1. 	8,698.	8,69 	·8. 	
TO PART I, LINE 4	38,981	9,00	1. 	29,980. 	29,98 	— — —	===
FORM 990-PF	0	THER PROFES	SIONAL	FEES		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM		
MANAGEMENT FEES		11,241.	1	1,241.			0.
TO FORM 990-PF, PG	1, LN 16C	11,241.	1	1,241.	·····		0.
FORM 990-PF	<del></del>	TAX	ES			STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS		VEST-	(C) ADJUSTED NET INCOM		
FOREIGN INVESTMENT	TAXES -	301.		301.		<del></del>	0.
TO FORM 990-PF, PG	1, LN 18	301.		301.	<del></del>	<del></del>	0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
DUES & SUBSCRIPTIONS BANK CHARGES OFFICE SUPPLIES LEGAL-PROF FEES MEALS AND ENTERTAINMENT	750. 13. 140. 473. 144.		0. 0. 0.			0.
TO FORM 990-PF, PG 1, LN 23	1,520.		0.			0.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	6
DESCRIPTION		LUATION ETHOD	вос	K VALUE	FAIR MARKE VALUE	eT
CHARLES SCHWAB NORTHWESTERN MUTUAL PRECIOUS METALS		COST COST COST	· · · · · · · · · · · · · · · · · · ·	676,249. 430,139. 49,407.	779,9 400,4 33,4	122.
TOTAL TO FORM 990-PF, PART II, LINE 13			1	1,155,795. 1,213,888.		