

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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.

OMB No 1545-0052 2015

Inter	nal Re	venue Service	Information about For	m 990-PF	and its separate	instructions	is at www. <i>ir</i> s		Open to Public Inspection
For	caler	idar year 2015 or tax year	beginning JUL	_1,	2015	, and e	nding	JUN 30, 2016	
Nai	me of	f foundation						A Employer identification	number
V	ΈT	TER FOUNDATI	ON						
		ACK VETTER						47-0762483	
		and street (or P O box number i	of mail is not delivered to street	address)			Room/suite	B Telephone number	
20220 HARNEY STREET							(402) 895-	3932	
_		own, state or province, cou		octal cod					
			3022	osiai cou	t			C If exemption application is p	ending, check here
					1.1.1.1.1		L		
G (леск	all that apply:	Initial return		Initial return of a fo	ormer public d	narity	D 1. Foreign organizations	s, cneck nere
			Final return	\equiv	Amended return			2 Foreign organizations me	setung the 85% test
			Address change		Name change			2 Foreign organizations me check here and attach co	mputation
H_(Check	type of organization:	X Section 501(c)(3) ex					E If private foundation sta	tus was terminated
<u>L</u>	_ Se	ection 4947(a)(1) nonexem	pt charitable trust	Other tax	able private founda	ation		under section 507(b)(1)	(A), check here
I Fa	air ma	arket value of all assets at e	end of year J Accounti	ng metho	d: X Cash	Accr	ual	F If the foundation is in a	60-month termination
(fi	rom i	Part II, col (c), line 16)	01	ther (spec	ify)			under section 507(b)(1)	
	\$	1,871	L , 155 . (Part I, colu	mn (d) m	ust be on cash i	basis)			
	art I	Analysis of Revenue an	d Expenses	1	Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columnecessarily equal the amount	mns (b), (c), and (d) may not its in column (a))		nses per books	inco		income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grant	ts etc received		187,454.				, , , , , ,
	2		n is not required to attach Sch. B				~~~~~		
	3	Interest on savings and tempo	•		1,268.		1,268.		STATEMENT 1
		cash investments		-	1,200.		1,200.		DIVIEWENI I
	4	Dividends and interest fro	om securities	<u> </u>					
	5a	Gross rents		ļ				DEOF	
	b	Net rental income or (loss)		-				H TEUE!	
<u>a</u>	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all								
an a	b	assets on line 6a						NOV 14 2	
Revenue	7	Capital gain net income (from	Part IV, line 2)	<u> </u>			0.	面 NUV 1 4 2	
-	8	Net short-term capital gai	n					<u> </u>	
	9	Income modifications						LLUGDENT	117-1-1
	10a	Gross sales less returns and allowances							
	b	Less Cost of goods sold							
	C	Gross profit or (loss)					-	"	
	11	Other income			252,836.		0.	252,836.	STATEMENT 2
	12	Total Add lines 1 throug	h 11		441,558.		1,268.	252,836.	
	13	Compensation of officers, dire	•		0.		0.	0.	0.
	14	Other employee salaries a							•
	15	Pension plans, employee	•						
တ္တ		Legal fees	Delicilia						
Š	loa								
ĝ	0	Accounting fees							
Ę	_ C	Other professional fees							-
and Administrative Expenses	17		cm: ^		T 100			F 400	
фa	18	Taxes	STMT 3	<u> </u>	7,123.		0.	7,123.	0.
ir	19	Depreciation and depletio	n		•				_
Ē	20	Occupancy							
¥	21	Travel, conferences, and							
ä	22	Printing and publications							
gr ;	23	Other expenses	STMT 4		102,391.		0.	102,391.	0.
Operating	24	Total operating and adm	inistrative						
ě		expenses Add lines 13 ti	hrough 23		109,514.	i	0.	109,514.	0.
ō	25	Contributions, gifts, grant			117,756.				1,117,756.
	26	Total expenses and disb							
	-	Add lines 24 and 25		1.	227,270.		0.	109,514.	1,117,756.
_	27		12 [·]		,,				
		Excess of revenue over expen		_	785,712.				
		Net investment income (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1,268.	 	
	1	Adjusted net income (it no					_,	143,322.	
_				•					•

Form **990-PF** (2015)

47-0762483

Page 2

Part	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of y	f year	
Pari	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1	Cash - non-interest-bearing				
2		1,201,260.	437,331.	437,331.	
	Accounts receivable ►				
"	Less: allowance for doubtful accounts				
	Pledges receivable ►				
"	Less: allowance for doubtful accounts				
_ ا			-		
5					
6	, , ,	ţ			
	disqualified persons				
7					
	Less: allowance for doubtful accounts ▶	50,000.	50,000.	50,000.	
ম 8	Inventories for sale or use				
Assets	Prepaid expenses and deferred charges				
¥ 10:	Investments - U.S. and state government obligations				
	Investments - corporate stock STMT 5	183,634.	148,974.	1,370,947.	
	: Investments - corporate bonds	•	•	<u> </u>	
11	·			••	
' '	Less accumulated depreciation				
12				•	
	Investments - other				
13				·····	
14			}		
١.,		260 462	202 220	10 077	
15	,	269,462.	282,339.	12,877.	
16		4	242 544	4 455	
-	instructions. Also, see page 1, item I)	1,704,356.	918,644.	1,871,155.	
17	Accounts payable and accrued expenses		,		
18	Grants payable				
ഗ്ല 19	Deferred revenue				
∄ 20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities 51 20 21	Mortgages and other notes payable				
₂₂ ا	Other liabilities (describe				
23	Total liabilities (add lines 17 through 22)	0.	0.		
	Foundations that follow SFAS 117, check here				
	and complete lines 24 through 26 and lines 30 and 31.				
8 24	-				
or Fund Balanc	Temporarily restricted				
Ba 26	Permanently restricted				
בַּן בַּ	Foundations that do not follow SFAS 117, check here				
<u>ا</u> چ	·				
ارة ا	and complete lines 27 through 31.	0.	0.		
St 27	Capital stock, trust principal, or current funds	0.			
98 28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.		
Net Assets	Retained earnings, accumulated income, endowment, or other funds	1,704,356.	918,644.		
≝ 30	Total net assets or fund balances	1,704,356.	918,644.		
31	Total liabilities and net assets/fund balances	1,704,356.	918,644.		
Part	III Analysis of Changes in Net Assets or Fund Ba	alances			
4 Tot	b) not accets or fund halances at heginning of year. Part II, column (a), line 3	20			
	if net assets or fund balances at beginning of year - Part II, column (a), line 3	JU .		1 701 256	
	st agree with end-of-year figure reported on prior year's return)			1,704,356.	
	er amount from Part I, line 27a		2	<785,712.	
	er increases not included in line 2 (itemize)		3	0.	
	lines 1, 2, and 3		4	918,644.	
	reases not included in line 2 (itemize)		5	0.	
6 Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	tumn (b), line 30	6	918,644.	
				Form 990-PF (2015)	

Form 990-PF (2015) **% JACK VETTER**

Part IV Capital Gain	s and Lo	sses for Tax on In	vestment	Income						
(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) D	(b) How acquired P - Purchase D - Donation		(c) Date : (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)	
1a			·							
b N	ONE									
<u>c</u>		<u>-</u>								
<u>d</u>										
<u>e</u>	1							41.0		
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		t or other basis xpense of sale					ain or (loss s (f) minus (
<u>a</u>	ļ		_							
<u>b</u>										
<u>C</u>										
<u>d</u>				-	-				·	_
Complete only for assets show	Milita dain in	column (b) and owned by t	the foundation	on 12/31/69			///	Coupe (C	ol (b) corp	minue
Complete only for assets show	· 1	(j) Adjusted basis		cess of col. (i)					ol. (h) gaın not less tha	
(i) F.M.V. as of 12/31/69	<u> </u>	as of 12/31/69		col. (j), if any				Losses	(from col. (h))
<u>a</u>	_								_	
<u> </u>	_									
<u>C</u>	_									
<u>d</u>			=			_				
<u>e</u>		<i>C</i>	D		_					
2 Capital gain net income or (net	capital loss)	If gain, also enter $\left\{\begin{array}{l} \text{If (loss), enter -0-} \end{array}\right.$	in Part I, line In Part I, line	<i>1</i> 7	}	2				
3 Net short-term capital gain or (d (6):		`					
If gain, also enter in Part I, line		c).			 					
If (loss), enter -0- in Part I, line Part V Qualification	I Inder S	Section 4940(e) for	Reduced	Tay on Net	Inv	estme	nt Inc	ome		
(For optional use by domestic priv									·	
(For optional use by domestic priv	ale louridali	ons subject to the section 4	1340(a) lax oli	Het hivesument h	COITE	5. <i>)</i>				
If section 4940(d)(2) applies, leave	e this part bl	ank.								
Was the foundation liable for the s	ection 4942	tax on the distributable am	ount of any ve	ar in the base pe	riod?					Yes X No
If "Yes," the foundation does not q										
1 Enter the appropriate amount	ın each colu	mn for each year; see the ir	istructions be	fore making any e	entries	S.				
(a) Base period years		(b)			(c)				Distrit	(d) oution ratio
Calendar year (or tax year begin	nning in)	Adjusted qualifying dist		Net value of no					(col. (b) div	rided by col. (c))
2014			4,251.			,295				.354733
2013			6,483.			<u>,035</u>				.420733
2012			8,066.			,990		_		.265266
2011			6,577.			<u>,077</u>				.325668
2010		65	<u>3,850.</u>			<u>,961</u>	, 311	•		.333374
0 T-1-1-6line 4 enlines (d)										1.699774
2 Total of line 1, column (d)	na E waar ba	no norted - duado the total c	on line 2 by 5	or by the number	r of vo	are		2		1.03377
3 Average distribution ratio for the foundation has been in exist			on line 2 by 5,	or by the number	oi ye	ais		3		.339955
the loundation has been in exis	3161106 11 1633	ilian 5 years						 		• 55555
4 Enter the net value of nonchard	tahle-use as	sets for 2015 from Part X	line 5					4		2,125,233
4 Enter the net value of nononan	14010 030 43	3013 101 20 10 1101111 411 74,						<u>'</u>	-	2/220/200
5 Multiply line 4 by line 3								5		722,484
o manapiy milo roy milo o										
6 Enter 1% of net investment inc	ome (1% of	Part I, line 27b)						6		13
	,									
7 Add lines 5 and 6								7		722,497
8 Enter qualifying distributions for								8		1,117,756
If line 8 is equal to or greater the See the Part VI instructions.	han line 7, ch	neck the box in Part VI, line	1b, and comp	lete that part usir	ng a 1	% tax rat	e.			

VETTER FOUNDATION 47-0762483 Form 990-PF (2015) JACK VETTER Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here
and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: 13. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X 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-) 13. 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: 84. a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a 6b b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6с d Backup withholding erroneously withheld 84. 7 Total credits and payments, Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ____ if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 71 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 71. Refunded ▶ Enter the amount of line 10 to be: Credited to 2016 estimated tax Part VII-A Statements Regarding Activities No Yes 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X 1a any political campaign? X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b 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. X c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 . (2) On foundation managers. ▶ \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ X 2 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 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 4a X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? X 4b b If "Yes," has it filed a tax return on Form 990-T for this year? X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T.

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?
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
8a Enter the states to which the foundation reports or with which it is registered (see instructions)
NE
b 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
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

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:

By language in the governing instrument, or

Form **990-PF** (2015)

X

X

X

7

8b

	VETTER FOUNDATION			
	990-PF (2015) % JACK VETTER 47-076	<u> 2483</u>		Page 8
Pa	rt VII-A Statements Regarding Activities (continued)			
]	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	Į l		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► WWW.VETTERHEALTHSERVICES.COM/FOUNDATION.HTM			
14	The books are in care of ► ELDORA VETTER Telephone no. ► (402)	895-	393	2
17	Located at ► 20220 HARNEY STREET, ELKHORN, NE ZIP+4 ►6			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			\Box
IJ	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
16		16		X
	securities, or other financial account in a foreign country?	10 1		- 22
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required		_	<u> </u>
۲ã		\neg	Vaa	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	\vdash	Yes	NO
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			!
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			ĺ
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			l
	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)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
٠	before the first day of the tax year beginning in 2015?	1c		х
0	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
2				
	defined in section 4942(j)(3) or 4942(j)(5)): 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			
ě				
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
t	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.) N/A	2b		-
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		i	
	D			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
ı	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			i
	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	3b		
4:	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	L	Х
	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

· VETTER FOUNDATION					
orm 990-PF (2015) % JACK VETTER			<u>47-07624</u>	83	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to:				1	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	- 1	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			- 1	
4945(d)(4)(A)? (see instructions)		Ye	s X No	-	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			- 1	
the prevention of cruelty to children or animals?		Ye	s X No	- 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations	ľ		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	rom the tax because it maintai	ined			
expenditure responsibility for the grant?		[/A	s No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	•	Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trust		nagers, Highly			
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their	compensation.		· · · · · · · · · · · · · · · · · · ·	,	
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e) [Expense Int, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allo	wances
			•		
			•	İ	
SEE STATEMENT 8		0.	0.		0.
				1	
				<u> </u>	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) i	Expense unt, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deferred compensation	allo	wances
NONE					
	I	1	ı	1	

Form **990-PF** (2015)

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

VETTER FOUNDATION % JACK VETTER

Form 990-PF (2015)	7-0762	483 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 CHARITABLE SUPPORT OF OTHER 501(C)(3) ORGANIZATION EXEMPT ACTIVITIES INCLUDING ASSEMBLY OF GOD MISSIONS AND CHURCHES	-	,117,758.
2 EDUCATION AND TRAINING ACTIVITIES FOR PERSONNEL IN THE		
HEALTH CARE AND LONG-TERM CARE INDUSTRIES		57 50 <i>6</i>
3		57,596.
		·-·
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions. 3		
Total. Add lines 1 through 3	>	0.

% JACK VETTER

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndatior	is, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	1,434,280.
	Average of monthly cash balances	1b	723,317.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,157,597.
е	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	2,157,597.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	32,364.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,125,233.
6	Minimum investment return, Enter 5% of line 5	6	106,262.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certa	n
1	Minimum investment return from Part X, line 6	1	106,262.
2a	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.) 2b 7,123.	- 1	
C	Add lines 2a and 2b	2c	7,136.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	99,126.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	99,126.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	99,126.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,117,756.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,117,756.
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	13.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	1,117,743.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies	for the section
	4940(e) reduction of tax in those years.		

Form **990-PF** (2015)

Page 9

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				99,126.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
ь Total for prior years:		0		
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010 556, 075.				
b From 2011 572,817.		į		
c From 2012 428, 564.				
d From 2013 754,730.				
e From 2014 699, 513.				
f Total of lines 3a through e	3,011,699.			
4 Qualifying distributions for 2015 from	3,011,033.	·	, , , , , , , , , , , , , , , , , , , ,	
Part XII, line 4: ► \$ 1,117,756.				
a Applied to 2014, but not more than line 2a		İ	0.	
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	•			99,126.
e Remaining amount distributed out of corpus	1,018,630.			77,1200
5 Excess distributions carryover applied to 2015	0.			0.
(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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,030,329.			
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.	į	
e Undistributed income for 2014. Subtract line				
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				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	556,075.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	3,474,254.			
10 Analysis of line 9:				
a Excess from 2011 572,817.				
b Excess from 2012 428,564.				
c Excess from 2013 754,730.				
d Excess from 2014 699,513.				
e Excess from 2015 1,018,630.				
523581 11-24-15				Form 990-PF (2015)

9	T አ C	ז אי	ፖድጥጥ	D.D.

Part XIV Private Operating F		tructions and Part VI	I-A, question 9)	N/A	02200
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective for					
b Check box to indicate whether the found			in section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for		· · · · · · · · · · · · · · · · · · ·		<u> </u>	
each year listed					ļ
b 85% of line 2a			 		
c Qualifying distributions from Part XII,				***************************************	
line 4 for each year listed					
d Amounts included in line 2c not		•			* *
used directly for active conduct of			1		
exempt activities	İ				
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				1	
• •					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:		·			
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		-			
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Complet	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during t	he year-see instri	uctions.)			
1 Information Regarding Foundation	n Managers:		.		
a List any managers of the foundation wh			tributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed n	nore than \$5,000). (See se	ection 507(d)(2).)			
NONE					
b List any managers of the foundation wh			(or an equally large porti	on of the ownership of a p	partnership or
other entity) of which the foundation ha	s a 10% or greater interest	ι.			
NONE					
2 Information Regarding Contribut					
Check here ► X if the foundation of					
the foundation makes gifts, grants, etc.	<u>`</u>				0 0.
a The name, address, and telephone num	ber or e-mail address of th	ie person to whom app	lications should be addre	ssed:	
			handa a da da		
b The form in which applications should to	e submitted and informati	ion and materials they s	nould include:		
c Any submission deadlines:					
					
d Any restrictions or limitations on award	s, such as by geographical	l areas, charitable fields	, kinds of institutions, or	other factors:	

Page 11

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient or substantial contributor a Paid during the year NONE RELIGIOUS/CHARITABLE ABIDE MINISTRIES OTHER PUBLIC CHARITY 5,000, AFRICA'S HOPE NONE OTHER PUBLIC RELIGIOUS/CHARITABLE CHARITY 12,500. NONE ALEGENT CREIGHTON HEALTH OTHER PUBLIC RELIGIOUS/CHARITABLE 3,500. CHARITY NONE OTHER PUBLIC RELIGIOUS/CHARITABLE AMERICAN LUNG ASSOCIATION CHARITY 1,250, OTHER PUBLIC ASSEMBLY OF GOD MISSIONS RELIGIOUS/CHARITABLE NONE CHARITY 473 300. SEE CONTINUATION SHEET(S) **▶** 3a 117 756 Total b Approved for future payment NONE Total

Form 990-PF (2015)

% JACK VETTER

LINUI YIUSS	amounts unless otherwise indirated	Unrelated b	usiness income		by section 512, 513, or 514	(e)
1 Program		(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
•		0000	 -	 		
-					· ·	
						-
·	DUCATION AND TRAINING Fees and contracts from government agencies subership dues and assessments erest on savings and temporary cash estimates to rental income or (loss) from real estate: Debt-financed property Not debt-financed property Not debt-financed property Her investment income or (loss) from seles of assets other an inventory and inventory to time all estates on an inventory to time all estates on sprofit or (loss) from sales of inventory their revenue: Districts Amount seeds Amount seeds 14 1, 268. Amount seeds 14 1, 268. 16 2 1, 268. Amo					
_						- -
· -					-	
g Fees	and contracts from government agencies					
•						
				14	1.268.	
	• • • • • • • • • • • • • • • • • • • •					
				1		
		-				
	, , ,	-		 		
	, , , ,					
				1		
						-
	•					
	•			01	212 894	
	•			• •	212,034.	
· ·				+		<u> </u>
		-		+ +		•
				 -		
				 		
e	I Add columns (b) (d) and (s)		<u> </u>	 	214 162	0
		<u> </u>				214,162
					13	214,102
	hoot in line 40 instructions to verify coloulations \					·
(See workst		to the Accom	plishment of Ex	kempt	Purposes	
(See workst	/I-B Relationship of Activities to Explain below how each activity for which income	ome is reported in c	olumn (e) of Part XVI-A			plishment of
(See works) Part XV Line No. ▼	Figure 1. Relationship of Activities 1. Explain below how each activity for which income the foundation's exempt purposes (other than	ome is reported in c by providing funds	olumn (e) of Part XVI-A for such purposes).	\ contribut	ed importantly to the accom	
Part XV Line No. V 1A	Explain below how each activity for which incomplete foundation's exempt purposes (other than THE VETTER FOUNDATION	ome is reported in c i by providing funds SUPPORTS	olumn (e) of Part XVI-A for such purposes). VARIOUS EI	contribut	ed importantly to the accom	TIES IN THE
Part XV Line No. V	Explain below how each activity for which income the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
Part XV Line No. TA	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
Part XV Line No. V 1A	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
Part XV Line No. TA	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
Part XV Line No. TA	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
(See works) Part XV Line No. ▼ 1A	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
(See works) Part XV Line No. ▼ 1A	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
(See works) Part XV Line No. ▼ 1A	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
Part XV Line No. IA	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
Part XV Line No. IA	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
Care works Part XV Line No. 1A	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
Care works Part XV Line No. 1A	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE
Care works Part XV Line No. 1A	Explain below how each activity for which incomplete the foundation's exempt purposes (other than THE VETTER FOUNDATION HEALTH CARE AND NURSING EDUCATIONAL TRAINING P.	ome is reported in c by providing funds SUPPORTS G HOME IN	olumn (e) of Part XVI-A for such purposes). VARIOUS EL	CONTRIBUTE OUCAT CHROU	ed importantly to the accom IONAL ACTIVI GH SPONSORSH	TIES IN THE

. '		ER FOUNDATION						
Form 990-PF (2		CK VETTER	and Tuona sations	and Dalatianal	47-07			age 13
Part XVII	Information Re Exempt Organ	egarding Transfers To	and Transactions a	and Relationsr	ilps with Noncr	iaritable	•	
4 Did the ex	<u>-</u>				504(-) -6		Yes	No
		rectly engage in any of the follow			on 50 I(c) of		165	140
	•	s)(3) organizations) or in section 5	- · · · · · · · · · · · · · · · · · · ·	lizations				
	· · · · · · · · · · · · · · · · · · ·	lation to a noncharitable exempt o	rganization or.			4.40		3,7
(1) Cash						1a(1)		X
(2) Othe						1a(2)		X
b Other tran								
	s of assets to a noncharita					1b(1)		X
٠,		oncharitable exempt organization				1b(2)		X
	al of facilities, equipment,					1b(3)		X
	bursement arrangements	3				1b(4)		X
	s or loan guarantees	bbb				1b(5)		X
		embership or fundraising solicitati				1b(6)		X
		ailing lists, other assets, or paid er				1c		X
		"Yes," complete the following sch					ets,	
		oundation. If the foundation received		ie in any transaction	or snaring arrangemen	t, snow in		
	(b) Amount involved	other assets, or services received (c) Name of noncharitab		(4)				
(a) Line no	(b) Amount involved	<u> </u>	ie exempt organization	(0) Description	of transfers, transactions, a	nd sharing an	rangeme	nts
-		N/A		+				
					· · · · · · · · · · · · · · · · · · ·			
		-						
	· · · ·			-				
		-						
								
	•							
0 - 1 - 4 - 4 - 4 - 4		Al -#1-1-1 16 1-1-1 1						
		tly affiliated with, or related to, on		zations described			72	٦
	• • • • • •	r than section 501(c)(3)) or in sec	Mon 5277			Yes	ĻĀ	No
b il Yes, ci	omplete the following sch (a) Name of org		(b) Type of organization	1	c) Description of relatio	nehin		
	 	janization	(b) Type of Organization	(0	Description of relatio	ПЗПР		
	N/A							
			-					
				-				
Under	penalties of periury. I declare	that I have examined this return, includi	ing accompanying schedules and	statements, and to the h	est of my knowledge —			
		mplete Declaration of preparer (other the			an any kaomindra	May the IRS or return with the		
Here		6 12 71 15	-1	DIRECT	I :	s <u>hown</u> below	(see ins	tr)?
	nature of officer or trustee	o com	//-/-/6 Date	Title	UR	X Yes		J No
	Print/Type preparer's na				Check I if PTII	N		
•	- Time 13 po proparor 3 no		2/1/		self- employed	•		
Paid	BRIAN M. C	GIDKES //	$\sim u/\sim$	10/28/16		00400	Q 7 0	
Preparer	Firm's name ► SEI		<u> </u>	1 7 7 7 7 1	Firm's EIN ► 47 –			
Use Only	THIN SHAHE P SEI	M COMMOON, LIDE			101112 EIN 🛌 🗗 📜	00313	T)	
	Firm's address ▶ 1 Q	081 BURT STREET	የ ያጠጥቱ 200		<u> </u>			
		AHA, NE 68022-4			Phone no. (402)330-	266	0
	<u>. Jn</u>			·	. none no. 1402	Form 990		
								,

Part XV Supplementary Informati	-			
3 Grants and Contributions Paid During the		· · · · · · · · · · · · · · · · · · ·		
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	Sona Button	
ASSISTANCE LEAGUE OF OMAHA	NONE	OTHER PUBLIC CHARITY	RELIGIOUS/CHARITABLE	11,000
BELLEVUE UNIVERSITY	NONE	OTHER PUBLIC	EDUCATIONAL	2,000
COLUMBUS COMMUNITY FOUNDATION	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	2,500
COMMUNITY 360	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	2,200
CONVOY OF HOPE	NONE	OTHER PUBLIC CHARITY	RELIGIOUS/CHARITABLE	50,500
FOODBANK OF THE HEARTLAND	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	
	101111	CHARITY	NABIOTOGO, GIANTINDED	3,000
ANGELS AMONG US	NONE	OTHER PUBLIC CHARITY	RELIGIOUS/CHARITABLE	1,250
HEARTLAND FAMILY SERVICES	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	
		CHARITY		1,500
HOMES FOR HOPE	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	24,500
HOPS FOR HARMONY	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	2,500
Total from continuation sheets				622 206

			O DACK V
1	Part XV	Supplementary	Information

3 Grants and Contributions Paid During the				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Maine and address (nome of business)	or substantial contributor	recipient		
IOWA HEALTHCARE ASSOCIATION	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	12,000
BETHEL ASSEMBLY OF GOD CHURCH	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	2,791
· · · · · · · · · · · · · · · · · · ·		CHARITI		2,131,
CHILDRENS HOSPITAL	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	1,750
MERRYMAKERS	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	12,500
MISCELLANEOUS CHARITIES	NONE	OTHER PUBLIC CHARITY	RELIGIOUS/CHARITABLE	54,170
NDC ASSEMBLY OF GOD	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	12,000
NEBRASKA HEALTH CARE FOUNDATION	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	1,000
ONE CHILD MATTERS	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	32,045
OPEN DOOR MISSION	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	11,000
THE BETHLEHEM HOUSE	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	2,000

Part XV Supplementary Information	on			
3 Grants and Contributions Paid During the				
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	
SPIRIT OF LIFE ASSEMBLY OF GOD	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	27,000.
QUALITY LIVING	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	3,000.
ROCK COUNTY COMMUNITY FUND	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	12,500.
SALVATION ARMY	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	5,000.
SPECIAL OLYMPICS NEBRASKA	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	1,000.
TED E BEAR HOLLOW	NONE	OTHER PUBLIC	RELIGIOUS/CHARITABLE	1,000,
YMCA OF GREATER OMAHA	NONE	OTHER PUBLIC CHARITY	RELIGIOUS/CHARITABLE	1,000,
VILLAGE NORTHWEST	NONE	OTHER PUBLIC CHARITY	RELIGIOUS/CHARITABLE	5,000.
WATER FOR THE WORLD	NONE	OTHER PUBLIC CHARITY	RELIGIOUS/CHARITABLE	275,500.
YOUTH FOR CHRIST	NONE	OTHER PUBLIC CHARITY	RELIGIOUS/CHARITABLE	16,000.
Total from continuation sheets		· · · · · · · · · · · · · · · · · · ·		

		8	JACK	VETTER
$-$ 2 \sim $^{-}$	Commissions		f	

Part XV Supplementary Information			· · · · · · · · · · · · · · · · · · ·	Т
3 Grants and Contributions Paid During the	If recipient is an individual	<u> </u>	<u> </u>	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Manie and address (nome of business)	or substantial contributor	recipient		
NEBRASKA HEALTH CARE ASSOCIATION	NONE	OTHER PUBLIC CHARITY	EDUCATIONAL	33,000,
		CHARITI		33,000.
		-		
				-
				,
				+
Total fram agaticustics about				<u> </u>
Total from continuation sheets				1

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

Name of the organization

VETTER FOUNDATION

% JACK VETTER

Employer identification number

47-0762483

Organization type (che	eck 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
•	zation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or nany one contributor Complete Parts I and II See instructions for determining a contributor's total contributions
Special Rules	
sections 509(any one contr	zation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from ributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, 0-EZ, line 1. Complete Parts I and II
year, total cor	zation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the attributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for no forcuelty to children or animals. Complete Parts I, II, and III
year, contribu is checked, ei purpose Do r	zation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the intions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box inter here the total contributions that were received during the year for an exclusively religious, charitable, etc., not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively intable, etc., contributions totaling \$5,000 or more during the year.

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

Employer identification number

47-0762483

Part I Co	ontributors (see instruction	ns) Use duplicate copies of Pa	art I if additional space is needed
-----------	------------------------------	--------------------------------	-------------------------------------

			,
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VETTER HOLDING, INC. 20220 HARNEY STREET ELKHORN, NE 68022	\$ <u>153,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	VETTER LEASING SERVICES 20220 HARNEY STREET ELKHORN, NE 68022	\$ 9,700.	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)
(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

VETTER FOUNDATION

art II	Noncash Property (see instructions) Use duplicate copies of P	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
		\$	
(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
_		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

lame of organ			Employer identification number			
	FOUNDATION		47 0762492			
<u>JACK</u> Part III	VETTER Exclusively religious charitable, etc., contr	butions to organizations described	47-0762483 I in section 501(c)(7), (8), or (10) that total more than \$1,000 for			
ı arı m	the year from any one contributor. Complete of	nlumns (a) through (e) and the follo	WIND line entry. For organizations			
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additional	, charitable, etc., contributions of \$1,000 o	r less for the year (Enter this into once)			
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_						
-						
-						
		(e) Transfer of gi	tt en en en en en en en en en en en en en			
	Transferee's name, address, an	d 7ID . 4	Relationship of transferor to transferee			
	Hansielee's Haille, address, an	U ZIF + 4	nelationship of transfer of to transferee			
-						
-						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I	(S) i dipose oi giit		(4) 55551 (21.15.15.15.15.15.15.15.15.15.15.15.15.15			
-						
						
-						
	(e) Transfer of gift					
	(c)					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
-						
-						
-						
(a) No.		. <u> </u>				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-						
-		(-) T				
İ		(e) Transfer of gi	π			
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
-						
(a) No.	-					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Parti		<u> </u>				
-		··········				
		(e) Transfer of gi	ft			
1		17ID 4	Balance and the second			
	Transferee's name, address, an	<u>d ZIP + 4</u>	Relationship of transferor to transferee			
-						
-						
-						

FORM 990-PF INTEREST ON SAVI	INGS AND TE	MPORARY	CASH :	INVESTMENTS	STATEMENT 1
SOURCE	REV	A) ENUE BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST		1,268.		1,268.	1,268.
TOTAL TO PART I, LINE 3		1,268.		1,268.	1,268.
FORM 990-PF	OTHER	INCOME			STATEMENT 2
DESCRIPTION		(A) REVENT PER BOO		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS		252	2,836.	0	. 252,836.
TOTAL TO FORM 990-PF, PART I	, LINE 11 =	25:	2,836.	0	252,836.
FORM 990-PF	TA	XES			STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	NET II	B) NVEST- INCOME	(C) ADJUSTED NET INCOM	
TAXES	7,123	-	0	7,12	3. 0.
TO FORM 990-PF, PG 1, LN 18	7,123	3.	0	7,12	3. 0.
FORM 990-PF	OTHER	EXPENSE	S		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME		
MISCELLANEOUS PROGRAM CONFERENCE EXPENSES	4,641 57,596		0		
VETTER FOUNDATION GOLF CLASSIC 2016 OFFICE SUPPLIES	39,942 212		0 0	•	
TO FORM 990-PF, PG 1, LN 23	102,391	. •	0	. 102,39	1. 0.

FORM 990-PF CO	CORPORATE STOCK		STATEMENT	5	
DESCRIPTION		BOOK VALUE	FAIR MARKE	r	
VETTER HOLDING, INC. COMMON STOCK	148,974.	1,370,947.			
TOTAL TO FORM 990-PF, PART II, LI	148,974.	1,370,947.			
FORM 990-PF DEPRECIATION OF ASSI	ETS NOT HELD FOR	RINVESTMENT	STATEMENT	6	
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUI	2	
TRAILER	8,656.	8,656.		0.	
TOTAL TO FM 990-PF, PART II, LN 14	8,656.	8,656.		0.	
FORM 990-PF	OTHER ASSETS		STATEMENT	7	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET	Г	
EQUIPMENT - WFTW ESTIMATED TAX PAYMENTS	269,462.	269,462. 12,877.	12,87	0. 77.	
TO FORM 990-PF, PART II, LINE 15	269,462.	282,339.	12,877.		

	T VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			STATEMENT 8	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
JACK D. VETTER 22790 LINCOLN ROAD GRETNA, NE 68028	PRESIDENT 0.00	0.	0.	0.	
ELDORA D. VETTER 22790 LINCOLN ROAD GRETNA, NE 68028	VICE PRESIDENT 0.00	0.	0.	0.	
TODD VETTER 9276 S. 222ND STREET GRETNA, NE 68028	DIRECTOR 0.00	0.	0.	0.	
VICKI VETTER 1201 N. 182ND COURT LINCOLN, NE 68527	DIRECTOR 0.00	0.	0.	0.	
DENITH D. VETTER 11420 S. 216TH STREET GRETNA, NE 68028	DIRECTOR 0.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAG	E 6, PART VIII	0.	0.	0.	

2015 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Current Year Deduction	0 0	
Current Sec 179	0	
Accumulated Depreciation	8,656.	
Basis For Depreciation	8,656.	
Reduction In Basis	0	
Bus % Excl		
Unadjusted Cost Or Basis	8,656.	
Line	17	
Life		•
Method	100DB	
Date Acquired	051905200DB5.00	
Description	1TRAILER * TOTAL 990-PF PG 1 DEPR	
Asset No	ਜ	

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

25