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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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

Inspection

| | | ndar year 2015, or tax year beginning 07-0 | 1-2015 | , a | nd ending 0 | | |
|---------------------------------------|-----------------|--|---|-----|-------------------------|--|--|
| UN | | Y FAMILY PRACTICE | | | , , | entification numbe | er |
| FC | UNDATIC | DN | | | 47-0741061 | | |
| | | street (or P O box number if mail is not delivered to street address) BRASKA MEDICAL CENTER | Room/suite | | | nber (see instruction | s) |
| 30 | 3073 NE | DIADRA FIEDICAL CENTER | | | (402) 559-6480 | | |
| | | state or province, country, and ZIP or foreign postal code 681983075 | | | C If exemption | application is pendin | g, check here |
| G CI | neck all | | former public charity | | D 1. Foreign org | ganızatıons, check h | ere • |
| | | Final return A mended return | | | 3 Foreign or | ganizations meeting | tha 950/- |
| | | Address change Name change | | | test, check | here and attach co | mputation 🕨 |
| | | pe of organization | | | | ndation status was t 507(b)(1)(A), chec | |
| • | | 4947(a)(1) nonexempt charitable trust Other taxable trust Other ta | ole private foundation ✓ Cash ✓ Accru | | E If the founds | tion is in a 60-montl | h tamanatian |
| of | year <i>(fr</i> | rom Part II, col (c), \$ 630,446 Other (specify) _ (Part I, column (d) must | | u. | l | 507(b)(1)(B), chec | |
| Pa | rt I | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) | Revenue and expenses per (a) books | (b) | Net investment income | Adjusted net | Disbursements for charitable purposes (d) (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received (attach | | | | | |
| | | schedule) | | | | | |
| | 2 | Check ► | | | | | |
| | 3 | Interest on savings and temporary cash investments | 10 | | 10 | 10 | |
| | 4 | Dividends and interest from securities | 2,690 | | 1,446 | 2,690 | |
| | 5a | Gross rents | | | | | |
| | b | Net rental income or (loss) | | | | | |
| Me | 6a | Net gain or (loss) from sale of assets not on line 10 | -9,027 | | | | |
| Reverue | b | Gross sales price for all assets on line 6a 485,279 | | | | | |
| | 7 | Capital gain net income (from Part IV, line 2) | | | | | |
| | 8 | Net short-term capital gain | | | | | |
| | 9 | Income modifications | | | | | |
| | 10a | Gross sales less returns and allowances | | | | | |
| | b | Less Cost of goods sold | | | | | |
| | C | Other income (attach schedule) | 56,152 | | | 56,152 | |
| | 11 | | 49,825 | | 1,456 | 58,852 | |
| | 12 | Total.Add lines 1 through 11 | 49,023 | | 1,430 | 30,032 | |
| | 14 | Other employee salaries and wages | | | | | |
| S | 15 | Pension plans, employee benefits | | | | | |
| Se | 16a | Legal fees (attach schedule) | | | | | |
| <u>5</u> | ь | Accounting fees (attach schedule) | 4,570 | | 914 | 914 | 3,656 |
| Ĕ | c | Other professional fees (attach schedule) | 2,300 | | 460 | 460 | 1,840 |
| ĭĶē | 17 | Interest | _ | | | | |
| <u>ta</u> | 18 | Taxes (attach schedule) (see instructions) | 409 | | 82 | 82 | 327 |
| Operating and Administrative Expenses | 19 | Depreciation (attach schedule) and depletion | | | | | |
| Ē | 20 | Occupancy | | | | | |
| ĕ | 21 | Travel, conferences, and meetings | | | | | |
| anc | 22 | Printing and publications | | | | | |
| ₽. | 23 | Other expenses (attach schedule) | 2,671 | | | | |
| atı | 24 | Total operating and administrative expenses. | | | | | |
| be | | Add lines 13 through 23 | 9,950 | | 1,456 | 1,456 | 5,823 |
| 0 | 25 | Contributions, gifts, grants paid | 0 | | | | С |
| | 26 | Total expenses and disbursements. Add lines 24 and 25 | 9,950 | | 1,456 | 1,456 | 5,823 |
| | 27 | Subtract line 26 from line 12 | | | | | |
| | a | Excess of revenue over expenses and disbursements | 39,875 | | | | |
| | ь | Net investment income (If negative, enter -0-) | | | 0 | | |
| | 1 6 | Adjusted net income(if negative enter -0-) | 1 | Ì | | 57 396 | 1 |

| Pa | rt II | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | Beginning of year | | of year |
|--------------|--------|---|-------------------------|------------------|-----------------------|
| | 1 | Cash—non-interest-bearing | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 2 | Savings and temporary cash investments | 10,036 | 12,205 | 12,205 |
| | 3 | Accounts receivable ▶ | , | , | |
| | | Less allowance for doubtful accounts | | | |
| | 4 | Pledges receivable ▶ | | | |
| | • | Less allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) | | | |
| | ′ | Less allowance for doubtful accounts ▶ | | | |
| | 8 | Inventories for sale or use | | | |
| ets | 9 | Prepaid expenses and deferred charges | | | |
| Assets | 10a | Investments—U S and state government obligations (attach | | | |
| ٩ | 100 | schedule) | | | |
| | ь | Investments—corporate stock (attach schedule) | 567,368 | 605,074 | 618,241 |
| | С | Investments—corporate bonds (attach schedule) | | | |
| | 11 | Investments—land, buildings, and equipment basis ▶ | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | |
| | 12 | Investments—mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | | | |
| | 14 | Land, buildings, and equipment basis ► | | | |
| | | Less accumulated depreciation (attach schedule) ▶ 7,360 | | | |
| | 15 | Other assets (describe ▶) | | | |
| | 16 | Total assets (to be completed by all filers—see the | | | |
| | | ınstructions Also, see page 1, item I) | 577,404 | 617,279 | 630,446 |
| | 17 | Accounts payable and accrued expenses | | | |
| ۰, | 18 | Grants payable | | | |
| tie | 19 | Deferred revenue | | | |
| ᆵ | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Liabilities | 21 | Mortgages and other notes payable (attach schedule) | | | |
| _ | 22 | Other liabilities (describe ►) | | | |
| | 23 | Total liabilities(add lines 17 through 22) | | C | |
| s | | Foundations that follow SFAS 117, check here ▶ | | | |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| <u>a</u> | 24 | Unrestricted | | | |
| Fund Balance | 25 | Temporarily restricted | | | |
| pu | 26 | Permanently restricted | | | |
| Ξ | | Foundations that do not follow SFAS 117, check here 🕨 🔽 | | | |
| ō | | and complete lines 27 through 31. | | | |
| sts | 27 | Capital stock, trust principal, or current funds | | | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | |
| T A | 29 | Retained earnings, accumulated income, endowment, or other funds | 577,404 | 617,279 | |
| Net | 30 | Total net assets or fund balances (see instructions) | 577,404 | 617,279 | |
| | 31 | Total liabilities and net assets/fund balances(see instructions) | 577,404 | 617,279 | |
| Pa | rt III | Analysis of Changes in Net Assets or Fund Balances | | | |
| 1 | | Total net assets or fund balances at beginning of year—Part II, column (| (a), line 30 (must ag | ree | |
| | | with end-of-year figure reported on prior year's return) $\dots \dots$ | | 1 | 577,404 |
| 2 | | Enter amount from Part I, line 27a | | 2 | 39,875 |
| 3 | | | | 3 | |
| 4 | | Add lines 1, 2, and 3 | | | 617,279 |
| 5 | | Decreases not included in line 2 (itemize) ▶ | | _ 5 | |
| 6 | | Total net assets or fund balances at end of year (line 4 minus line 5)—Pe | art II, column (b), lıı | ne 30 . 6 | 617,279 |

| | | the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs | | How acquired P—Purchase (b) D—Donation | Date acquired | Date sold (d) (mo , day, yr) |
|---------------------|---|---|-----------------------------|--|---|---|
| 1a | | | | | | |
| b | | | | | | |
| С | | | | | | |
| d | | | | | | |
| e | | | | | | |
| (e) | Gross sales price | Depreciation allowed (f) (or allowable) | | or other basis expense of sale | | n or (loss) (f) minus (g) |
| а | | | | | | |
| b | | | | | | |
| с | | | | | | |
| d | | | | | | |
| e | | | | | | |
| | polete only for assets | showing gain in column (h) and owne | d by the foundation | on 12/31/69 | Gains (Col | (h) gain minus |
| | M V as of 12/31/69 | A djusted basis (j) as of 12/31/69 | Exc | ess of col (I) | col (k), but no | ot less than -0-) or (from col (h)) |
| a | | | | | | |
| b | | | | | | |
| С | | | | | | |
| d | | | | | | |
| e | | | | | | |
| 3 | Net short-term capit | me or (net capital loss) al gain or (loss) as defined in sectio Part I, line 8, column (c) (see instru | | in Part I, line 7 | 2 | |
| Part V | Qualification (| Jnder Section 4940(e) for R | educed Tax on | Net Investme | <u> </u> | |
| fsection Was the | n 4940(d)(2) applies, foundation liable for th | orivate foundations subject to the se leave this part blank e section 4942 tax on the distribute ot qualify under section 4940(e) Do | able amount of any | year in the base pe | , | Γ Yes √ No |
| | | unt in each column for each year, se | • | | ries | |
| | (a) penod years Calendar tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of nonchar | ıtable-use assets | (d) Distributio (col (b) divideo | n ratio |
| | 2014 | 25,461 | | 650,468 | | 0 039143 |
| | 2013 | 29,500 | | 631,907 | | 0 046684 |
| | 2012 | 30,551 | | 575,632 | | 0 053074 |
| | 2011 | 33,483 | | 559,798 | | 0 059813 |
| | 2010 | 28,710 | | 584,630 | | 0 049108 |
| 2 3 | | n (d). ratio for the 5-year base period—div | | <u> </u> | 2 | 0 247822 |
| | • | the foundation has been in existence | • | F | 3 | 0 049564 |
| 4 | | f noncharitable-use assets for 2015 | • | <u> </u> | 4 | 629,787 |
| 5 | Multiply line 4 by line | 23 | | | 5 | 31,215 |
| 6 | Enter 1% of net inve | stment income (1% of Part I, line 2 | 7b) | [| 6 | |
| 7 | Add lines 5 and 6. | | | [| 7 | 31,215 |
| 8 | | ibutions from Part XII, line 4 | | | 8 | 5,823 |
| | If line 8 is equal to or the Part VI instruction | r greater than line 7, check the box i | in Part VI, line 1b, | and complete that | part using a 1% ta | x rate See |

| Pai | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst | ructio | ns) | |
|------------|--|------------|-----|-----|
| 1 a | 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 instructions) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | 0 |
| | here ▶ ☐ and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · · | | | |
| c | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | |
| 3 | Add lines 1 and 2 | | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5 | | | |
| 6 | Credits/Payments | | | |
| а | 2015 estimated tax payments and 2014 overpayment credited to 2015 6a | | | |
| b | Exempt foreign organizations—tax withheld at source 6b | | | |
| c | Tax paid with application for extension of time to file (Form 8868) 6c 400 | | | |
| d | Backup withholding erroneously withheld 6d | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | 400 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here from 2220 is attached | | | |
| 9 | Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed 9 | | | |
| 10 | Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10 | | | 400 |
| 11 | Enter the amount of line 10 to be Credited to 2015 estimated tax 400 Ref unded 11 | | | |
| Par | t VII-A Statements Regarding Activities | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did | | Yes | No |
| | ıt participate or intervene in any political campaign? | 1a | | No |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions | | | |
| | for definition)? | 1 b | | No |
| | 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 | 1c | | No |
| | Did the foundation file Form 1120-POL for this year? | 10 | | NO |
| u | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ | | | |
| _ | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | |
| C | on foundation managers > \$ | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | No |
| _ | If "Yes," attach a detailed description of the activities | | | 110 |
| 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? <i>If "Yes," attach a conformed copy of the changes</i> | 3 | | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | No |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | No |
| | 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 |
| | 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 | Yes | , |
| 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 | Yes | |
| 8 a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | |
| 1. | If the angular is "Vee" to line 7, has the foundation formalised a convent Form COO. DE to the Atternation | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney | CI- | V | |
| | General (or designate) of each state as required by General Instruction G? If "No," attach explanation. | 8 b | Yes | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? | | | |
| | If "Yes," complete Part XIV | 9 | | No |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names | | | |
| | and addresses | 10 | | No |
| | | | | |

| Form | n 990-PF (2015) | | Р | age |
|------------|---|---------------|-------|-----|
| Pa | rt VII-A Statements Regarding Activities (continued) | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | No |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had | | | |
| | advisory privileges? If "Yes," attach statement (see instructions) | 12 | | No |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Yes | |
| | Website address ►N/A | | | |
| 14 | The books are in care of ►KERIN MISIUNAS Telephone no ►(402 | <u>) 559-</u> | 6480 | |
| | Located at ▶983075 NEBRASKA MEDICAL CENTER OMAHA NE ZIP+4 ▶6819830 | 75 | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here | | ▶ [| - |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over | | Yes | No |
| | a bank, securities, or other financial account in a foreign country? | 16 | | No |
| | See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶ | | | |
| Pa | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | <u></u> | | ı |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | 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? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | ĺ | | Ì |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | į į | İ | İ |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | i | ! | İ |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | i | | İ |
| | ıf 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 🗸 No | | | |
| b | If any answer is "Yes" to $1a(1)-(6)$, did any of the acts fail to qualify under the exceptions described in Regulations | ĺ | | ĺ |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1 b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| | Γ | 1 | I | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, | | | |
| _ | that were not corrected before the first day of the tax year beginning in 2015? | 1c | | |
| 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 | | | | |
| _ | and 6e, Part XIII) for tax year(s) beginning before 2015? | | | |
| | If "Yes," list the years ▶ 2014, 20, 20 | i | | İ |
| ь | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | | | |
| | to all years listed, answer "No" and attach statement—see instructions) | 2b | | No |
| c | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | ▶ 20 <u>, 20</u> , 20 <u>, 20</u> | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at | | | |
| | any time during the year? | | | ļ |
| b | | | | |
| | or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved | | | |
| | by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) | | | |
| | the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015) | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | No |
| +a b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | Ta | | 110 |
| - | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? | 4b | | No |
| | | | | |

| | n 990-PF (2015) | | | | | | | | | Page |
|----------------------|---|-------------|---|--------|--------------------------------------|--------------|--|---------------------------------------|--------------------|-------------------------|
| | | | | | ich Form 4720 | May Be | Required (Cont | tinue | ? d) □ □ | |
| 5a | During the year did the foundar (1) Carry on propaganda, or ot | | | | ıslatıon (section 494 | 15(e))? | ┌ Yes 「 | √ No | | |
| | (2) Influence the outcome of a | | · · | | ** | • | | | | |
| | on, directly or indirectly, a | ny vote | r registration drive?. | | | | · · · TYes | ✓ No | | |
| | (3) Provide a grant to an indivi | idual for | travel, study, or oth | ners | ımılar purposes? | | ☐ Yes ☐ | ✓ No | !! | |
| | (4) Provide a grant to an organ in section 4945(d)(4)(A)? | | | | | | · · · TYes | √ No | | |
| | (5) Provide for any purpose other educational purposes, or for | | , | • | | | · Tyes | √ No | | |
| b | If any answer is "Yes" to 5a(1 |)-(5), d | ıd any of the transac | tions | fail to qualify under | the excep | tions described in | | | |
| | Regulations section 53 4945 | or in a c | urrent notice regard | ıng d | ısaster assıstance (| see instru | ctions)? | | 5b | |
| | Organizations relying on a curi | rent not | ice regarding disast | eras | sistance check here | | | _ | | |
| С | If the answer is "Yes" to quest | uon 5 a/ | 1) does the foundat | ion c | laim evemption from | the | l | | 1 1 | |
| · | tax because it maintained expe | | ** | | · · | | | _ _{Na} | | |
| | If "Yes," attach the statement re | | | | | | res | NO | ii | |
| 6a | Did the foundation, during the | • | - | | | nremijims | on | | | |
| J u | a personal benefit contract?. | | • | | | | · F Yes | . A No. | | |
| b | Did the foundation, during the | | | | | inal benefit | | • | 6b | No |
| _ | If "Yes" to 6b, file Form 8870 | , cui, pu | , premiums, unecci | , 0, 1 | nameetty, on a perso | That belief | communication in the | • | | - 110 |
| 7a | At any time during the tax yea | r, was ti | ne foundation a part | y to a | prohibited tax shelt | ter transac | ction? Yes | No | | |
| ь | If yes, did the foundation recei | | • | | | | 1 .55 | • | 76 | İ |
| _ | Information Abo | | | | | | | | | lovees. |
| Pa | rt VIIII and Contractors | | | | | | | | p | |
| _1_ | List all officers, directors, trust | ees, fo | undation managers a | nd t | heir compensation (s | see instruc | | | | |
| (a) Name and address | | (b) | Title, and average hours per week (b) devoted to position | | Compensation(If not paid, enter -0-) | employ | (d) tributions to ee benefit plans red compensation | Expense account, (e) other allowances | | |
| MICH | IAEL SITORIUS MD | PRE | SIDENT | | 0 | 4114 43131 | 0 | | | (|
| | 075 NEBRASKA MEDICAL ITER | 1 00 | | | | | | | | |
| 983 | 075 NEBRASKA MEDICAL TER | | | | | | | | | |
| | AHA,NE 68198 | | | | | | | | | |
| | I SMITH MD | VIC 1 00 | E PRES | | 0 | | 0 | | | (|
| | 075 NEBRASKA MEDICAL ITER | 1 00 | , | | | | | | | |
| | 075 NEBRASKA MEDICAL | | | | | | | | | |
| | ITER AHA,NE 68198 | | | | | | | | | |
| | REY HARRIS MD | DIR | ECTOR | | 0 | | 0 | | | (|
| 983 | 075 NEBRASKA MEDICAL | 1 00 |) | | | | | | | |
| | TER 075 NEBRASKA MEDICAL | | | | | | | | | |
| | ITER | | | | | | | | | |
| | AHA,NE 68198 | | | | | | | | | |
| | N MISIUNAS | SEC | RETARY | | 0 | | 0 | | | (|
| CEN | 075 NEBRASKA MEDICAL ITER | 40 (| ,0 | | | | | | | |
| | 075 NEBRASKA MEDICAL ITER | | | | | | | | | |
| | AHA,NE 68198 | | | | | | | | | |
| 2 | Compensation of five highest-p | aid emp | loyees (other than | thos | included on line 1— | see instru | ctions). If none, e | nter" | NONE." | |
| | (a) | | Title, and aver | age | | | Contributions to | | _ | |
| Nar | me and address of each employe | e paid | hours per we | | (c) Compensatio | n I | employee benefit plans and deferred | | | e account, Ilowances |
| | more than \$50,000 | | (b) devoted to pos | ition | | (d) | compensation | ļ`. | | |
| | | | | | | | | 1 | | |
| | | | | | | | | 1 | | |
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| | | | | | | | | † | | |

Total number of other employees paid over \$50,000.

1e

2b

1d

Form 990-PF (2015)

Reduction claimed for blockage or other factors reported on lines 1a and

2 3

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5

Distributable Amount

(see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations

Part XI check here ► and do not complete this part.)

1 2a

Tax on investment income for 2015 from Part VI, line 5. Income tax for 2015 (This does not include the tax from Part VI). . .

3

4 5

6 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Qualifying Distributions (see instructions)

Part XII

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

2 A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Amounts set aside for specific charitable projects that satisfy the

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

the section 4940(e) reduction of tax in those years

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Page 8

639,378

9,591

629,787

31,489

31,489

31,489

31.489

31.489

5,823

5.823

5,823

2 3

4

5

1

2c

3

4

5

6

7

1a

1h

2

За

3b

4

5

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, line 7 | | | | 31,489 |
| | Undistributed income, if any, as of the end of 2015 | | | | |
| | Enter amount for 2014 only | | | 28,303 | |
| | Total for prior years 20 | | | | |
| | Excess distributions carryover, if any, to 2015 | | | | |
| | From 2010 | | | | |
| b | From 2011 | | | | |
| c | From 2012 | | | | |
| d | From 2013 | | | | |
| е | From 2014 | | | | |
| f | Total of lines 3a through e | | | | |
| 4 | Qualifying distributions for 2015 from Part | | | | |
| | XII, line 4 🕨 \$ 5,823 | | | | |
| а | Applied to 2014, but not more than line 2a | | | 5,823 | |
| b | Applied to undistributed income of prior years (Election required—see instructions) | | | | |
| c | Treated as distributions out of corpus (Election | | | | |
| | required—see instructions) | | | | |
| d | Applied to 2015 distributable amount | | | | |
| е | Remaining amount distributed out of corpus | | | | |
| 5 | Excess distributions carryover applied to 2015 | | | | |
| | (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 | Enter the net total of each column as indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| b | Prior years' undistributed income Subtract line 4b from line 2b | | | | |
| c | Enter the amount of prior years' undistributed | | | | |
| | income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) tax has been previously assessed | | | | |
| А | Subtract line 6c from line 6b Taxable amount | | | | |
| u | —see instructions | | | | |
| е | Undistributed income for 2014 Subtract line | | | | |
| | 4a from line 2a Taxable amount—see | | | 22.400 | |
| | instructions | | | 22,480 | |
| f | Undistributed income for 2016 Subtract | | | | |
| | lines 4d and 5 from line 1 This amount must be distributed in 2015 | | | | 31,489 |
| 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) | | | | |
| 9 | Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a | | | | |
| 10 | Analysis of line 9 | | + | | _ |
| | Excess from 2011 | | | | |
| | Excess from 2012 | | | | |
| | Excess from 2013 | | | | |
| | Excess from 2014 | | | | |
| | Excess from 2015 | | | | |
| | | | 1 | Fo | rm 990-PF (2015) |

| or | m 990-PF (2015) | | | | | Page 10 |
|--------|--|--------------------------------|---------------------|----------------------|------------------------|----------------|
| ľ | Part XIV Private Operating Found | dations (see ınstru | ictions and Part | : VII-A, questior | ו 9) | |
| la | If the foundation has received a ruling or de foundation, and the ruling is effective for 20 | | | | | |
| b | Check box to indicate whether the organizat | ion <u>is a private operal</u> | ing foundation de | scribed in section | 4942(j)(3) or | 厂 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | (e) Total |
| | income from Part I or the minimum investment return from Part X for each | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (6) 1000. |
| | year listed | | | | | |
| b | 85% of line 2a | | | | | |
| c | Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d | A mounts 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 | | | | | |
| а | "Assets" alternative test—enter (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying | | | | | |
| b | under section 4942(j)(3)(B)(i) | | | | | |
| | of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c | "Support" alternative test—enter | | | | | |
| | (1) Total support other than gross | | | | | |
| | investment income (interest, dividends, rents, payments | | | | | |
| | on securities loans (section 512(a)(5)), or royalties) | | | | | |
| | (2) Support from general public | | | | | |
| | and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| | (3) Largest amount of support from an exempt organization | | | | | |
| | (4) Gross investment income | | | | | |
| Pa | art XV Supplementary Information | 1 (Complete this | part only if th | e organizatio | n had \$5,000 o | more in |
| | assets at any time during t | | | | · · | |
| L a | Information Regarding Foundation Manager List any managers of the foundation who hav before the close of any tax year (but only if t | e contributed more th | | | | ation |
| b | List any managers of the foundation who own ownership of a partnership or other entity) o | | | | y large portion of the | ! |
| | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | | | | |
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| | | | | | | |
| 2 | Information Regarding Contribution, Grant, | Gift, Loan, Scholarshi | p, etc., Programs: | | | |
| | Check here ▶ ▼ if the foundation only make unsolicited requests for funds If the founda other conditions, complete items 2a, b, c, a | tion makes gifts, gran | | | | |
| _ | The name, address, and telephone number of | or amoul address of th | norcon to whom | annications shou | uld be addressed | |
| а | The hame, address, and telephone humber of | or email address or the | e person to whom | applications shot | na be addressed | |
| _ | | | | | | |
| b | The form in which applications should be su | bmitted and informati | on and materials t | they should includ | le | |
| c | : Any submission deadlines | | | | | |
| | | | | | | |
| d | Any restrictions or limitations on awards, s factors | uch as by geographica | al areas, charitabl | e fields, kinds of i | nstitutions, or other | |

| 3 Grants and Contributions Paid | | proved for F | uture Payment | |
|---|--|-------------------------|----------------------------------|---------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | A mount |
| Name and address (home or business) | or substantial contributor | recipient | Contribution | |
| a Paid during the year | | | | |
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| | | | | |
| Total | | | ▶ 3a | |
| b Approved for future payment | | | EVENDT DUDDOGEG OF | 20.202 |
| UNIVERSITY OF NEBRASKA FO 8712 WEST DODGE ROAD | | PUBLIC CHAR | EXEMPT PURPOSES OF RECIPIENT | 28,303 |
| OMAHA,NE 68114 | | | | |
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| | | | | |
| Total | L | | ▶ 3b | 28 303 |

| Part XVI-A Analysis of Income-Produc | ing Activitie | es | | | |
|---|----------------------|----------------|-----------------------|--------------------|--|
| Enter gross amounts unless otherwise indicated | Unrelated b | usiness income | Excluded by section | n 512, 513, or 514 | (e) Related or exempt |
| 1 Program service revenue | (a) Business code | (b) A mount | (c) Exclusion code | (d) A mount | function income (See instructions) |
| a | | | | | , |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | 10 |
| 4 Dividends and interest from securities | | | | | 2,690 |
| 5 Net rental income or (loss) from real estate | | | | | |
| a Debt-financed property.b Not debt-financed property. | | | | | _ |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | |
| 9 Net income or (loss) from special events | | | | | -9,027 |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| | | | | | |
| 11 Other revenue a UNREALIZED GAINS AND LOSSES | | | 14 | 56,153 | |
| b ROUNDING | | | 14 | 30,133 | -1 |
| с | | | | | |
| d | | | | | |
| e 12 Subtotal Add columns (b), (d), and (e) | | | | 56,153 | -6,328 |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 49,825 |
| (See worksheet in line 13 instructions to verify | calculations) | | | ' | |
| Part XVI-B Relationship of Activities to | | = | | | |
| Line No. Explain below how each activity for wh the accomplishment of the foundation's instructions) | | | | | |
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| Form 990-PF | (2015) | | | | | | | | Pag | ge 13 | |
|-------------------------|--|--|--------------|--------------------|-----------------|--------------------------------|--|-------------------------|--------------------|-----------------|--|
| Part XVI | Information Regard Noncharitable Exer | | | | actions and I | Relationships V | Vith | | | | |
| | rganization directly or indirec 01(c) of the Code (other thar | | | | | | | | Yes | No | |
| organızat | ions? | | | | | | | | | | |
| | from the reporting foundation | | | | | | | | | | |
| | 1 | | | | | | F | 1a(1) | | No_ | |
| | erassets | | | | | | • | 1a(2) | | No | |
| b Other tra | | avamnt ar | raanization | | | | | 15/11 | | No | |
| | s of assets to a noncharitable hases of assets from a nonch | | | | | | F | 1b(1) 1b(2) | | No No | |
| | al of facilities, equipment, or | | | | | | + | 1b(2) | | No | |
| | bursement arrangements | | | | | | + | 1b(4) | | No | |
| | s or loan quarantees | | | | | | F | 1b(5) | | No | |
| ` ' | mance of services or member | | | | | | H | 1b(6) | | No | |
| ` ' | f facilities, equipment, mailin | · | | | | | | 1c | | No | |
| - | wer to any of the above is "Y | • | , | | | | e fair mar | | lue | | |
| | (c) N (c) N (d) Amount involved (e) N (f) N (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (g) N (h) Amount involved (h | affiliated w | иth, or rela | • | nore tax-exempt | 5 | | | | ts | |
| b If"Yes," | complete the following sched | ule | | | | | | | | | |
| | (a) Name of organization | | (b |) Type of organiza | tion | (c) Description | on of relatio | nship | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Sign Here | ler penalties of perjury, I decl best of my knowledge and be rmation of which preparer has ****** Signature of officer or trustee | ief, it is tru any knowl | ue, correct | | | | May the return with the below | | sed on scuss th | all is /n | |
| • | Print/Type preparer's name DAVID W BAAS | Prepa | rer's Signa | ature | Date 2017-02-13 | Check if self- employed ▶ ☐ | PTIN PO | 00614 | -62 | | |
| Paid Preparer Use | Firm's name ► BAAS & ASSOCIATES PC | | | | | Firm's EIN ▶ 90- | -0777951 | L | | | |
| Only | Firm's address ▶ 9850 NICHOLAS STREET: 68114 | 50 NICHOLAS STREET SUITE 350 OMAHA, NE | | | | | | Phone no (402) 697-1040 | | | |

| TY 2015 Accounting Fees Schedule | |
|----------------------------------|--|
| Name: UNIVERSITY FAMILY PRACTICE | |

3,656

914

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

ACCOUNTING FEES-TWO RETURNS

| | EIN: 47-0 | 0741061 | | |
|----------|------------------|--------------------------|------------------------|---|
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |

914

FOUNDATION

4,570

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | | | | DL | N: 93491051006067 |
|--|-------------------|----------|--|--|--|----|-------------------|
| Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. | | | | | | | |
| TY 2015 Gain/Loss from Sale | of Other Assets S | chedule | | | | | |
| | | | | | | | |
| Name: | UNIVERSITY FAMILY | PRACTICE | | | | | |
| | FOUNDATION | | | | | | |
| EIN: | 47-0741061 | | | | | | |
| | | | | | | | |

| Name | Dat e A cquired | How Acquired | Date Sold | Purchaser Name | Gross Sales Price | Basis | Basis Met hod | Sales Expenses | Total (net) | Accumulated Depreciation |
|---------------------------------|--------------------|-----------------|-----------|-------------------|----------------------|---------|------------------|-------------------|----------------|-----------------------------|
| 12890 SHARES OF MUTUAL FUNDS | 2015-11 | PURCHASE | 2016-04 | | 229,721 | 237,515 | | | -7,794 | |
| 16460 SHARES OF MUTUAL FUNDS | 2015-11 | PURCHASE | 2016-04 | | 252,409 | 256,790 | | | -4,381 | |
| MUTUAL FUND SHARES | 2014-06 | PURCHASE | 2015-11 | | 3,149 | 1 | | | 3,148 | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | D | LN: 93491051006067 | | |
|--|------------------|------------------|--------------------|--|--|
| TY 2015 Investments Corporate Stock Schedule | | | | | |
| Name: UNIVERSITY FAMILY PRACTICE | | | | | |
| FOUNDATION | | | | | |
| EIN: 47-0741061 | | | | | |
| Name of Stock | End of Year Book | End of Year Fair | | | |

PUBLICLY TRADED STOCK

Value

605,074

Market Value

618,241

| efile GRAPHIC print - DO NOT PROCE | SS As Filed Da | a - | DLN | l: 93491051006067 |
|------------------------------------|----------------------|-----------------|------------|-------------------|
| TY 2015 Land, Etc. Schedule | | | | |
| Name | e: UNIVERSITY I | FAMILY PRACTICE | | |
| | FOUNDATION | | | |
| EII | N: 47-0741061 | | | |
| Category / Item | Cost / Other | Accumulated | Book Value | End of Year Fair |

Depreciation

7,360

Basis

7,360

EQUIPMENT AND FURNITURE

Market Value

| TY 2015 Other Expenses Schedule | | | | |
|---------------------------------|------------|-------------------|---|--|
| Name | | / FAMILY PRACTICE | _ | |
| | FOUNDATIO |)N | | |
| EIN | 47-0741061 | L | | |
| | • | | | |

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| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|--------------|--------------------------------|--------------------------|---------------------|--|
| EXPENSES | | | | |
| BANK CHARGES | | | | |
| MISC | 2,671 | | | |

| TY 2015 Other Income Schedule | | |
|-------------------------------|---------------------------------------|--|
| Name: | UNIVERSITY FAMILY PRACTICE FOUNDATION | |

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ROUNDING

| EIN: 47-074106 | 1 | | |
|-----------------------------|-----------------------------------|--------------------------|---------------------|
| Description | Revenue And Expenses Per Books | Net Investment Income | Adjusted Net Income |
| UNREALIZED GAINS AND LOSSES | 56,153 | | 56,153 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - |
|--------------------------------------|-----------------|
| TY 2015 Other Professional Fee | es Schedule |

INVESTMENT ADVISOR FEES

MISCELLANEOUS FEES

Name: UNIVERSITY FAMILY PRACTICE

2,247

53

FOUNDATION

| | EIN: 4/-0/4 | 1061 | | |
|----------|--------------------|--------------------------|------------------------|---|
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |

449

11

449

11

DLN: 93491051006067

1,798

42

| TY 2015 Taxes Schedule | | |
|------------------------|----------------------------|--|
| Name: | UNIVERSITY FAMILY PRACTICE | |
| | FOUNDATION | |

327

82

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

FEDARL EXCISE TAX

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|----------|--------|--------------------------|------------------------|---|

409