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Form 990-PF

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

OMB No 1545-0052 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCANNED JUN 2 2 2016

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

For cal	endar	year 2015, or ta	ax year beginni	ng	, 2015	, and ending		, , , , , , , , , , , , , , , , , , , ,	
Name of f							Α	Employer identification num	nber
in H	IS_r	name founda	<u>ation nebr</u>	aska		I Doom/outo	<u> </u>	47-3901765	
Number and street (or P O box number if mail is not delivered to street				to street a	address)	Room/suite	В	Telephone number (see instr	
City or toy	SII vn. state	VER STREET	and ZIP or foreign pos	stal code		<u> </u>	┼	(402) 944-338	<u> </u>
ASHL	•	, o. p. o	and an interesting of per-	-10. 5545	NE	68003	C	If exemption application is	pending, check here. 🕨 🗍
		that apply	X Initial return		Initial return of a forme		1_		
G One	JOIL GII	and apply	Final return	-	Amended return	or public criainty	P	1 Foreign organizations, che	ck here L
		}	Address chan		Name change			2 Foreign organizations mee	ting the 85% test, check
U Ch	ale do se	oo of organization			(c)(3) exempt private for	Indation	-	here and attach computation	
n Che		pe of organization					E	If aguata foundation status	was terminated
لـــــــــــــــــــــــــــــــــــــ			nonexempt chari			rivate foundation	┤╴	If private foundation status under section 507(b)(1)(A),	
		l value of all assets a II, column (c), line 16			ounting method XC	ashAccrual	1		L
•					Other (specify)		Į F	If the foundation is in a 60-	month termination
► \$,676.	(Part I,	column (d) must be on o	asri basis)		under section 507(b)(1)(B),	check here
Part I		nalysis of Re			(a) Revenue and	(b) Net investmen	t	(c) Adjusted net	(d) Disbursements
	CO	lumns (b). (c). ar	total of amounts nd (d) may not no	iii eces-	expenses per books	ıncome		Income	for charitable purposes
	sa	rıly equal the am	ounts in column	(a)					(cash basis only)
	<u>-</u> -	ee instructions))							
	1		s, etc, received (attach sch		426,000.				
	2	Ck ►if the four	indation is not required to a	ttach Sch B				<u> </u>	
	3	Interest on savings and te	emporary cash investments				1.	1.	1
	4		om secunlies				<u> </u>		
	5 a	Gross rents	<i></i>						
	þ	Net rental income or (loss)		1					
R		Net gain or (loss) from sa	le of assets not on line 10						~
E V	b	Gross sales price for assets on line 6a							
Ě	7		me (from Part IV, line	2)					
N	8		algam						
U E	9								1
	10 a	Gross sales less returns and							,
	Ь	allowances Less Cost of				····· <u>·</u>			
	-	goods sold	Ļ 					<u> </u>	<u> </u>
	l		och schedule) • • • • n schedule) • • • •					ļ	<u> </u>
	11	Other theome (attach	rschedule)	• • • •					
	12	Total Add lines 1 t	through 11		426,000.		1.	1.	
	13		cers, directors, trustee		420,000.	 _		<u> </u>	
	14		laries and wages						
	15		oyee benefits						
Α	16 a	Legal fees (attach sc	heaule)						
Ĝ	b	Accounting fees (atta	ach sch)		<u> </u>			DECEIVED	
Ĭ.	l		ch sch)					KLUEIVLY	700
0 I	17				<u> </u>		\vdash		181
P S E T	18	Taxes (attach schedule)(s	see instrs)				18	111N 0 1 2016	100
R Ř A A	19	Depreciation (attach					12	1014	
T			lion				lù		or a second
N V G E	20	• •					1_	1265131 111 1	<u> </u>
A E	21 22		and meetings				1	f. f. w. y. z.	
N X D P	23	Other expenses (atta							
E			· ·	LEGAL	850.				
N S	24	Total operating and							
E S			13 through 23		850.				
- '	25	Contributions, gifts, grants	spaid		8,475.				
	26	Total expenses and							
				• • • •	9,325.				····
	27	Subtract line 26 from			فتا بالترسيف محيد الماساد				
	a	Excess of revenue of and disbursements	over expenses		416,675.				•
	h		ome (if negative, enter		410,013.		1.		
	ļ		e (if negative, enter -0				<u> </u>	<u> </u>	

Dar	4 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	Ena o	r year
Fai		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	0.1	676.	676.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less. allowance for doubtful accounts	وسنا الطالب استحبيد يعيد للرسية	and the second section of the second section of the second section of the second secon	Company And A Part 7 A 2 CT
	4	Pledges receivable			
		Less, allowance for doubtful accounts	الا من من موسوعة مستقد المستقد المستقد المستقد (HIP as a limit of	بعادي والمحتدد المستحدد والمحادث والمحتدد	
	5	Grants receivable			
	l	Receivables due from officers, directors, trustees, and other			
	6	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)	. 10	منطة معيدة والاستناء المساعدات المهملا كواد	ر میچون در این با به اینان ها بیشار داد در اینان ا
S		Less. allowance for doubtful accounts			
A S S E T	8	Inventories for sale or use		· 	
E T	9	Prepaid expenses and deferred charges			
Ś	10:	a Investments — U.S and state government obligations (attach schedule)			
	1	b Investments — corporate stock (attach schedule)			
	(c Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment, basis			
		Less accumulated depreciation (altach schedule)	and the second second	11.5.000	416.000
	40			416,000.	416,000.
	12	9-5-10-11-1			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment: basis	ب استومان بندا المقامم وماناتونانا	weller the two traces	پييسيد د ته پاسته نه
		Less accumulated depreciation (attach schedule)			
	1	Other assets (describe			
	16	see the instructions. Also, see page 1, item I)	0.	416,676.	416,676.
Ļ	17	Accounts payable and accrued expenses			
Å	18	Grants payable			
В	19	Deferred revenue			
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons			i L
Ī	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe			
E					
<u>s</u>	23	Total liabilities (add lines 17 through 22)			, ,
		and complete lines 24 through 26 and lines 30 and 31.			ļ
N F E U T N	24	Unrestricted		416,676.	
TŇ	25	Temporarily restricted			1
D.	26	Permanently restricted			,
S B		Foundations that do not follow SFAS 117, check here . F and complete lines 27 through 31.			į
A B S A L T A	27	Capital stock, trust principal, or current funds			3
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund			1
O E	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30	Total net assets or fund balances (see instructions)		416,676.	1
	31	Total liabilities and net assets/fund balances (see instructions)	0.	416,676.	j
Part	: 111].	Analysis of Changes in Net Assets or Fund Balance		اختــنــنــنـــــــــا	
		net assets or fund balances at beginning of year — Part II, column (a		th	
		r amount from Part I, line 27a			416.675
3	Other	Increases not included in line 2 (itemize)		3	416,675.
4	VYY i ≏mei	increases not included in line 2 (itemize) INTEREST			116 676
		lines 1, 2, and 3		 	416,676.
o o	necre	ases not included in line 2 (itemize)	7,5 - 5 - 7,7 7, - 5 -	5	
6	rotal	net assets or tund balances at end of year (line 4 minus line 5) — Pa	rt II. column (b), line 30	6 1	416 676

(a) List and desc	and Losses for Tax on Investment cribe the kind(s) of property sold (e.g , real nouse; or common stock, 200 shares MLC	l estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
b					
С					
d					
е			<u> </u>		_
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gaın oı (e) plus (f) m	
a					
b					
C					
d					
е					
	howing gain in column (h) and owned by the			(I) Gains (Co	
(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	t	gain minus col (k), l han -0-) or Losses (l	rom col (h))
a				<u> </u>	
b					
С					
d					
е					
2 Capital gain net income or		enter in Part I, line 7 ter -0- in Part I, line 7	2		
3 Net short-term capital gain	or (loss) as defined in sections 1222(5) an	nd (6).			
If gain, also enter in Part I, in Part I, line 8	line 8, column (c) (see instructions). If (los	s), enter -0-	3		
	nder Section 4940(e) for Reduce		nent Incom	<u> </u>	-
If 'Yes,' the foundation does not o	section 4942 tax on the distributable amou	olete this part		Yes	No
1 Enter the appropriate amou	unt in each column for each year; see the i	nstructions before making ar	ny entries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	eets (co	(d) Distributio I. (b) divided by d	
2014					
2013					
2012					
2011					
2010					
2 Total of line 1 column (d)			2		
• •			· · · · · · 		
3 Average distribution ratio for number of years the foundate	or the 5-year base period — divide the total ation has been in existence if less than 5 y	l on line 2 by 5, or by the ears	3		
4 Enter the net value of nonc	haritable-use assets for 2015 from Part X,	line 5	· · · · · <u>4</u>	-	
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment	income (1% of Part I, line 27b)		· · · · · <u>6</u>		
7 Add lines 5 and 6				ļ	
8 Enter qualifying distribution	s from Part XII, line 4		8		
If line 8 is equal to or greate Part VI instructions.	er than line 7, check the box in Part VI, line	e 1b, and complete that part	using a 1% tax	rate. See the	

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions	5)		
	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1			
	Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)		** *	- ,
F	Domestic foundations that meet the section 4940(e) requirements in Part V,			0.
_	check here . And enter 1% of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
_				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
3	Add lines 1 and 2			0.
1	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0.
5	Tax based on Investment income. Subtract line 4 from line 3. If zero or less, enter -0			0.
6	Credits/Payments:			
_	2015 estimated tax pmts and 2014 overpayment credited to 2015 6 a			i
	Exempt foreign organizations — tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6 c			,
				!
_	Backup withholding erroneously withheld		. 10 - 0	
7 8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
9				
10	overpulsional in mile 7 is more than the total of miles 5 and 6, enter the amount overpular 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.			_0.
11				
	t VII-A Statements Regarding Activities			Τ
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			
	(see Instructions for the definition)?	1 b		<u> </u>
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published			
	or distributed by the foundation in connection with the activities	:		
	EDID the foundation file Form 1120-POL for this year?	1 c		_ X
·	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If 'Yes,' attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
•	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		Х
t	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If 'Yes,' attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			;
	By language in the governing instrument, or			1
		ł		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	
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 XV	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			-
	NE - Nebraska			
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) of each state as required by General Instruction G? If 'No,' attach explanation	8 ь		X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)			- 1
J	for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	$\neg \neg$		
	and addresses	10	Х	1
BAA		-		2015)

	990-PF(2015) in HIS name foundation nebraska	47-	390176	5	P	age 5
Par	t VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		Х
	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified pe advisory privileges? If 'Yes,' attach statement (see instructions)					х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applice. Website address	ation? .		13	X	
14	Website address	no. ►	<u>(402)</u>	944	-338	3
15	Located at 1442 SILVER STREET ASHLAND NE ZIP+4 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	<u>.</u>	15		. •	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?			16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country	_				
Par	t 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.	<u>-</u>			Yes	No
1 a	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	ΧNο			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X 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)?	Yes	χNο			,
	(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.)	Yes	ΧNο			
b	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)?			1 b		u arden d
	Organizations relying on a current notice regarding disaster assistance check here	•				1
C	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?			1 c	****	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):					
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	ΧNο			
	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.)			2 b		
С	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 _ ,20					
3 a	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			
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.)			3 b	w. I	
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?					Х
				-, u		
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?			4 b		

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Part VII-B Statements Regarding Activit		14/20 May Be Req	uirea (continuea)		 _	-		
• •	•	action 4045/a))2	Yes X	No				
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?								
(3) Provide a grant to an individual for travel, stu				No				
				1				
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	a charitable, etc, organi	zation described	Yes X	No				
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	, charitable, scientific, lite of cruelty to children or ai	erary, or nimals?.........	Yes X	No				
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)?	transactions fail to qualif current notice regarding	y under the exceptions disaster assistance		5	. -	-		
Organizations relying on a current notice regardi					7	-		
			_	1				
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt	tion from the	· · · · Yes	No				
If 'Yes,' attach the statement required by Regular			با ليا	1				
6 a Did the foundation, during the year, receive any	funds directly or indirect	lv. to nav premiume						
on a personal benefit contract?	· · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · ·	· · · · Yes X	No				
b Did the foundation, during the year, pay premium	ns, directly or indirectly, c	on a personal benefit con	tract?	6 6	b >	K		
If 'Yes' to 6b, file Form 8870.								
7 a At any time during the tax year, was the foundation	on a party to a prohibited	I tax shelter transaction?	Yes X	No				
b If 'Yes,' did the foundation receive any proceeds					b			
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid I	Employe	es,	_		
and Contractors								
1 List all officers, directors, trustees, foundatio	n managers and their c	ompensation (see inst	ructions).					
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation		nse account allowances			
SUSAN M. LUTTON								
408 S. LAKEVIEW WAY	CHAIRMAN			ļ				
ASHLAND NE 68003	1.00	0.	0.		0	١.		
ELIZABETH FLYNN								
2142 CLAY STREET	SECRETARY							
ASHLAND NE 68003	1.00	0.	0.		. 0	١.		
SARA C. LUTTON								
408 S. LAKEVIEW WAY	DIRECTOR							
ASHLAND NE 68003	1.00	0.	0.		0	١,		
DAVID N. LUTTON								
408 S. LAKEVIEW WAY	TREASURER			ļ				
ASHLAND NE 68003	1.00	0.	0.		0	١,		
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ir	istructions). If none, e	nter 'NON	E.'			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred	(e) Exper	nse account allowances	•		
NONE			compensation	ļ		_		
NONE				ļ				
			-	-		_		
						_		
						_		
						_		
				-		-		
	<u></u>		- <u>-</u>					
Total number of other employees paid over \$50,000.			•	1	Non			

3 Five highest-paid independent contractors for professional services (see	e instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	_	
	_	
		
	-	
	-	
		
	-	
	-	
		
	1	
Total number of others receiving over \$50,000 for professional services		None
Part IX-A Summary of Direct Charitable Activities		
	·····	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti organizations and other beneficiaries served, conferences convened, research papers produced, etc	cal information such as the number of	Expenses
1		
2		
3		
"		
~~		
4		· · · · · · · · · · · · · · · · · · ·
Part IX-B Summary of Program-Related Investments (see inst	ructions)	
Describe the two largest program-related investments made by the foundation during	on the tay year on lines 1 and 2	Amount
1		Amount
2		
~======================================		
All other program related in restaurate and Community		
All other program-related investments. See instructions.		
*		
Total. Add lines 1 through 3		
BAA		Form 990-PF (2015)

Par	see instructions.)	gn foundatior	ıs,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. Average monthly fair market value of securities		•
		1a	0.
	Average of monthly cash balances	1 b	
C	Fair market value of all other assets (see instructions)	1 c	
	Total (add lines 1a, b, and c)	1 d	0.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)	Ame w .	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Par	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here and do not complete this part.)	foundations	
1	Minimum investment return from Part X, line 6	1	0.
2 a	Tax on investment income for 2015 from Part VI, line 5		
	Income tax for 2015. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2 c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)		
-	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		0.
_	t XII Qualifying Distributions (see instructions)		
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	
b	Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 a	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
	Cash distribution test (attach the required schedule)	3 b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	
	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	
e	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
0	Aujusteu quamynig distributions. Subtract line 3 norm line 4		0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo qualifies for the section 4940(e) reduction of tax in those years.		
BAA		Form 9	990-PF (2015)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				0.
2 Undistributed income, if any, as of the end of 2015		1	له در مستوسف بدر من شاهد الدوار الدوا	}
a Enter amount for 2014 only				
b Total for prior years. 20 , 20 , 20	1			1
3 Excess distributions carryover, if any, to 2015			1	, ,
a From 2010				;
b From 2011		·		Į,
c From 2012 0 .	1			4
d From 2013 0 .	4	ι	,	1
e From 2014 0 .	ا جامعی در در محمد از این در در این			
f Total of lines 3a through e	0.			· · · · · · · · · · · · · · · · · · ·
4 Qualifying distributions for 2015 from Part				3
XII, line 4. • \$			and the state of the control of	; ;
a Applied to 2014, but not more than line 2a	•			1
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Electron required — see instructions)	I .			r 8
d Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus	1 0.			
5 Excess distributions carryover applied to 2015			· · · · · · · · · · · · · · · · · · ·	
(If an amount appears in column (d), the				3
same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		:
Undistributed income for 2014 Subtract line 4a from				
line 2a Taxable amount — see instructions			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				
may be required — see instructions)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2011 0 .				
b Excess from 2012 0 .				:
c Excess from 2013 0 .				
d Excess from 2014 0 .				
e Excess from 2015 0 .				5 000 PF (0045)

Part XIV Private Operating Foundat					N/A			
1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling.								
b Check box to indicate whether the foundation				4942(J)(3) or	4942(J)(5)			
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years					
income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total			
each year listed								
b 85% of line 2a								
© Qualifying distributions from Part XII, line 4 for each year listed								
d Amounts included in line 2c not used directly for active conduct of exempt activities								
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c								
3 Complete 3a, b, or c for the alternative test relied upon								
a 'Assets' alternative test — enter.								
(1) Value of all assets								
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)								
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed								
c 'Support' alternative test — enter:								
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)								
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	1							
(3) Largest amount of support from an exempt organization								
(4) Gross investment income								
Part XV Supplementary Information assets at any time during the	(Complete this	part only if the	foundation had	\$5,000 or more	in			
1 Information Regarding Foundation Manag	_ 	34404011017						
a List any managers of the foundation who have close of any tax year (but only if they have co	e contributed more t	han 2% of the total of \$5,000). (See section	contributions received on 507(d)(2).)	d by the foundation be	efore the			
b List any managers of the foundation who own a partnership or other entity) of which the foundation	1 10% or more of the ndation has a 10% c	stock of a corporation greater interest.	on (or an equally larg	ge portion of the owner	ership of			
2 Information Regarding Contribution, Gran	t Gift Loan Schol	arshin etc Program						
Check here ► X if the foundation only ma				does not accept unse	olicited			
requests for funds. If the foundation makes g complete items 2a, b, c, and d.	fts, grants, etc (see	instructions) to indivi	iduals or organization	ns under other conditi	ons,			
a The name, address, and telephone number of	r e-mail address of t	he person to whom	applications should b	e addressed:				
b The form in which applications should be submitted and information and materials they should include:								
c Any submission deadlines:								
d Any restrictions or limitations on awards, such	n as by geographical	l areas, chantable fie	elds, kinds of institution	ons, or other factors:				

3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount					
Name and address (home or business)	substantial contributor	Toolbielit		ļ					
a Paid during the year ASHLAND AREA FOUNDATION 1442 SILVER STREET ASHLAND NE 68003 MISCELLANEOUS CHARITABLE		PC	ASHLAND SPLASH PAD	5,000.					
ORGANIZATIONS ASHLAND NE 68003		PC	DONATIONS	3,475.					
Total			<mark></mark>	8,475.					
b Approved for future payment Total									

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		Unrelate	ed business income	Excluded by section 512, 513, or 514 (e)			
		am service revenue.	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
	_				code		
	. ——						
	<u> </u>						
	d		_				
	е						
1	f						
9	g Fees	and contracts from government agencies					
2	Memb	pership dues and assessments					
3	Interes	t on savings and temporary cash investments					
4	Divide	ends and interest from securities					
5		ental income or (loss) from real estate:					ļ
		financed property					
- 1		ebt-financed property			1		
6		ntal income or (loss) from personal property					
7		investment income			 		
8		r (loss) from sales of assets other than inventory					
9		come or (loss) from special events					
10		profit or (loss) from sales of inventory			<u> </u>		
11		revenue.			1		
_	_				-		
	°.——						
	d						
42	e	A-1 A -11					
12	Subto	tal. Add columns (b), (d), and (e)		<u> </u>	<u> </u>		
		Add line 12, columns (b), (d), and (e)				13	_
(566	WORKS	heet in line 13 instructions to verify calculations	.)				
Pa	rt XVI	-B Relationship of Activities to the	Accomp	lishment of Exem _l	pt Purp	oses	
Lir	ne No.	Explain below how each activity for which inco	me is report	ed in column (e) of Part	XVI-A co	intributed importantly to t	the
	▼	Explain below how each activity for which inco accomplishment of the foundation's exempt put	urposes (other	er than by providing fund	ds for suc	ch purposes). (See instru	ctions.)
							
					_		
		<u> </u>		·	_	 	
			-	 			
					-		
							
							
							<u> </u>
		<u> </u>					
							

Form 990-PF	(2015)	in HIS	name	foundation	nebraska	47-3901765	Page 13
Part XVII					and Transaction	s and Relationships With Noncharitable	
	Evemnt	Organi	zatione				

								r	Vac	N-
1 Did	the organization direct	ly or indirectly end	age in any of the	following with an	v other organ	nization			Yes	No ;
des	cribed in section 501(c) of the Code (other	er than section 50	1(c)(3) organizat	ions) or in se	ection 527,		ļ		ł
rela	ting to political organiz	ations?								
a Trar	nsfers from the reportir	ng foundation to a	noncharitable exe	empt organization	of.)
(1)	Cash							1 a (1)		X_
(2)	Other assets							1 a (2)		Х
	er transactions:									
-	Sales of assets to a ne	anaharitahla ayam	nt organization					1 b (1)		X
									-	_
	Purchases of assets f								 -	X
٠,	Rental of facilities, equ	,						1 b (3)	<u> </u>	X
	Reimbursement arran							1 b (4)		X
(5)	Loans or loan guarant	ees						1 b (5)	l i	<u>X</u>
(6)	Performance of service	es or membership	or fundraising so	licitations				1 b (6)		Х
C Sha	ring of facilities, equip	ment, mailing lists.	other assets, or i	paid employees.				1 c		X
								<u> </u>		
d If the	e answer to any of the	above is 'Yes,' cor	mplete the followi	ng schedule Col	umn (b) shou	uld always sho	w the fair market v	alue of		
the	goods, other assets, o transaction or sharing	r services given by	the reporting fou	indation. If the for	undation rece	eived less than	n fair market value	in		
										
(a) Line no	(b) Amount involve	d (c) Name	of noncharitable exer	npt organization	(d) Des	scription of transfe	ers, transactions, and s	naring arran	gement	<u></u>
						·				
					t					
										
		 			 					
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	- 				 					
					 		 			
	 									
			<u></u>		<u> </u>					
2 a ls th	ne foundation directly o	or indirectly affiliate	d with, or related	to, one or more t	ax-exempt or	rganizations				
des	cribed in section 501(c) of the Code (other	er than section 50	11(c)(3)) or in sec	tion 527?			. Yes	5 X	No
b If 'Y	es,' complete the follow	wing schedule.						_	_	
	(a) Name of organiz	ation	(b) Type	of organization		(c)	Description of relat	ionship	-	
	<u></u>	 _								
										
			<u> </u>							
U	nder penalties of perjury, I decorrect, and complete Declarat	clare that I have examine	ed this return, including	accompanying schedu	les and statemer	nts, and to the best	of my knowledge and be	elief, it is true,		
Sign "		ion of property outer (fix	an tanpayor, is based of	a sa mornadon of war	on properti lida e	any khomeuge		May the I	RS diec	100
Here	(i)	1 Litt		,				this return	n with the	е
1.		/ //our	<u> </u>	05/01/16	TRE	ASURER		preparer (see instr		
	Signature of officer or trustee			Date	/ Title				Yes	No
	Print/Type preparers	лате	Preparer's s	signature //	∠ Da	ate	Check If	PTIN		
Paid	David N. I	autton	()	3811		5/27/16	self-employed	P01412	280	
			. 055	-100m					. 2 0 0	
Prepare	· · (Lutton Lav					irm's EIN ► 47-2	704173		
Use On	ly Firm's address	1442 Silve	er Street ,	/						
		Ashland		<u></u> 1	<u>1E 68000</u>	<u>3-1846</u> F	Phone no (402	944-	<u> 3383</u>	
BAA							-	Form 99	0-PF (2	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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Name of the organization		Employer identification number					
in HIS name foundation nebra	aska	47-3901765					
Organization type (check 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	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as	a private foundation					
	501(c)(3) taxable private foundation						
	50 T(c)(5) taxable bitvate foundation						
Check if your organization is covered by the Ge	eneral Rule or a Special Rule.						
Note. Only a section 501(c)(7), (8), or (10) orga	anization can check boxes for both the General Rule and	a Special Rule. See instructions.					
General Rule							
For an organization filing Form 990, 990-Ez property) from any one contributor. Comple	Z, or 990-PF that received, during the year, contributions te Parts I and II. See instructions for determining a contri	totaling \$5,000 or more (in money or butor's total contributions.					
Special Rules							
under sections 509(a)(1) and 170(b)(1)(A)(1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% s vi), that checked Schedule A (Form 990 or 990-EZ), Part ne year, total contributions of the greater of (1) \$5,000 or -EZ, line 1. Complete Parts I and II.	II, line 13, 16a, or 16b, and that					
during the year, total contributions of more	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive than \$1,000 <i>exclusively</i> for religious, charitable, scientific children or animals. Complete Parts I, II, and III.	ed from any one contributor, c, literary, or educational					
during the year, contributions exclusively for \$1,000 If this box is checked, enter here the charitable, etc., purpose. Do not complete a	11(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive religious, charitable, etc., purposes, but no such contribute total contributions that were received during the year form of the parts unless the General Rule applies to this cole, etc., contributions totaling \$5,000 or more during the	outions totaled more than or an exclusively religious, organization because					
990-PF), but it must answer 'No' on Part IV, line	the General Rule and/or the Special Rules does not file e 2, of its Form 990; or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or	m 990-EZ or on its Form 990-PF,					

Name of org	anization	Emp	oloyer identification number
in HIS	S name foundation nebraska	47	-3901765
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space	e is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DAVID N. LUTTON 408 S. LAKEVIEW WAY ASHLAND NE 68003	\$426,00	Person Payroll O. Noncash X (Complete Part II for noncash contributions.)
(a) Number ————	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
 -		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_ -		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

to

of Part II

Name of organization

in HIS name foundation nebraska

Employer Identification number

47-3901765

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space	e is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	SAUNDERS COUNTY NEBRASKA FARM - UNDIVIDED ONE HALF INTEREST	-	
		\$ 416,000.	12/13/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.	/b)	(c)	(d)
from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		- 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
BAA	Sch	edule B (Form 990, 990-E	 <mark>/</mark> , or 990-PF) (2015)