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

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

OMB No 1545-0052

		nt of the Treasury			social security numbers or				1 2010
_		evenue Service			m 990-PF and its separate			s.gov/form990pt.	Open to Public Inspection
		of foundation	or tax year beginnin	<u> </u>		, and e	naing	A Employer identification	number
	ARR	AM FAMT	LY FOUNDA	TON				46-4223658	
			pox number if mail is not		t address)		Room/suite	B Telephone number	
			AL AVENUE					308-293-05	20
		town, state or pro	ovince, country, and <b>E</b> 68847	ZIP or foreign p	postal code			C If exemption application is po	ending, check here
		k all that apply:	Initial reti	urn	Initial return of a fe	ormer public of	charity	D 1. Foreign organizations	. check here
		,	Fınal retu	rn	Amended return				
_			Address	change	Name change			Foreign organizations me check here and attach co-	eting the 85% test, mputation
H	_	k type of organiz			xempt private foundation			E If private foundation stat	us was terminated
L			) nonexempt charital		Other taxable private found	ation		under section 507(b)(1)	(A), check here 🕨 📖
			assets at end of year		ing method: X Cash	Accr	rual	F If the foundation is in a 6	
		Part II, col. (c),			ther (specify) imn (d) must be on cash i	hans l		under section 507(b)(1)	(B), check here
	≽\$ arti	I Analysis of R	1701861 evenue and Expense		T			() Adv. etc.d = et	(d) Disbursements
_	ui C	(The total of amo	ounts in columns (b), (c), al the amounts in column	and (d) may not (a))	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1		gifts, grants, etc., rec						
	2		of the foundation is not require	d to attach Sch B					·
	3	Interest on saving cash investments							
	4	Gross rents	interest from securiti	es	<b></b>				
	1 .	Net rental income	or (loss)		,				
	62		from sale of assets not o	n line 10					
9	b	Gross sales price assets on line 6a							
Dovidonio	7		come (from Part IV, line	2)			0.		
٥	8	Net short-term	capital gain					0.	
	9	Income modific							
	10a	and allowances	eturns	<del></del>					
	1	Less Cost of goo	<del></del>						
	11	Gross profit or Other income	(10SS)		53890.		53890.	E3900	Statement 1
	12	Total. Add line:	s 1 through 11		53890.		53890.	53890.	<u>Statement 1</u>
_	13		officers, directors, truste	es etc	0.		0.	33830.	0.
	14		salaries and wages	05, 010					
	15		employee benefits			·			
9	16a	Legal fees							
9	b	Accounting fee:		tmt 2	1150.		0.	0.	0.
Ϋ́	C	Other professio	nal fees						
ž,	17	Interest	a	L 2	501				
ST.S	18 19	Taxes		tmt 3	591.		0.	0.	0.
	20	Depreciation an Occupancy	d debiedou	W. Car.	, 1	<del></del>			
Δd	21		nces, and meetings	) # 19 (V )	== <u></u>			<del> </del>	
Ž	22	Printing and pu		Y 2 2 20	17 0				
0	23	Other expenses		11 2 2 21	[மி				
įį	24		and administrative		Provide Name of the Party of th				
Onerating and Administrative Expenses			lines 13 through 23		1741.		0.	0.	0.
C	25		ufts, grants paid	um est essentiale interes	83720.				83720.
	26	-	and disbursements	3.	0545		_		
	-	Add lines 24 an			85461.		0.	0.	83720.
				_	-31571.				
	1		over expenses and disb		-313/1.		53890.		
	1		COME (if negative, ente				33030.	53890.	
								<u> </u>	

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

623511 11-23-16

Decreases not included in line 2 (itemize)

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

1699839.

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Form **990-PF** (2016)

7

7 Add lines 5 and 6

82728.

83720.

Form	990-PF	(2016) ARRAM FAMILY FOUNDATION					<u> 46-</u>	4223	<u> 8658</u>		Page 4
Pa	rt VI	Excise Tax Based on Investment Income (Section 4940	)(a),	49	40(b), 4940(e),	or 49	948	- see	instru	ıctio	ns)
1a	Exempt	operating foundations described in section 4940(d)(2), check here 🕨 🔲 and er	ter "N/	/A" (	on line 1.			ł			-
	Date of r	ruling or determination letter: (attach copy of letter if nec	essary	/-se	e instructions)						
b	Domesti	c foundations that meet the section 4940(e) requirements in Part V, check here	· 🗓	] an	id enter 1%	Į	_1_			5	39.
	of Part I,	, line 27b			(			}			1
C	All other	domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Par	rt I,	line 12, col. (b).						
2	Tax unde	er section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers er	nter	r - <b>0</b> -)	Į	2				<u>0.</u>
3	Add line:	s 1 and 2				Ĺ	_3_			5	<u> 39.</u>
4	Subtitle .	A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	hers e	ente	r -0-)	Ļ	4				<u>0.</u>
5	Tax base	ed on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				Į	_5_			5	39.
6		Payments:				1		(	_		
		timated tax payments and 2015 overpayment credited to 2016	6a						•		1
		foreign organizations - tax withheld at source	6b	_					,,,	, ,	- 1
C	Tax paid	with application for extension of time to file (Form 8868)	6c	$\perp$				1			-
		withholding erroneously withheld	6d	丄							
7	Total cre	edits and payments. Add lines 6a through 6d					7				<u>0.</u>
8	Enter an	y <b>penalty</b> for underpayment of estimated tax. Check here 🛄 if Form 2220 is attac	ched			ļ	8				<u> 16.</u>
9	Tax due	. If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>					9			5	55.
10	Overpay	ment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					10	L			
		amount of line 10 to be: Credited to 2017 estimated tax			Refunde	d▶					
		A Statements Regarding Activities							<del>,</del>		1
1a	During th	he tax year, did the foundation attempt to influence any national, state, or local legisl	ation o	or d	lid it participate or inte	ervene	ın			Yes	No
	any polit	tical campaign?							1a	ļ	X
b	Did it sp	end more than \$100 during the year (either directly or indirectly) for political purpos	es (se	e in	istructions for the def	finition)	?		1b		X
	If the ar	nswer is "Yes" to 1a or 1b, attach a detailed description of the activities ar	nd cop	pies	s of any matenals p	ublish	ed or	•			
	dıstrıbu	ted by the foundation in connection with the activities.									ئـــا ا
C	Did the f	oundation file Form 1120-POL for this year?							1c		X
đ		e amount (if any) of tax on political expenditures (section 4955) imposed during the									
		the foundation. > \$0 (2) On foundation managers.				0.					1
е	Enter the	e reimbursement (if any) paid by the foundation during the year for political expendit	ture tax	x in	nposed on foundation	1					
	_	s.▶\$0.									
2	Has the 1	foundation engaged in any activities that have not previously been reported to the IF	IS?						2		X
		attach a detailed description of the activities.							-	-	1
		foundation made any changes, not previously reported to the IRS, in its governing in		nent	t, articles of incorpora	ation, o	r			~	
		or other similar instruments? If "Yes," attach a conformed copy of the change							3		X
		oundation have unrelated business gross income of \$1,000 or more during the year	?						4a		X
		has it filed a tax return on Form 990-T for this year?					N	/A	4b		<del></del>
		re a liquidation, termination, dissolution, or substantial contraction during the year?							5		X
		attach the statement required by General Instruction T.							1		
		equirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther:						1		!
	•	guage in the governing instrument, or							Į		l '
	-	te legislation that effectively amends the governing instrument so that no mandatory	direct	tion	is that conflict with th	e state	law		Į		
		n the governing instrument?							6		<u>X</u>
7	Did the f	oundation have at least \$5,000 in assets at any time during the year? If "Yes," con	plete	Pa	art II, col. (c), and Pa	art XV			1	X	
_	<b>.</b>				37					[	
8a	Enter the	e states to which the foundation reports or with which it is registered (see instruction	ıs) 🟲		None				ł	1	
		<del></del>		_	<del></del>					(	
		swer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney	/ Ge	eneral (or designate)						'
		state as required by General Instruction G? If "No," attach explanation			24140) 404-414-				8b	X	<del> </del>
		undation claiming status as a private operating foundation within the meaning of sec				or cale	ndar		_		1
		6 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," co							9		X
10	nig any t	persons become substantial contributors during the tax year? if "Yes," attach a schedul	e listing	g the	eir names and addresses				10	<u></u>	(2016)

P	art 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			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	ļ	_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	<u> </u>	_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	LX_	<u> </u>
	Website address ► N/A			
14	The books are in care of ► ESSAM J ARRAM Telephone no. ► 308-2			
	Located at ► 4302 CENTRAL AVENUE, KEARNEY, NE ZIP+4 ►6	884	<u></u>	<del></del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	_	- / - ▶	·
40	and enter the amount of tax-exempt interest received or accrued during the year		I/A Yes	No
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	40	Tes	
	securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
P	foreign country  art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Т	Yes	No
1:	During the year did the foundation (either directly or indirectly):	$\vdash$	1.00	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		1	1
	(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?			
	(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.)			
Ì	olf any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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)?	1b	ļ	ļ
	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			
	before the first day of the tax year beginning in 2016?	1c	<b> </b>	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			'
_	defined in section 4942(j)(3) or 4942(j)(5)):			
ě	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?  Yes X No			·
		1		}
	If "Yes," list the years \( \bigs_{\text{\tint{\text{\tint{\text{\tilitet{\text{\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\texictex{\text{\texi}\text{\texi}\text{\text{\text{\text{\text{\			
•	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		
	of the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.		1	<del></del>
			-	İ
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?		1	
t	If "Yes," did it have excess business holdings in 2016 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		Ī	}
	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,		-	1
	Form 4720, to determine if the foundation had excess business holdings in 2016.)	_3b	<u> </u>	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		[	۱ ،
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		X
	F	orm <b>99</b>	0-PF	(2016)

orm 990-PF (2016) ARRAM FAMILY FOUNDATION			<u>46-42236</u>	<u>58</u>	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)		<del></del>
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	า 4945(e))?	Y€	s X No		
(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		1
(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				
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	for	ļ		
the prevention of cruelty to children or animals?		Y6	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	ın Regulations			
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	•			*	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined			
expenditure responsibility for the grant?		I/A 🔲 Ye	s 🔲 No		
If "Yes," attach the statement required by Regulations section 53 4945					
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to	• •				
a personal benefit contract?	pay promising on		es X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?			6b	X
If "Yes" to 6b, file Form 8870.	orsonal pononi contract:				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?	□ v <sub>4</sub>	s X No		! !
b If "Yes," did the foundation receive any proceeds or have any net income attribu			<del>-</del> .	7b	<del>                                     </del>
Part VIII Information About Officers, Directors, Trust		nagers Highly			
Paid Employees, and Contractors	ees, i ouiluation wie	illagers, riigili	,		
List all officers, directors, trustees, foundation managers and their	compensation.				
	· · · · · · · · · · · · · · · · · · ·	(c) Compensation	(d) Contributions to	(e) Ex	Dense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	account allowa	t, other
	to position	`enter'-0-)	compensation	allowa	111062
loo Chahamanh A			0.		0
See Statement 4		0.			<u> </u>
<del></del>		<del>                                     </del>			
<del></del>		<u> </u>			
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	4.5	
(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) Exp account allowa	pense t. other
	hours per week devoted to position	(O) compensation	compensation	allowa	inces
NONENONE					
				1	
	1				
	1				
otal number of other employees paid over \$50,000	<del></del>				0
State	<del></del>		Form	990-PF	
			. 51111		\·-/

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total author of others recover our OCO 000 for author our our		<b>D</b> 0
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities	<del></del>	
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 produce	d, etc.	Expenses
1 N/A		
2		
3		
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 line	s 1 and 2.	Amount
1 N/A		
2		
<del></del>		
		<del></del>
All other program-related investments. See instructions.		
3		
<del></del>		
Total. Add lines 1 through 3		0.
		Form <b>990-PF</b> (2016)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, see	e instructions.)
1 Fair	market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Ave	rage monthly fair market value of securities	1a	0.
<b>b</b> Ave	rage of monthly cash balances	1b	
c Fair	market value of all other assets	1c	<u> 1701861.</u>
d Tota	al (add lines 1a, b, and c)	1d	1701861.
e Red	uction claimed for blockage or other factors reported on lines 1a and		
1c (	attach detailed explanation) 1eO_•		
2 Acq	uisition indebtedness applicable to line 1 assets	2	0.
3 Sub	tract line 2 from line 1d	3	1701861.
4 Casi	h deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	25528.
	value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1676333.
	imum investment return. Enter 5% of line 5	6	83817.
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here   x and do not complete this part.)	id certain	
1 Mini	imum investment return from Part X, line 6	1	
2a Tax	on investment income for 2016 from Part VI, line 5		
<b>b</b> Inco	ime tax for 2016. (This does not include the tax from Part VI.)		
c Add	lines 2a and 2b	2c	
3 Disti	ributable amount before adjustments. Subtract line 2c from line 1	3	
4 Reco	overies of amounts treated as qualifying distributions	4	
5 Add	lines 3 and 4	5	
6 Ded	uction from distributable amount (see instructions)	6	
7 Dist	ributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Part 2	XII Qualifying Distributions (see instructions)	<del>-</del>	
I Amo	ounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expe	enses, contributions, gifts, etc total from Part I, column (d), line 26	1a	83720.
<b>b</b> Prog	gram-related investments - total from Part IX-B	1b	0.
? Amo	ounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amo	ounts set aside for specific charitable projects that satisfy the:		
a Suita	ability test (prior IRS approval required)	3a	
<b>b</b> Cast	n distribution test (attach the required schedule)	3b	
Qual	lifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	83720.
Four	ndations that qualify under section 4940(e) for the reduced rate of tax on net investment		
INCO	me. Enter 1% of Part I, line 27b	5	539.
Adju	sted qualifying distributions. Subtract line 5 from line 4	6	83181.
Note	: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (	qualifies for the	e section

- I art Aiii Oridistributed income (s	see instructions)	N/A		
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7	- 4° v		3	
2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only	N. 7		the state of the s	5 , ct.
b Total for prior years:				
3 Excess distributions carryover, if any, to 2016: a From 2011	was the state of	·		Safe of sector for the sector of
<b>b</b> From 2012 <b>c</b> From 2013	de la granda de	a		· 电影点性200
d From 2014 e From 2015				
f Total of lines 3a through e 4 Qualifying distributions for 2016 from	No de la commission de description de la commission de la			
Part XII, line 4: ► \$				
Applied to 2015, but not more than line 2a     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				
Remaining amount distributed out of corpus     Excess distributions carryover applied to 2018 (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>b</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				1
d Subtract line 6c from line 6b. Taxable amount - see instructions				1
e Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2016. Subtract 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  9 Excess distributions carryover to 2017.				:
Subtract lines 7 and 8 from line 6a  O Analysis of line 9:				
a Excess from 2012 b Excess from 2013				
c Excess from 2014 d Excess from 2015				
e Excess from 2016				

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

\*\* See Purpose of Grant continuations

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Part XVI-A Analysis of Income-Producing Activities

Enter gros	s amounts unless ot	herwise indicate		Unrela	ited business income		luded by section 512, 513, or 514	(e)
	m service revenue:	inor wido monde		(a) Business code	(b) Amount	(C) Exclu sion code	Amount	Related or exempt function income
_				- 5545	1		<del> </del>	
				1				
d	<del></del>			_	<u> </u>		<u> </u>	
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	s and contracts from	_	jencies	ļ	<b>-</b>		<del> </del>	<u> </u>
	ership dues and asse			ļ	<del>                                     </del>		<del> </del>	<u> </u>
	t on savings and ten	nporary cash				1		
investr				\	<del>+</del>		<del> </del>	<del> </del>
	nds and interest from		_		<del> </del>		<del> </del>	
	ital income or (loss)	from real estate	:	<u> </u>	<del></del>	<del></del>	<del> </del>	
	ot-financed property				<del> </del>		<del> </del>	<del> </del>
	debt-financed prope	-			<del> </del>		<del> </del>	<del> </del>
	ital income or (loss)	trom personal						
proper	-			ļ	<del> </del>		<del></del>	53890.
	nvestment income (loss) from sales of	occata athar			<del> </del>		<del> </del>	53690
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12 Subtota	al. Add columns (b),	(d), and (e)				0.		53890.
	Add line 12, columns		<del>)</del> )	<u></u>			13	53890.
See works	sheet in line 13 instri	uctions to verify	calculations	s.)				
Part X	VI-B Relat	ionship of	Activitie	s to the Acc	complishment	of Exem	pt Purposes	
Line No.					d in column (e) of Pa funds for such purpo		ibuted importantly to the acc	complishment of
7					BUILDING			
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<u>or</u> [	9 <u>9</u> 0-F			I FAMILY FOU					46-4223658	Page 13
F	<u> </u>	<u>/II</u>		egarding Transfei			ons an	d Relationships Wit		
1	- <del>  -</del> -	e or			e following v	vith any other ord	anization	described in section 501(c) o	f Y	es No
•				c)(3) organizations) or in s				· · · · · · · · · · · · · · · · · · ·	'   <del> </del>	
a	I			dation to a noncharitable ex			•			
	1) C								1 <u>a(1)</u>	X_
	2) 0	ther	i isets						1a(2)	X
b	Other	trans	actions						1 1	Ì
	1) S	ales	assets to a noncharita	able exempt organization					1 <u>b(1)</u>	<u> </u>
				oncharitable exempt organ	zation				1b(2)	X_
ļ			of facilities, equipment,						1b(3)	<u> </u>
	i *		ursement arrangements	3					1b(4)	<u> X</u>
			r Ioan guarantees						1b(5)	<u>X</u> _
				embership or fundraising s					1b(6)	<u> </u>
				ailing lists, other assets, or			ould alwa	ys show the fair market value		
1						• •		in any transaction or sharing :		.5,
	1			other assets, or services r						<del>_</del>
1)	οήε	{	b) Amount involved	(c) Name of none		empt organizatio	n	(d) Description of transfers t	ransactions and sharing arran	gements
-				ļ	<u>N/A</u>					
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a				ctly affiliated with, or related		•	organizal	tions described		<b>1</b> 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	'		range) of the Code (office) inplete the following sch	er than <b>sect</b> ion 501 <b>(c)</b> (3)) o	or in section	5217			Yes	X No
₽	- 163	, 601	(a) Name of org		- (1	b) Type of organi	ration	(e) Descripti	on of relationship	<del></del>
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		<u> </u>	rm's address 🕨					<del></del>		
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							<del>-</del>	-	Form <b>990-</b>	<b>PF</b> (2016)

46-4223658

ARRAM FAMILY FOUNDATION

3 Grants and Contributions Paid During the		<del></del>		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	00//// 02///	
BUFFALO COUNTY GOODFELLOWS		CHARITY	CHARITABLE, FOR	
6 BLUE MILL RD			CHRISTMAS GIFTS FOR	
KEARNEY, NE 68847			NEEDY CHILDREN	
	,	· <b>]</b>	DETERMINED BY	
	<del> </del>	<u> </u>	GOODFELLOWS	5000
		1		
BUFFALO COUNTY HISTORICAL SOCIETY -		CHARITY	CHARITABLE, FOR	
TRAILS & RAILS MUSEUM			GENERAL OPERATIONS	
710 W 11TH STREET				1000
KEARNEY, NE 68845		<del>                                     </del>		1000
CAMPUS KITCHEN		CHARITY	CHARITABLE, FOR	
905 w 25TH STREET			GENERAL OPERATIONS	
KEARNEY, NE 68849	<del>                                     </del>	<del>                                     </del>		585
		İ		
CENTRAL COMMUNITY COLLEGE		CHARITY	CHARITABLE, FOR	
3134 w US HIGHWAY 34	1		BUILDING CAMPAIGN	
GRAND ISLAND, NE 68802	<del></del>	<u> </u>		10000
CRANE RIVER THEATRE		OVA D TONY	OUADIMADIE FOD	
PO BOX 2141		CHARITY	CHARITABLE, FOR GENERAL OPERATIONS	
KEARNEY NE 68848			GENERAL OPERATIONS	20000
MANUAL, MA VOOR		-		
CROSSROADS CENTER RESCUE MISSION		CHARITY	CHARITABLE, FOR	
1404 E 39TH STREET			GENERAL OPERATIONS	_
KEARNEY, NE 68847		<del> </del>		500
EAST LAWN MISSION TRAILER - FIRST		CHARITY	RELIGIOUS, FOR GENERAL	
UNITED METHODIST CHURCH	}		OPERATIONS	
1500 LINDEN DRIVE				
KEARNEY, NE 68847				1500
FRIENDS OF NAZARETH		CHARITY	CHARITABLE, FOR	
3482 KEITH BRIDGE RD #215			GENERAL OPERATIONS	
CUMMING GA 30041	_			17000
GOOD SAMARITAN FOUNDATION FAMILY		CHARITY	CHARITABLE, FOR	
ASSIST FUND			GENERAL OPERATIONS	
111 W 31ST STREET				
CEARNEY NE 68847	<del> </del>	<del> </del>		750
GOOD SAMARITAN FOUNDATION KEARNEY		CHARITY	CHARITABLE, FOR	
PACKLES CANCER		CHARITI	GENERAL OPERATIONS	
LII W 31ST STREET			CHAILAN OF BRAILONS	
KEARNEY NE 68847				750
Total from continuation sheets				78270

46-4223658

ARRAM	FAMTI.V	FOUNDATION
TIME THE	TUTTI	LOUIDHITON

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		
HELPCARE CLINIC		CHARITY	CHARITABLE, FOR	
3015 AVENUE A			GENERAL OPERATIONS	
KEARNEY, NE 68847				150
		CHARITY	RELIGIOUS, FOR GENERAL OPERATIONS	
JUBILEE CENTER		CHARITY	CHARITABLE, FOR	
2523 AVENUE A			GENERAL OPERATIONS	
KEARNEY, NE 68847			CHAPTER OF EACH TONG	58
KEARNEY CATHOLIC FOUNDATION		CHARITY	CHARITABLE, FOR	
2100 AVENUE A			GENERAL OPERATIONS	
KEARNEY, NE 68847				350
		CHARITY	CHARITABLE, FOR	
			GENERAL OPERATIONS	
		CHARITY	CHARITABLE, FOR	
			GENERAL OPERATIONS	<u> </u>
		CHARITY	CHARITABLE, FOR	
			GENERAL OPERATIONS	
VILLENDA				
KEARNEY LITERACY COUNCIL 2207 CENTRAL AVENUE		CHARITY	CHARITABLE, FOR GENERAL OPERATIONS	
KEARNEY NE 68847			GENERAL OF ERATIONS	50
		1		
		CHARITY	CHARITABLE, FOR	
		<del> </del>	GENERAL OPERATIONS	
MAKE A WISH FOUNDATION		CHARITY	CHARITABLE, GENERAL	
11836 ARBOR ST			FUND FOR GRANTING	
OMAHA, NE 68144			WISHES FOR PERSONS	
<del></del>			CHOSEN BY MAKE A WISH	750

46-4223658

ARRAM FAMILY FOUNDATION

Part XV Supplementary Information 3 Grants and Contributions Paid During the					
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution		
MEADOWLARK ELEMENTARY		CHARITY	CHARITABLE, FOR		
310 W 24TH STREET			GENERAL OPERATIONS		
KEARNEY NE 68845				100	
MUSEUM OF NEBRASKA ART		CHARITY	CHARITABLE, FOR		
2401 CENTRAL AVENUE			GENERAL OPERATIONS	500	
KEARNEY, NE 68845					
NORTHEAST ELEMENTARY SCHOOL		CHARITY	CHARITABLE, FOR		
310 W 24TH STREET			GENERAL OPERATIONS		
KEARNEY, NE 68845				400	
SAFE CENTER		CHARITY	EDUCATIONAL, FOR		
620 E 25TH STREET #14		CHARTT	GENERAL OPERATIONS		
KEARNEY NE 68847				100	
		CHARITY	CHARITABLE, FOR		
			BUILDING EXPANSION AND		
			REMODEL		
SALVATION ARMY		CHARITY	CHARITABLE, FOR GENERAL OPERATIONS		
1719 CENTRAL AVENUE KEARNEY NE 68847			GENERAL OFERALIONS	50	
MANAGET, RE 00047					
SOUTH CENTRAL AREA AGENCY ON AGING		CHARITY	CHARITABLE, FOR		
620 E 25TH STREET #12			GENERAL OPERATIONS		
KEARNEY, NE 68847				50	
reammates		CHARITY	CHARITABLE, FOR		
3610 6TH AVENUE			GENERAL OPERATIONS		
KEARNEY, NE 68845				50	
		OVER DETERM	CUADITADI B. COD		
WORLD THEATRE FOUNDATION 2318 CENTRAL AVENUE		CHARITY	CHARITABLE, FOR GENERAL OPERATIONS		
KEARNEY NE 68847			Control of maritons	50	
			CHARITABLE, FOR		
			GENERAL OPERATIONS		
Total from continuation sheets					

ARRAM FAMILY FOUNDATION	46-4223658
Part XV Supplementary Information	
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Cont	ribution
Name of Recipient - BUFFALO COUNTY GOODFELLOWS	
CHARITABLE, FOR CHRISTMAS GIFTS FOR NEEDY CHILDRE	N DETERMINED BY
GOODFELLOWS ORGANIZATION	
	<del></del>

Form 990-PF	Other I	ncome		Statement	1
Description		(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Incom	
INTEREST INCOME ON INSTALLMENT CONTRACT		53890.	53890.	5389	0.
Total to Form 990-PF, Part I,	line 11	53890.	53890.	5389	0.
Form 990-PF	Accounti	ng Fees		Statement	2
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	_	(d) Charitab Purpose	
ACCOUNTING FEES	1150.	0	. 0	•	0.
To Form 990-PF, Pg 1, ln 16b	1150.	0	. 0	•	0.
Form 990-PF	Tax	es		Statement	3
Description	(a) Expenses Per Books	(b) Net Invest- ment Income		(d) Charitak Purpose	
EXCISE TAX	591.	0	. 0	•	0.
To Form 990-PF, Pg 1, ln 18	591.	0	. 0	•	0.

Form 990-PF Pai	Part VIII - List of Officers, Directors Trustees and Foundation Managers			Statement 4	
Name and Address		Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	
ESSAM J. ARRAM 4302 CENTRAL AVENUE KEARNEY, NE 68847		PRESIDENT 0.00	0.	0.	0.
BARBARA J. ARRAM 4302 CENTRAL AVENUE KEARNEY, NE 68847		VICE PRESIDENT 0.00	0.	0.	0.
TARIK E. ARRAM 8 EAST 48TH STREET KEARNEY, NE 68847		VICE PRESIDENT 0.00	0.	0.	0.
CAMIL A. SAADI 510 E 52ND ST PLACE KEARNEY, NE 68847		VICE PRESIDENT 0.00	0.	0.	0.
NADIA J. ARRAM SAADI 510 E 52ND ST PLACE KEARNEY, NE 68847		SECRETARY/TREAS	SURER 0.	0.	0.
Totals included on 99	00-PF, Page 6,	Part VIII =	0.	0.	0.
Form 990-PF		XV - Line 1a oundation Manager		State	ement 5

Name of Manager

ESSAM J. ARRAM
BARBARA J. ARRAM
TARIK E. ARRAM
CAMIL A. SAADI
NADIA J. ARRAM SAADI