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OMB No 1545-0052

Return of Private Foundation

Form 990-PF Department of the Treasury

Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. 2016

Open to Public

| | | | | | | | | Inspection |
|--------------------|-------------------|--|----------------------------|------------------------------|----------|------------------------|---|-------------------------|
| For | caler | ıdar year 2016, or tax year be | ginning 01-01-20 | 16 , aı | nd er | nding 12-31- | 2016 | |
| | e of fou | ndation Foundation | | | | A Employer ıd | entification numbe | • |
| | | : RECKMEYER | | | | 40-0002257 | | |
| Num | ber and | street (or P O box number if mail is not de up Drive | livered to street address) | Room/suite | | B Telephone nu | mber (see instruction | is) |
| 1, | JUI Gali | ар Бп v e | | | | (402) 938-6220 |) | |
| | or town ha, NE | , state or province, country, and ZIP or forei | ıgn postal code | 1 | | C If exemption | application is pending | ı. check here |
| Ollia | iia, ivi | | | | | | application to political | ▶ □ |
| G Ch | neck all | l that apply | ☐ Initial return of a | former public charity | | D 1. Foreign or | ganızatıons, check he | re 📗 |
| | | ☐ Final return | ☐ Amended return | | | | rganizations meeting k here and attach cor | |
| | | ☐ Address change | ☐ Name change | | | E If private for | undation status was t | erminated \Box |
| _ | | | c)(3) exempt private f | | | under sectio | n 507(b)(1)(A), chec | k here ▶ Ш |
| | | 4947(a)(1) nonexempt charitable truet value of all assets at end | | ✓ Cash ☐ Accru | | E If the founds | ation is in a 60-month | tormination — |
| of ' | year <i>(f</i> . | rom Part II, col (c), | Other (specify) | Casii Li Acciu | ıaı | | n 507(b)(1)(B), checl | |
| line | 9 16)▶ | | art I, column (d) must | be on cash basis) | | | | |
| Pa | rt I | Analysis of Revenue and Exp | Denses (The total | | | | | (d) Disbursements |
| | | of amounts in columns (b), (c), and (d) m | nay not necessarily | (a) Revenue and expenses per | (b) | Net investment income | (c) Adjusted net income | for charitable purposes |
| | | equal the amounts in column (a) (see inst | tructions)) | books | | meenie | mesme | (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , recesschedule) | eived (attach | 1,299,200 | | | | |
| | 2 | Check ▶ ☐ If the foundation is not | required to attach | | | | | |
| | _ | Sch B | | | | | | |
| le e | 3 | Interest on savings and temporary ca | | 437 | | 437 | 437 | |
| | 4 | Dividends and interest from securitie | s | 10,865 | | 10,865 | 10,865 | |
| | 5a b | Gross rents | | | | | | |
| | 6a | Net gain or (loss) from sale of assets | not on line 10 | -34 | | | | |
| Revenue | ь | Gross sales price for all assets on line | | | | | | |
| Şe. | 7 | Capital gain net income (from Part IV | - | | | 498,745 | | |
| ш. | 8 | Net short-term capital gain | · · | | | · | | |
| | 9 | Income modifications | | | | | | |
| | 10a | Gross sales less returns and allowand | ces | | | | | |
| | ь | Less Cost of goods sold | | | | | | |
| | С | Gross profit or (loss) (attach schedule | e) | | | | | |
| | 11 | Other income (attach schedule) . | | 6,057 | | | | |
| | 12 | | | 1,316,525 | <u> </u> | 510,047 | 11,302 | |
| | 13 | Compensation of officers, directors, t | rustees, etc | 125,001 | | | | 125,001 |
| _ | 14 | Other employee salaries and wages | | 205,054 | - | | | 205,054 |
| Ses | 15 16a | Pension plans, employee benefits . Legal fees (attach schedule) | | 36,643 4 6 | - | 11 | 11 | 36,643 |
| Expenses | b | Accounting fees (attach schedule) | | 9 7,665 | | 1,916 | | 5,749 |
| Ε× | C | Other professional fees (attach sched | | 9 2,735 | - | 684 | · · | 2,051 |
| and Administrative | 17 | Interest | · | 2,733 | | | 301 | |
| trat | 18 | Taxes (attach schedule) (see instruct | | 1,620 | | | | 1,620 |
| <u> </u> | 19 | Depreciation (attach schedule) and d | * | <u> </u> | | | | |
| Ē | 20 | Occupancy | | | | | | |
| ĕ | 21 | Travel, conferences, and meetings . | | 695 | | | | 695 |
| anc | 22 | Printing and publications | | | | | | |
| bul | 23 | Other expenses (attach schedule) . | | 36,920 | | 506 | 506 | 32,829 |
| ratı | 24 | Total operating and administrativ | e expenses. | | | | | |
| Operating | | Add lines 13 through 23 | | 416,379 | - | 3,117 | 3,117 | 409,677 |
| J | 25 | Contributions, gifts, grants paid . | | 1,127,750 | | | | 1,127,750 |
| | 26 | Total expenses and disbursement 25 | ts. Add lines 24 and | 1,544,129 | | 3,117 | 3,117 | 1,537,427 |
| | 27 | Subtract line 26 from line 12 | | 2,511,125 | | 5,117 | 5,117 | 2,557,127 |
| | а | Excess of revenue over expenses | and | -227,604 | | | | |
| | ь | disbursements Net investment income (if negative | e, enter -0-) | | | 506,930 | | |
| | c | Adjusted net income(if negative, e | | | | ,-50 | 8,185 | |
| | <u> </u> | | | | | | l | |

2,546,111

187,546

187,546

2,358,565

2,358,565

2,546,111

2,240,487

109,526

109,526

2,130,961

2,130,961 2,240,487

2

3

4

5

6

2,358,565

-227,604

2,130,961

2.130.961 Form 990-PF (2016)

2,240,435

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here ▶ ✓

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Unrestricted . . .

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) .

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

13

14

15

16

17

18

19

20

21 22

23

24

25

26

28

29

31 Part III

Liabilities

Balances

Fund

ŏ

Assets 27

Net 30

Page **3**

| | (a) e kınd(s) of property sold (e g , re ouse, or common stock, 200 shs | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) | |
|--|---|--|------------------------------------|---|--|
| 1 a 123 SH GALLUP INC | | | D | 2008-12-31 | 2016-08-31 |
| b 123 SH GALLUP INC | | | D | 2008-12-31 | 2016-10-11 |
| c 123 SH GALLUP INC | | | D | 2008-12-31 | 2016-10-11 |
| d 123 SH GALLUP INC | | | D | 2008-12-31 | 2016-11-01 |
| e 123 SH GALLUP INC | | | D | 2008-12-31 | 2016-12-01 |
| (-) | (f) | | (g) | (| h) |
| (e) Gross sales price | Depreciation allowed | | other basis | | r (loss) |
| <u> </u> | (or allowable) | plus exp | ense of sale | (e) plus (f |) mınus (g) |
| a 99,8 | 876 | | 127 | | 99,749 |
| b 99,8 | 876 | | 127 | | 99,749 |
| c 99,8 | 876 | | 127 | | 99,749 |
| d 99,8 | 876 | | 127 | | 99,749 |
| e 99,8 | 876 | | 127 | | 99,749 |
| Complete only for assets sl | howing gain in column (h) and ow | ned by the foundation | on 12/31/69 | (| I) |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | Excess | (k) of col (ı) (j), ıf any | Gains (Col (col (k), but not | h) gain minus less than -0-) or om col (h)) |
| a | | | | | 99,749 |
| b | | | | | 99,749 |
| | | | | | 99,749 |
| | | | | | 99,749 |
| | | | | | 99,749 |
| | | If gain, also enter in P | art I line 7 | | 33), 13 |
| · = | n or (loss) as defined in sections : I, line 8, column (c) (see instructi | | 1 | 3 | 498,745 |
| Part V Qualification Un | der Section 4940(e) for Re | duced Tax on Net | Investment In | come | |
| (For optional use by domestic priv | rate foundations subject to the sec | tion 4940(a) tax on ne | t investment incom | e) | |
| If section 4940(d)(2) applies, leav | ve this part blank | | | | |
| Was the foundation liable for the s If "Yes," the foundation does not o | section 4942 tax on the distributal qualify under section 4940(e) Do | not complete this part | <u>'</u> | | es 🔽 No |
| | unt in each column for each year, | see instructions before | making any entrie | | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitab | | (d) Distribution rati (col (b) divided by c | ol (c)) |
| 2015 | 1,444,896 | | 4,334,457 | | 0 333351 |
| 2014 | 126,869 | | 3,051,108 | | 0 041581 |
| 2013 | 121,779 | | 3,090,995 | | 0 039398 |
| 2012 | 134,342 | | 3,144,332 | | 0 042725 |
| 2011 | 49,866 | | 2,786,985 | | 0 017892 |
| 2 Total of line 1, column (d) | | | 2 | | 0 474947 |
| | or the 5-year base period—divide i | | | | |
| | ation has been in existence if less | | 3 | | 0 094989 |
| | harıtable-use assets for 2016 from | • | 4 | | 2,639,348 |
| | | | | | 250,709 |
| | income (1% of Part I, line 27b) | | | | 5,069 |
| | | | | | 255,778 |
| . , - | s from Part XII, line 4 , | | | | 1,537,427 |
| If line 8 is equal to or great instructions | er than line 7, check the box in Pa | art VI, line 1b, and com | plete that part usin | | e the Part VI orm 990-PF (2016) |

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|---|---------------------------------------|---------------------------|
| Part VIII Information About Officers, Directors, Trustees and Contractors (continued) | , Foundation Managers, Highly | Paid Employees, |
| 3 Five highest-paid independent contractors for professional serv | ices (see instructions). If none, ent | ter "NONE". |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | | 0 |
| List the foundation's four largest direct charitable activities during the tax year. Include re | | nber of Expenses |
| organizations and other beneficiaries served, conferences convened, research papers pro | duced, etc | <u> </u> |
| 1 PLEASE REFER TO ENCLOSED ATTACHMENT 14 | | 409,677 |
| 2 | | |
| | | |
| 3 | | |
| | | |
| 4 | | |
| <u></u> | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see | | |
| Describe the two largest program-related investments made by the foundation during 1 | the tax year on lines 1 and 2 | Amount |
| • | | |
| | | |
| 2 | | |
| | | |
| All other program-related investments See instructions 3 | | |
| <u>-</u> | | |
| Total. Add lines 1 through 3 | | . ▶ |
| Total. Add lifes I tillough 3 | | Form 990-PF (2016) |
| | | (2010) |

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

3a 3h

4

5

1.537.427

1,532,358

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5.069

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

4

| Form 990-PF (2016) | | | | Page 9 |
|--|---------------|----------------------------|--------------------|---------------------|
| Part XIII Undistributed Income (see instruction | ons) | | | |
| | (a) Corpus | (b) Years prior to 2015 | (c) 2015 | (d) 2016 |
| 1 Distributable amount for 2016 from Part XI, line 7 | | | | |
| 2 Undistributed income, if any, as of the end of 2016 | | | | |
| a Enter amount for 2015 only | | | | |
| b Total for prior years 20 | | | | |
| 3 Excess distributions carryover, if any, to 2016 | | | | |
| a From 2011 | | | | |
| b From 2012 | | | | |
| c From 2013 | | | | |
| d From 2014 | | | | |
| e From 2015 | | | | |
| f Total of lines 3a through e | | | | |
| 4 Qualifying distributions for 2016 from Part | | | | |
| XII, line 4 🕨 \$ | | | | |
| a Applied to 2015, but not more than line 2a | | | | |
| 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 2016 distributable amount. | | | | |
| e Remaining amount distributed out of corpus | | | | |
| 5 Excess distributions carryover applied to 2016 | | | | |
| (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 | | | | |
| 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 | | | | |
| d Subtract line 6c from line 6b Taxable amount —see instructions | | | | |
| e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see | | | | |
| Instructions | | | | |
| lines 4d and 5 from line 1 This amount must be distributed in 2017 | | | | |
| 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 2011 not applied on line 5 or line 7 (see instructions). | | | | |
| Subtract lines 7 and 8 from line 6a | | | | |
| Analysis of line 9 | | | | |
| a Excess from 2012 | | | | |
| b Excess from 2013 | | | | |
| c Excess from 2014 | | | | |
| d Excess from 2015 | | | | |
| e Excess from 2016 | | | | |

| For | m 990-PF (2016) | | | | | Page 10 |
|----------|--|--|------------------------|-----------------------|--|-------------------------|
| | Private Operating Found | ations (see instru | ctions and Part VII | I-A, question 9) | | |
| | If the foundation has received a ruling or del foundation, and the ruling is effective for 20 | 16, enter the date of | the ruling | ▶∟ | | |
| b | Check box to indicate whether the organization | on is a private operat | ing foundation descr | ibed in section 🗹 | 4942(j)(3) or ☐ | 4942(յ)(5) |
| 2a | Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | (e) Total |
| | investment return from Part X for each | (a) 2016 | (b) 2015 | (c) 2014 | (d) 2013 | |
| | year listed | 8,185 | | 1,874 | 2,985 | 13,044 |
| b | 85% of line 2a | 6,957 | | 1,593 | 2,537 | 11,087 |
| | line 4 for each year listed | 1,537,427 | 1,451,836 | 126,869 | 121,779 | 3,237,911 |
| d | Amounts included in line 2c not used directly for active conduct of exempt activities | 1,125,000 | 1,125,000 | | | 2,250,000 |
| е | Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | 412,427 | 326,836 | 126,869 | 121,779 | 987,911 |
| | Complete 3a, b, or c for the alternative test relied upon | | | | | |
| а | "Assets" alternative test—enter (1) Value of all assets | 0 | 0 | 0 | | 0 |
| | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | - | | 0 |
| Ь | "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | 87,978 | 144,482 | 101,703 | 103,033 | 437,196 |
| С | "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) | | | | | 0 |
| | (2) Support from general public and 5 or more exempt organizations as provided in | | | | | |
| | section 4942(j)(3)(B)(III) | | | | | 0 |
| | (3) Largest amount of support from an exempt organization | | | | | 0 |
| | (4) Gross investment income | | | | | 0 |
| Pa | rt XV Supplementary Information assets at any time during th | | | ganization had | \$5,000 or more | e in |
| 1 | Information Regarding Foundation Mana | | uccions.) | | | |
| а | List any managers of the foundation who hav before the close of any tax year (but only if | | | | | 1 |
| b | SHIRLEY M CLIFTON List any managers of the foundation who own | 10% or more of the | stack of a corporation | on (or an equally la | rae portion of the | |
| U | ownership of a partnership or other entity) on NONE | | | | rge portion of the | |
| اد | | | | | | |
| <u> </u> | Information Regarding Contribution, Gra | ant, Gift, Loan, Sch | olarship, etc Prog | rams: | | |
| | Check here ▶ ☐ If the foundation only mak unsolicited requests for funds If the founda other conditions, complete items 2a, b, c, as | es contributions to pr tion makes gifts, grar | eselected charitable | organizations and o | does not accept or organizations un | der |
| a | The name, address, and telephone number of MARY C RECKMEYER 1001 Gallup Drive Omaha, NE 68102 (402) 938-6220 | or e-mail address of ti | ne person to whom a | pplications should l | be addressed | |
| b | The form in which applications should be sub APPLICATION IN FORM REQUIRED BY FOUN | | on and materials the | y should include | | |
| С | Any submission deadlines NONE | | | | | |
| d | Any restrictions or limitations on awards, surfactors NONE | ch as by geographical | areas, charitable fie | lds, kınds of ınstitu | tions, or other | |
| | | | | | Fai | rm QQ0-DF (2016) |

NONE

NONE

TENEIKA ASKEW

ALEXANDRIA, VA 22302

CHRISTOPHER YOUSSEF

9756 THORN BUSH DRIVE

FAIRFAX STATION, VA 22039

b Approved for future payment

4980 LEESBURG PIKE APARTMENT 119

ENTREPRENEURIAL PROGRAM
FOR YOUNG PEOPLE

ACADEMIC WORKSHOP
PARTICIPATION FOR COLLEGE
STUDENTS TO DESIGN A
BUSINESS PLAN FOR AN

ENTREPRENEURIAL PROGRAM
FOR YOUNG PEOPLE

PARTICIPATION FOR COLLEGE

ACADEMIC WORKSHOP

STUDENTS TO DESIGN A
BUSINESS PLAN FOR AN
ENTREPRENEURIAL PROGRAM
FOR YOUNG PEOPLE

1,000

Form **990-PF** (2016)

1,127,750

I

| 1 Program: a b c d e f g Fees ar 2 Members 3 Interest | Analysis of Income-Producing amounts unless otherwise indicated service revenue | | (b) Amount | Excluded by sectio (c) Exclusion code | n 512, 513, or 514 (d) Amount | (e) Related or exemple function income (See instructions |
|--|---|-------------------|--------------------|--|---|--|
| 1 Program : a b c d e f g Fees ar 2 Members 3 Interest | service revenue | (a) | (b) | (c) | (d) | Related or exemp function income |
| a b c d e f g Fees ar 2 Members 3 Interest | | | | (c) Exclusion code | | |
| b c d e f g Fees ar 2 Members 3 Interest | | | | | | |
| c d e f g Fees ar 2 Members 3 Interest | | | | 1 | | |
| d e f g Fees ar 2 Members 3 Interest | | | | + | | |
| e f g Fees ar 2 Members 3 Interest | | | | | | |
| f g Fees ar 2 Members 3 Interest | | | | | | |
| g Fees ar 2 Members 3 Interest | | | | | | |
| Members Interest | nd contracts from government agencies | | | | | |
| Invest- | ship dues and assessments | | | | | |
| 4 Dividend | nents | | | 14 | 11,302 | |
| | al income or (loss) from real estate | | | | | |
| | nanced property bt-financed property | | | 1 | | |
| b Not dea | tal income or (loss) from personal property | | | | | |
| | vestment income | | | | | |
| | (loss) from sales of assets other than | | | 1 | | |
| | ry | | | 18 | -34 | |
| | me or (loss) from special events | | | | | |
| | ofit or (loss) from sales of inventory | | | | | |
| 1 Other re | venue 90-PF FEDERAL TAX REFUND | | | | | 6.05 |
| | 90-PF FEDERAL TAX REFUND | | | <u> </u> | | 6,05 |
| | | | | | | |
| d | | | | | | |
| _ | | | | | | |
| | Add columns (b), (d), and (e) | | | | 11,268 | |
| | dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculatio | | | 1 | | 17,32 |
| | B Relationship of Activities to th | | ment of Exem | pt Purposes | | |
| Line No. ▼ | Explain below how each activity for which the accomplishment of the foundation's exinstructions) | income is reporte | ed in column (e) o | of Part XVI-A contrib | uted importantly to n purposes) (See | |
| | msudctions) | | | | | |
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| . (20 | ,10) |
|-------|--|
| | Information Regarding Transfers To and Transactions and Relationships With Noncharitable |
| | |
| /II | Exempt Organizations |

| Part XVII | Information Re Exempt Organi | | ransf | ers To | and Transac | tion | s and Relatio | onships With No | oncharitable | | |
|----------------------------|---|------------------------------|--------------------|----------------------|---|--------|--|--|----------------------|---------------|--------|
| | janization directly or in Code (other than section | dırectly enga | | | | | | | tion 501 | Yes | No |
| ` ' | rom the reporting foun | | _ | • | | | . | or gameations | | + | |
| | · · · · · · · | | | | | | | | . la(1 |) | No |
| (2) Other assets | | | | | | | | | |) | No |
| b Other trans | sactions | | | | | | | | | 1 | |
| (1) Sales | of assets to a nonchar | itable exemp | t orgar | nization. | | | | | 1b(1 | .) | No |
| (2) Purch | ases of assets from a r | noncharitable | exemp | ot organ | ızatıon | | | | 1b(2 | .) | No |
| (3) Renta | l of facilities, equipmer | nt, or other a | ssets. | | | | | | 1b(3 | - | No |
| | oursement arrangemen | | | | | | | | . 1b(4 | - | No |
| | or loan guarantees. | | | | | | | | 1b(5 | | No |
| ` , | mance of services or m | | | - | | | | | . 1b(6 | ' | No |
| _ | facilities, equipment, r ver to any of the above | | | | | | | | | | No |
| of the good in any tran | ds, other assets, or ser saction or sharing arra | vices given b ngement, sh | y the r ow in c | eporting column (| foundation If t d) the value of | the fo | oundation receive goods, other asse | ed less than fair ma ets, or services rec | arket value eived | | |
| (a) Line No | (b) Amount involved | (c) Name of | nonchai | ritable ex | empt organization | | (d) Description of | transfers, transaction | ns, and sharing ar | rangemer | nts |
| | | | | | | | | | | | |
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| | | | | | | | | | | | |
| 2a Is the foun | dation directly or indire | ectly affiliated | d with, | or relate | ed to, one or mo | ore ta | ax-exempt organ | ızatıons | | | |
| described i | n section 501(c) of the | Code (other | than s | ection 5 | 01(c)(3)) or in s | sectio | on 527? | | 🗆 Yes | ✓ N | lo |
| b If "Yes," co | mplete the following s | | | | | | | | | | |
| | (a) Name of organization | on | | (| (b) Type of organiz | zatıon | | (c) Descripti | on of relationship | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| l l | er penalties of perjury, | | | | , | | | _ | , | | |
| | y knowledge and belief h preparer has any kno | | orrect, | and com | ipiete Deciarati | on o | r preparer (otner | than taxpayer) is | pased on all int | ormatio | n of |
| , i.e. | **** | J | | | 2017-11-15 | | ***** | | May the IRS disc | uss this i | eturn |
| - | | | | | | | _) | | with the prepare | i | |
| / S | Signature of officer or t | rustee | | | Date | | Title | | (see instr)? | Yes ⊔ I | Vo |
| | Print/Type preparer's | name | Prepa | rer's Sig | nature | | Date | | PTIN | | |
| | | | | _ | | | | Check if self- | POO4 | 15828 | |
| | Vonita L Wood | | | | | | 2017-11-08 | employed ▶ Ш | | 15020 | |
| Paid | | | | | | | 2017 11 00 | | | | |
| Preparer Use Only | Firm's name ► Labe | nz & Associa | tes LLC | 2 | | | | | Fırm's EIN ▶ | | |
| Jac Olliy | Firm's address ▶ 85 | 555 Pioneers | Boulev | ard | | | | | | | |
| | | | | | | | | | Phone no (40 | 2) 437- | 8383 |
| | Lir | ncoln, NE 68 | 520 | | | | | | , | _, .5, | |
| | 1 | | | | | | | | Form 9 | 90-PF | (2016) |

| efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491314005267 | | | | | | | | | |
|--|-----------------|-------|----------------------|------------------------|---|--|--|--|--|
| TY 2016 Accounting Fees Schedule | | | | | | | | | |
| | | | | | | | | | |
| Name: The Clifton Foundation | | | | | | | | | |
| | EIN: 40-0002257 | | | | | | | | |
| | | | | | 1 | | | | |
| Category | Amount | Net | Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | | | |
| ACCOUNTING FEES | | 7,665 | 1,916 | 1,916 | 5,749 | | | | |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491314005267 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2016 Depreciation Schedule

Name: The Clifton Foundation EIN: 40-0002257

| effie GRAPHIC print - DO NOT PROCESS | AS FIIED Data - | DLN: 93491314005267 | | | | | |
|--|------------------------|---------------------|--|--|--|--|--|
| TY 2016 Investments Corporate Stock Schedule | | | | | | | |
| Name: | The Clifton Foundation | | | | | | |

DI N. 0240121400E267

ofile CDADUIC print DO NOT DDOCESS As Filed Date

| | EIN: 40-0002257 | | |
|-------------|------------------------|---------------------------|----------------------------------|
| | Name of Stock | End of Year Book Value | End of Year Fair Market Value |
| GALLUP, INC | | 810,948 | 810,896 |

| efile GRAPHIC print - DO NOT PROCES | S As Filed Data | - | DLN | l: 93491314005267 | | |
|-------------------------------------|-----------------|--------------------------|------------------------|---|--|--|
| TY 2016 Legal Fees Schedule | | | | | | |
| | | | | | | |
| Name: The Clifton Foundation | | | | | | |
| EIN: 40-0002257 | | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |
| LEGAL FEES | 46 | 11 | 11 | 35 | | |

| efile GRAPHIC print - DO NOT PROCES | SS As Filed Data - | | DLN: | 93491314005267 | |
|-------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|
| TY 2016 Other Expenses Schedule | | | | | |
| | | | | | |
| Nam | ne: The Clifton Four | ndation | | | |
| EIN: 40-0002257 | | | | | |
| Other Expenses Schedule | | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | |
| BANK FEES | 98 | 24 | 24 | 74 | |
| POSTAGE | 497 | 124 | 124 | 373 | |
| TRAVEL & PROMOTIONAL MEALS | 5,638 | | [| 2,819 | |

1,532

4,000

1,431

7,736

5,791

310

357

202

766

202

4,000 1,074

7,736

5,791

310

357

STRENGTHS LAB MEALS

OFFICE SUPPLIES

SUBCONTRACTING CONSULTING

STRENGTHS LAB SUBCONTRACTING

STRENGTHS LAB OFFICE SUPPLIES

STRENGTHS LAB MATERIALS&SUPPLY

STRENGTHS LAB DUES & SUBSCRIPT

Description **Net Investment Adjusted Net** Disbursements for Revenue and Charitable Expenses per Income Income Books Purposes

| | | | | • |
|----------------------------|----|---|---|---|
| STRENGTHS LAB INTEREST EXP | 77 | | | |
| MISCELLANEOUS | 5 | 1 | 1 | |

Other Expenses Schedule

STRENGTHS LAB WEBSITE/BRANDING

STRENGTHS LAB SHIPPING

| MISCELLANEOUS | 5 | 1 | 1 | 4 |
|-----------------------------|-------|---|---|-------|
| WEBSITE/BRANDING CONSULTING | 1,080 | | | 1,080 |

| MISCELLANEOUS | 3 | 1 | 1 | 7 |
|--------------------------------|-------|---|---|-------|
| WEBSITE/BRANDING CONSULTING | 1,080 | | | 1,080 |
| STRENGTHS LAB WEBSITE/BRANDING | 8,407 | | | 8,407 |

116

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491314005267 | | | | |
|--------------------------------------|-----------------|---------------------|--|--|--|--|
| TY 2016 Other Income Schedule | | | | | | |
| | | | | | | |

Name: The Clifton Foundation

EIN: 40-0002257

| Other Income Schedule | | | | | |
|--------------------------------|-----------------------------------|--------------------------|---------------------|--|--|
| Description | Revenue And Expenses Per Books | Net Investment Income | Adjusted Net Income | | |
| FORM 990-PF FEDERAL TAX REFUND | 6,057 | | | | |

| S As Filed Data - | <u>- </u> | DLN | N: 93491314005267 | | | |
|--|---|---|---|--|--|--|
| TY 2016 Other Professional Fees Schedule | | | | | | |
| | | | | | | |
| Name: The Clifton Foundation | | | | | | |
| N: 40-0002257 | | | | | | |
| | | | | | | |
| Amount | Net Investment | Adjusted Net | Disbursements | | | |
| | Income | Income | for Charitable Purposes | | | |
| | Fees Schedul e: The Clifton F N: 40-0002257 | Fees Schedule e: The Clifton Foundation N: 40-0002257 | Fees Schedule e: The Clifton Foundation N: 40-0002257 Amount Net Investment Adjusted Net | | | |

684

684

2,735

PROFESSIONAL FEES

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | - | DLI | N: 93491314005267 | |
|--------------------------------------|---------------|--------------------------|------------------------|---|--|
| TY 2016 Taxes Schedule | | | | | |
| | | | | | |
| Name: | The Clifton F | oundation | | | |
| EIN: | 40-0002257 | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | |
| FORM 990-PF EXCISE TAX ESTIMTE | 1,620 | | | 1,620 | |

| efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491314005267 | | | | | |
|---|---|------------------|---------------------------|--|--|
| Schedule B (Form 990, 990-EZ, | Schedule of Contributors | | OMB No 1545-0047 | | |
| or 990-PF) Department of the Treasury Internal Revenue Service Attach to Form 990, 990-EZ, or 990-PF Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990 | | | | | |
| Name of the organizat | ion | Employer id | entification number | | |
| | | 40-0002257 | | | |
| Organization type (ch | eck one) | | | | |
| Filers of: | Section: | | | | |
| Form 990 or 990-EZ | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | ion | | | |
| | ☐ 527 political organization | | | | |
| Form 990-PF | √ 501(c)(3) exempt private foundation | | | | |
| 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | |
| ☐ 501(c)(3) taxable private foundation | | | | | |
| | eation filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution represently) from any one contributor. Complete Parts I and II. See instructions for contributor. | | | | |
| Special Rules | | | | | |
| under sections received from a | tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ 3% s 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Pany one contributor, during the year, total contributions of the greater of (1) \$5,000 one 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II | art II, line 13, | 16a, or 16b, and that | | |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III | | | | | |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) | | | | | |
| For Paperwork Reduction for Form 990, 990-EZ, or 9 | | le B (Form 990, | 990-EZ, or 990-PF) (2016) | | |

| Name of organi The Clifton Found | | Employer identification 40-0002257 | number |
|-------------------------------------|--|---------------------------------------|--|
| Part I | Contributors (see instructions) Use duplicate copies of Part I if ac | dditional space is needed | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | Shirley M Clifton Mary Reckmeyer 8441 Firethorn La Lincoln, NE68520 | \$ 1,299,200 | Person Payroll Noncash |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (Complete Part II for noncash contributions) (d) Type of contribution |
| | | \$ | Person |
| (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) |

| Schedule B (Forn | n 990, 990-EZ, or 990-PF) (2016) | | Page 3 | |
|---|--|--|--------------------------------|--|
| Name of organization The Clifton Foundation | | Employer identification number | | |
| The chiton rounds | | 40-00 | 02257 | |
| Part II | Noncash Property | | | |
| (a) No.from Part I | (see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | |
| 1 | 1,600 sh GALLUP, INC STOCK | \$ 1,299 200 | 2016-02-05 | |
| (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 | |
| | | \$ | | |
| | | Schedule B (Form 9 | 990, 990-EZ, or 990-PF) (2016) | |

| Schedule B (Form 9 | 990, 990-EZ, or 990-PF) (2016) | | Page 4 |
|--|--|---|--|
| Name of organization The Clifton Foundation | | | Employer identification number 40-0002257 |
| than \$1,0 organiza the year | 000 for the year from any one contributo | r. Complete columns (a) throu of exclusively religious, charit actions.) ► \$ | d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for |
| (a) No.from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| - | Transferee's name, address, and | (e) Transfer of gift 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 |
| No.Hom Part | | (a) Transfer of with | |
| - | Transferee's name, address, and | (e) Transfer of gift R | Relationship of transferor to transferee |
| (a) No.from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, and | (e) Transfer of gift 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 |
| | Transferee's name, address, and | (e) Transfer of gift ZIP 4 | Relationship of transferor to transferee |
| | | | |

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)