Form 990-PF 121

Return of Private Foundation

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

OMB No 1545-0052

2017

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public.

• Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

East	colon	idar year 2017 or tax year beginning		7, and		J11.	, 20
		undation	, 201	r, and		r identification numbe	
					27-4864		
-CO:	mher and	F DISCIPLESHIP FOUNDATION d street (or P O box number if mail is not delivered to street address)	Room	n/suite		e number (see instruction	ons)
		·	,		,	•	,
		175TH STREET n, state or province, country, and ZIP or foreign postal code			402-932		
					C if exempt	ion application is pendi	ng, cneck nere ▶
		NE 68135 call that apply □ Initial return □ Initial returr	of a former public	charity	D 4 Faces	n organizations, check l	
G	CHECK	Final return Amended		Chanty	ו ט i. Foreigi	r organizations, check i	nere ►
		☐ Address change ☐ Name cha				n organizations meeting	
	Chack	type of organization: X Section 501(c)(3) exempt p		11/1-		here and attach compu foundation status was t	erminated under
		on 4947(a)(1) nonexempt charitable trust			section 5	07(b)(1)(A), check here	▶□
		narket value of all assets at J Accounting method					
		f year (from Part II, col. (c),			F If the four under sec	ndation is in a 60-month ction 507(b)(1)(B), check	termination here
		(i) Si) ► \$ 276, 476.00 (Part I, column (d) must be	e on cash basis)			(= ¼ · ¼=¼ ·	
	art I		<u> </u>				(d) Disbursements
	21.6	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions))	books	l "	icome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	125,000.00	 			
, 	2	Check ► ☐ If the foundation is not required to attach Sch B					<u> </u>
	3	Interest on savings and temporary cash investments		<u> </u>			i
	4	Dividends and interest from securities					
	5a	Gross rents	5,525.00	5	,525.00		
	b	Net rental income or (loss) (961.00)			· · · /		•
<u>a</u>	6a	Net gain or (loss) from sale of assets not on line 10					
2	b	Gross sales price for all assets on line 6a				1	
Revenue	7	Capital gain net income (from Part IV, line 2)			0.00		
ď	8	Net short-term capital gain					
	9	Income modifications					1
	10a	Gross sales less returns and allowances		<u></u>			
	b	Less Cost of goods sold .					
	С	Gross profit or (loss) (attach schedule)	0.00	ļ	·		
	11	Other income (attach schedule)		ļ			
	12	Total. Add lines 1 through 11	130,525.00	5	,525.00	0.00	
S	13	Compensation of officers, directors, trustees, etc		 			
enses	14	Other employee salaries and wages		 	-		
bel	15	Pension plans, employee benefits		 			
Exp	16a	Legal fees (attach schedule)	500.00	 			500.00
è	b	Accounting fees (attach scheder EIVED	500.00	\vdash			300.00
aţi	17	Other professional fees (affach schedule)		 			
str	18	Taxes (attach schedule) (see instructions) 2018	2,173.00	2	,129.00		
Ë	19	Interest Taxes (attach schedule) Depreciation (attach schedule) AAY 1 5 2018 Depreciation (attach schedule) and depletion	3,091.00		,091.00		
표	20	Occupancy . OGDEN, UT.	3,031.00	<u> </u>	, 032.00		
Ă	21	Travel, conferences, and meetings					
힏	22	Printing and publications					
g B	23	Other expenses (attach schedule)	4,033.00	1	,266.00		
ij	24	Total operating and administrative expenses.			· -		
ā		Add lines 13 through 23	9,797.00	6	,486.00	0.00	500.00
Operating and Administrative	25	Contributions, gifts, grants paid	241,349.00				241,349.00
0	26	Total expenses and disbursements. Add lines 24 and 25	251,146.00		,486.00	0.00	241,849.00
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements	(120,621.00	}	, n		
	b	Net investment income (if negative, enter -0-)			0.00		
		Adjusted not income (if possture enter ())	1	1		0.00	

Form 990-PF (2017)

For Paperwork Reduction Act Notice, see instructions.

		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	f year
۲a	rt II	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
\neg	1	Cash—non-interest-bearing	190,006.00	72,476.00	72,476.00
- }	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
	-	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	•	Less: allowance for doubtful accounts ▶			
ł	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
1		disqualified persons (attach schedule) (see instructions)			
)	7	Other notes and loans receivable (attach schedule) ▶			
1	•	Less allowance for doubtful accounts ▶			
s,	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ğ	10a	Investments—U.S and state government obligations (attach schedule)			
_	b	Investments—corporate stock (attach schedule)			
ĺ	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			1
}	,,	Less accumulated depreciation (attach schedule) ▶	- 		
]	12	Investments—mortgage loans			
Ì	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ► 100,000.00			
١	'7	Less accumulated depreciation (attach schedule) ► 12,235.00	90,856.00	87,765.00	100,000.00
- 1	15	Other assets (describe ► INSURANCE POLICIES)	104,000.00	104,000.00	
l	16	Total assets (to be completed by all filers—see the	101,000.00	2017000.00	
ļ		instructions. Also, see page 1, item l)	384,862.00	264,241.00	276,476.00
	17	Accounts payable and accrued expenses	301/002.00		,
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			1,1
	22				
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)	0.00	0.00	, ',
\neg	20	Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26, and lines 30 and 31.			
ances	24	Unrestricted	,		
	25	Temporarily restricted			Í
ä∣	26	Permanently restricted			
밑		Foundations that do not follow SFAS 117, check here ▶ □			
교		and complete lines 27 through 31.			* .*
5	27	Capital stock, trust principal, or current funds	384,862.00	264,241.00	1
ध	28	Paid-in or capital surplus, or land, bldg, and equipment fund			` `,
Net Assets or Fund Ba	29	Retained earnings, accumulated income, endowment, or other funds			, +
As	30	Total net assets or fund balances (see instructions)	384,862.00	264,241.00	, i .
ts	31	Total liabilities and net assets/fund balances (see			, ,
z	•	instructions)	384,862.00	264,241.00	
Рa	rt III	Analysis of Changes in Net Assets or Fund Balances	<u> </u>		
		I net assets or fund balances at beginning of year—Part II, colu	mn (a), line 30 (mus	t agree with	
•		of-year figure reported on prior year's return)		1	384,862.00
2		er amount from Part I, line 27a		2	(120,621.00
3				<u> </u>	
4		lines 1, 2, and 3		4	264,241.00
5	_		•	<u> </u>	
6	Tota	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lii	ne 30 . 6	264,241.00
<u> </u>	. 5.0		<u>```</u>		Form 990-PF (2017)

Part	IV Capital Gains and L	osses for Tax on Investment	Income				
2-story brick warehouse or common stock 200 she MIC Co.)				(b) How acquired P—Purchase D—Donation		Date acquired no , day, yr)	(d) Date sold (mo , day, yr)
1a							
<u>b</u>					<u> </u>		
<u>c</u>					—		
<u>d</u>					┼		
e		(A Depresention ellowed	(a) Cost or	other have	┼	(h) Co	n os 4000)
	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (or allowable) plus expense of sale						n or (loss) (f) minus (g))
<u>a</u> b							
					 		
d					†		
e							
	Complete only for assets show	ng gain in column (h) and owned by the	e foundation	on 12/31/69		(I) Gains (Co	(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any			t less than -0-) or rom col (h))
a					ļ		
<u>b</u>					 		
<u>c</u>					┼		
e					 		
2	Capital gain net income or (r	net capital loss) { If gain, also					
_	, -	(ir (ioss), ente		-	2		
3		or (loss) as defined in sections 122 line 8, column (c) See instruction					
Part		Section 4040(a) for Deduced	Tour on M		3	<u> </u>	
_		Section 4940(e) for Reduced					
(FOI O	puonai use by domestic priva	te foundations subject to the secti-	on 4940(a)	tax on net inves	tment	income)	
If sect	ion 4940(d)(2) applies, leave t	hıs part blank					
		ction 4942 tax on the distributable alify under section 4940(e). Do not			base _l	period?	☐ Yes ☐ No
1		nt in each column for each year, se			aking	any entries.	
	(a)	(b)		(c)			(d)
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of	noncharitable-use a	ssets		inbution ratio divided by col (c))
	2016	184,491.00		240,874	1.00		0.7659
	2015	201,361.00		238,827	7.00		0.8431
	2014	151,809.00		312,209	5.00		0.4862
	2013	80,575.00		127,480	0.00		0.6321
	2012	L	L				
_	Total of line 1 and imm (d)						0 5053
2 3	Total of line 1, column (d) Average distribution ratio for	· · · · · · · · · · · · · · · · · · ·	he total on	 line 2 by 5 0 .o.	r by	2	2.7273
		ndation has been in existence if les			-	3	.6818
	, , , , , , , , , , , , , , , , , , , ,		,			 	.0010
4	Enter the net value of nonch	antable-use assets for 2017 from F	Part X, line	5		4	189,655.00
5	Multiply line 4 by line 3 .				·	5	129,307.00
6	Enter 1% of net investment i	income (1% of Part I, line 27b) .			.]	6	0.00
7	Add lines 5 and 6					7	129,307.00
8	Enter qualifying distributions				.	8	241,831.00
	If line 8 is equal to or greater	r than line 7, check the box in Part	t VI, line 1b	, and complete	that p	art using a 1	% tax rate. See the

Part \		3—see i	nstru	ctio	1S)			
1a`	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter (attach copy of letter if necessary—see instructions)							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		0	00			
	here ▶ ဩ and enter 1% of Part I, line 27b							
С	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-)	2						
3	Add lines 1 and 2	3		0	00			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4						
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		0	00			
6	Credits/Payments							
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a		*		. 1			
b	Exempt foreign organizations—tax withheld at source 6b				.			
С	Tax paid with application for extension of time to file (Form 8868)	,						
d	Backup withholding erroneously withheld 6d							
7	Total credits and payments. Add lines 6a through 6d	7		0	00			
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 ▶	9			00			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		0	00			
11		11		0	00			
	VII-A Statements Regarding Activities		,					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation of	or did it	\longrightarrow	Yes	No			
	participate or intervene in any political campaign?		1a		X			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? Sinstructions for the definition	See the	1b		x			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any members published or distributed by the foundation in connection with the activities.	aterials						
С	Did the foundation file Form 1120-POL for this year?		1c		X			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ▶ \$ NONE (2) On foundation managers. ▶ \$	NONE		3 + 4 1 1 = 1				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impon foundation managers. > \$ NONE							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? .		2		X			
-	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, an	ticles of						
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X			
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		x			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X			
-	If "Yes," attach the statement required by General Instruction T.							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			,				
•	By language in the governing instrument, or				.			
	· By state legislation that effectively amends the governing instrument so that no mandatory direction	ns that						
	conflict with the state law remain in the governing instrument?		6	Х				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and	Part XV	7	Х				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶							
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		8b	X				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942	2(j)(3) or						
J	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. I complete Part XIV	f "Yes,"	9		x			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listi	na their	- -		 _			
10	names and addresses		10	х				

ı aı	t 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		v
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	 		X
	person had advisory privileges? If "Yes," attach statement. See instructions	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► NONE			
14	The books are in care of ▶ DEAN_HODGES Telephone no. ▶ 402-93	2-03	329	
	Located at ► 5059 S 175TH ST, OMAHA, NE ZIP+4 ► 68135			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here and enter the amount of tax-exempt interest received or accrued during the year > 15		•	▶ ∐
16	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
סו	over a bank, securities, or other financial account in a foreign country?	16	162	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		<u>'</u>	<u> </u>
	the foreign country ▶			
Par	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.		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? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			1
	— · · · · · · · · · · · · · · · · · · ·		٠,	
	(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)		· 1e	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		-
	Organizations relying on a current notice regarding disaster assistance, check here ▶ □			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that]
	were not corrected before the first day of the tax year beginning in 2017?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?]]
	If "Yes," list the years ▶ 20 , 20 , 20 , 20		•	-
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)			
_		2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	.:	1	
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	- <u>-</u> -		
4 -	foundation had excess business holdings in 2017)	3b		
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		X
J	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		

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	_	4
	Pane	п

Part	VII-B Statements Regarding Activities	s for V	vnich Form	4720	<u>мау Ве</u> R	<u>equir</u>	ea (conti	nued)			
5a`	During the year, did the foundation pay or incur	any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt t	-		on (sect	tion 4945(e))? .	☐ Yes	X No			
	(2) Influence the outcome of any specific public	c electi	on (see sect	ion 495	55); or to ca	arry on	,				1
	directly or indirectly, any voter registration drive?										- {
	(3) Provide a grant to an individual for travel, stu	dv. or	other similar	purpos	es?		_ ∏Yes	X No	.	'	
	(4) Provide a grant to an organization other than	•	· ·								- 1
	section 4945(d)(4)(A)? See instructions								.	l i	
	(5) Provide for any purpose other than religious									1 1	1
	purposes, or for the prevention of cruelty to							X No	.		
b	If any answer is "Yes" to 5a(1)-(5), did any of the								1		ł
-	Regulations section 53.4945 or in a current notice								5b		
	Organizations relying on a current notice regardi	•	•					▶□			
С	If the answer is "Yes" to question 5a(4), does t	_						_	' -		1
	because it maintained expenditure responsibility						Yes	□No	,] ,	1 1	- 1
	If "Yes," attach the statement required by Regula	ations s	section 53.49						- [
6a	Did the foundation, during the year, receive any			• •	•	emiums	S		١,		
				•			☐Yes	X No	, [((- 1
b	Did the foundation, during the year, pay premiun					benefi	_		6b		
	If "Yes" to 6b, file Form 8870.	,	,	,,	ш р ч г ч ч ч ч ч ч ч ч ч ч ч ч ч ч ч ч ч				1 2		
7a	At any time during the tax year, was the foundation	a party	to a prohibited	tax sh	elter transac	tion?	☐ Yes	X No	.]		i
	If "Yes," did the foundation receive any proceed						ransaction	າ?ີ.	7b		
Part	VIII Information About Officers, Direc	tors, 1	rustees, F	ounda	tion Mana	agers,	Highly F	aid E	mploy	ees,	
	and Contractors					•					
1	List all officers, directors, trustees, and found	ation r	nanagers ar	nd their	compens	ation. S	See instru	ictions	3		
	(a) Name and address	(b) Title	e, and average rs per week		mpensation not paid,		Contributions		(e) Expe	nse acc	ount,
	(a) Name and address		ed to position		ter -0-)		erred compe		other a	allowan	ces
DEAN	HODGES	PRES	IDENT								
5059	S 175TH ST, OMAHA, NE 68135				0			0			0
30B	SMITHHISLER	SECR	ETARY								
L627	O R ST, OMAHA, NE 68135				0			0			0
1IKE	QUINN	TREA	SURER								
510	VERNON AVE, OMAHA, NE 68116				0			0			0
ATT	HEW HODGES	DIRE	CTOR								
0462	W BROWNSTONE DR, BOISE, ID 83709				0			0			0
2	Compensation of five highest-paid employee "NONE."	es (oth	er than thos	se incl	uded on li	ne 1—	see instr	uctions	s). If no	one, e	enter
(a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to pe	veek	(c) Comper	sation	(d) Contribution of the complete of the comple	benefit leferred	(e) Expe	nse acc allowan	ount, ces
IONE											
ONE			ļ								
											
				İ							
				·							
				· · ·		-					
otal	number of other employees paid over \$50,000 .			• •	· · · ·	•		. ▶			
										A DE	

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	d Employees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "I	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	
	
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	er of Evapper
organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 DIRECT SUPPORT OF THE OMAHA COMMUNITY FOUNDATION - A COMMUNITY FOUNDATI	ON
WHICH SUPPORTS VARIOUS CHARITIES IN THE CITY OF OMAHA, NEBRASKA]
	76,000.00
2 DIRECT & INDIRECT SUPPORT TO ABIDE NETWORK, AN INTERCITY NON-PROFIT IN	
OMAHA, NE. THE AGENCY SEEKS TO TRANSFORM NEIGHBORHOODS BY FAMILY SUPPO	
PROGRAMS AND HOUSING AND COMMUNITY PARTNERSHIPS.	66,024.00
3 DIRECT SUPPORT OF THE CHRISTIAN BUSINESS MEN COMMITTEE, A GLOBAL ASSOCIATION OF CHRISTIAN BUSINESS PERSONS & PROFESSIONALS COMMITTED TO	
PROCLAMATION OF THE GOSPEL OF JESUS CHRIST IN THE MARKETPLACE.	26,800.00
4 DIRECT SUPPORT TO CALVARY CHAPEL OF OMAHA, NEBRASKA, FOR ITS PROGRAMS	
AND MINISTRIES.	
	22,500.00
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	
	Form 990-PF (2017)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ıgn fol	undations,
`	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	
b	Average of monthly cash balances	1b	91,020.00
C	Fair market value of all other assets (see instructions)	1c	100,000.00
ď	Total (add lines 1a, b, and c)	1d	191,020.00
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	191,020.00
4	Cash deemed held for charitable activities. Enter $1^{1}/_{2}\%$ of line 3 (for greater amount, see	1	
	instructions)	4	1,365.00
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	189,655.00
6	Minimum investment return. Enter 5% of line 5	6	9,483.00
Part .	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► □ and do not complete this part)	ounda	ations
1	Minimum investment return from Part X, line 6.	1	9,483.00
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)	1	
С	Add lines 2a and 2b	2c	0.00
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	9,483.00
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	9,483.00
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	9,483.00
Part	Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1	
-	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	241,849.00
a b		1b	241,849.00
2	Program-related investments—total from Part IX-B	10	
-	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	-	
a	Suitability test (prior IRS approval required)	3a	
a 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	241,849.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	 	241,049.00
-	Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	241,849.00
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.	y wriet	nei trie iourioation

Part XIII Undistributed Income (see instruc							
Distributable amount for 2017 from Part XI line 7 Indicate: The state of the stat			(b) Years prior to 2	016	(c) 2016		(d) 2017
2 Undistributed income, if any, as of the end of 2017.							9,483
b Total for prior years 20				-			
3 Excess distributions carryover, if any, to 2017:							
a From 2012					^		
b From 2013 74,323.00		- 1		- 1		1	
136 040 04				1			
189 420 00	쉬	- [
172 447 0	d			- }	.	- }	
i otal of lines 3a through a	572,239.	20					
dualitying distributions for 2017 from Part XII	3/2/239.	-					,
Ψ 241.849.00				1			
Private Edition of more than it.		,					
b Applied to undistributed income of prior years (Election required—see instructions)		+					
Treated as distributions out of corpus (Fig.)		_				24.5	
		1					
d Applied to 2017 distributable amount				1		1	
Remaining amount distributed out of any	000	4					 -
Coos distributions carryover on the state of the	232,366.0	0			,		9,48
Vi dii diilodili appears in column (4) 41.		+-				 	
amount must be shown in column (a) \						_	
Enter the net total of each column as indicated below:	i	1.		,	.*		
		. '					
Corpus Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract	804,605.00	7		,	. ',	4 S.	A 1/2
line 4b from line 2b				+-	* * * * * *		7 - 13 - 1
Enter the amount of prior years' undistributed		<u> </u>		ol		, · .	11 3 14
""" of the willest a notice of disc.						 	
Total look of the section to the section to the section of the sec		ľ		1			
Tell the president blestonists agencied		[
Subtract line 6c from line 6b Tarrett				1			
and dee instructions	,						
Undistributed income for 2016. Subtract line			0.00	 	·	,	
4a from line 2a. Taxable amount—see instructions				}			,
Undistributed income for 2017 Subsectivity	<u> </u>			1	0 0 =		,
The amount served	7		*	 	0.00		
210th batea 111 20 18	į		,	1			
Amounts treated as distributions out of corpus							0 00
To oddigiy icutili emente impossal L							0.00
11 (C)(1)(1) UI 4942(0)(3) (Flection mail 1)	1				-		
-see instructions)	1				1		
Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)							
Excess distributions carrious to accomp			1	•			
and 8 from line 8a							
Analysis of line 9:	804,605.00	_					-
Excess from 2013	`Ţ			<u> </u>			
Excess from 2014 136, 049, 20			Ì		,		
LACESS 110111 2015	l				. 1.	•	-
-xcess from 2016							,
Excess from 2017 232, 366.00					1		

Form 99	0-PF (2017)					Page 10
Part	XIV Private Operating Founda	tions (see instru	ctions and Part \	√II-A, question 9)		
1a`	If the foundation has received a ruling			private operating		
	foundation, and the ruling is effective fo		-	▶ [
ь	Check box to indicate whether the four		operating foundati		ction	(3) or/4942(j)(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	(a) 2017	(b) 2016	(c) 2015	(d) 2014	4
	each year listed					0.00
	85% of line 2a	0.00	0.00	0.00	0.00	0.00
С	Qualifying distributions from Part XII,		,			
	line 4 for each year listed					0.00
d	Amounts included in line 2c not used directly for active conduct of exempt activities				Í	
•	,	ļ			· · · · ·	0.00
е	Qualifying distributions made directly for active conduct of exempt activities					
	Subtract line 2d from line 2c	0.00	0.00	0.00	0.00	0.00
3	Complete 3a, b, or c for the		0.00	- 0.00	0.00	0.00
•	alternative test relied upon			/		
а	"Assets" alternative test—enter			/		
_	(1) Value of all assets	į				0.00
	(2) Value of assets qualifying under					0.00
	section 4942(j)(3)(B)(i)	İ		/		0.00
þ	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed		/		ļ	0.00
С	"Support" alternative test—enter		1			
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section	·				
	512(a)(5)), or royalties)					0.00
	(2) Support from general public and 5 or more exempt		/			
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					0.00
	(3) Largest amount of support from			-		
	an exempt organization					0.00
Part	(4) Gross investment income XV Supplementary Information	ní (Complete th	is nort only if th	o foundation he	d \$5,000 az ma	0.00
rait	any time during the year—			e ioundation na	a \$5,000 or me	ne ili assets at
1	Information Regarding Foundation		3./			
	List any managers of the foundation v		ted more than 2%	of the total contril	outions received I	hy the foundation
_	before the close of any tax year (but o					by the loundation
DEAN	HODGES	, ,		, , , , , , , , , , , , , , , , , , , ,		
b	List any managers of the foundation	who own 10% or	more of the stock	k of a corporation	(or an equally lar	ge portion of the
	ownership of a partnership or other er					•
NONE						
2	Information Regarding Contribution	, Grant, Gift, Loai	n, Scholarship, et	c., Programs:		
	Check here ▶ ☐ If the foundation	only makes contri	butions to presele	ected charitable or	ganizations and	does not accept
	unsolicited requests for funds. If the fe		jifts, grants, etc , t	o individuals or org	janızations under	other conditions,
	complete items 2a, b, c, and d. See in					
а	The name, address, and telephone nu	ımber or email add	ress of the person	to whom applicati	ons should be ad	dressed.
	HODGES, 5059 S 175TH ST,			932-0321	 	
þ	The form in which applications should	De submitted and	information and m	naterials they shou	ld include.	
7 7 77	PRED DECLIRCTING ACCTORANCE	AND THE MOST	7 OE MUE 3 CEN	IOV TO DDEPER	nan.	
	TTER REQUESTING ASSISTANCE	AND THE WORL	OF THE AGEN	NCY IS PREFER	KED	
c NONE	Any submission deadlines.					
	Any restrictions or limitations on aw	ards, such as hy	geographical are	eas charitable field	ds kinds of inst	itutions or other
~	factors	, Judii uo by	5 - og aprilour are	ac, chantable liel	55, KINGS OF 1115C	

Part XV	Supplementary Information (continuants and Contributions Paid During t	<i>nued)</i> he Year or Approv	ed for Fu	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or	Amount
N	ame and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
	aid dunng the year				
SEE ST	ATEMENT #2				
D D1.					
			[
				<u> </u>	
	otal	· · · · · · · · · · · · · · · · · · ·		<u> ▶ 3a</u>	241,349.00
D 7	pproved for future payment				
			!		
	ntal		· · · · · · · · · · · · · · · · · · ·	▶ 3h	0.00

nter gr	oss amounts unless otherwise indicated		siness income	1	on 512, 513, or 514	(e) Related or exempt
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
	ogram service revenue:					(666 meneralizations)
a h						
b						
d						
e						
f					•	
q	Fees and contracts from government agencies					
_	embership dues and assessments					
3 Int	erest on savings and temporary cash investments		-			
4 Div	vidends and interest from securities				-	
5 Ne	t rental income or (loss) from real estate:					
а	Debt-financed property					
b	Not debt-financed property			512	(961.00	
	t rental income or (loss) from personal property					
	her investment income					
	in or (loss) from sales of assets other than inventory					
	et income or (loss) from special events .					
	oss profit or (loss) from sales of inventory her revenue: a					
11 Ot b						
C	- W 114					
d						
e						
12 Su	btotal Add columns (b), (d), and (e) .		0.00		(961.00)	0.00
						
เง เจ	tal. Add line 12, columns (b), (d), and (e)				13	(961.00
See wo	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation				13	(961.00
See wo Part X	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
See wo Part X Line No	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
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See wo Part X Line No	rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the

Form 990	D-PF (2	2017)										Pag	ge 13
Part	XVII	Informatio Organizati	n Regarding Tra ons	nsfers to a	nd Trans	actions	and R	elationsh	nips With	Nonchari	table	Exe	mpt
			directly or indirectly									Yes	No
		ection 501(c) (o nizations?	other than section	501(c)(3) o	rganizatio	ns) or 11	n section	on 527, r	elating to	political	-	Ī	
	_		porting foundation t	o a nonchari	table ever	nnt orgar	nzation	of			}	1	İ
а		•	· · · ·		table exel	lipt organ	lization	OI .			1a(1)		X
		Other assets			•	• •	•		•		1a(2)		<u>x</u>
b		r transactions:			•		•	•	,		(-/		
			a noncharitable ex	empt organiz	zation .						1b(1)		
	(2) P	urchases of asse	ets from a noncharit	table exempt	organizat	ion .				[1b(2)		Х
			, equipment, or other	er assets .						[1b(3)		Х
		Reimbursement a	_								1b(4)		_X
		oans or loan gua					•				1b(5)		_X_
_			ervices or members							•	1b(6)		<u>X</u>
		_	quipment, mailing li		•	•	•	 Daluman (h)	، . برام اسلانیمجامی		1c		X
			of the above is "Ye ther assets, or serv										
			on or sharing arrang										
(a) Line		(b) Amount involved	(c) Name of nonc	 _				<u>_</u>	fers, transaction				
													
_													
													
				 									
	-+	·											
	-+												
 								 -					
	_							 _					
								-				<u>.</u>	
			ectly or indirectly at			,		e tax-exer	npt organiz	ations			
			501(c) (other than se		(3)) or in se	ection 52	72 .			. 🗆	Yes	X N	10
D	IT YE	es, complete the	following schedule		Tuno of one		T		(a) Danasahu				
		(a) Name of organ	12811011	(0)	Type of orga	mization			(c) Description	on of relations	snip		
				 	 ;								
				 									—
				 				 					
				1									
			declare that I have examin							f my knowledg	e and be	lief, it is	s true,
Sign	corre	ect and complete Deck	aration of preparer (other th	nan taxpayer) is ba	ased on all into		,	arer has any kn	iowieage	May the IRS			
Here	P_ _	Ween &	Judge		778	<i>'</i>	ana	pe_		with the pre			
	Sign	nature of officer or trus		Dat		Title	0	7		<u> </u>			
Paid		Print/Type preparer		Preparer's sign	gnature			5 /		ok 🔲 ıf │P1			_
Prepa		REGINALD S		TOTAL TAXES	TDV			0/1/		employed P			<u> </u>
Jse C	Only	}	MATTSON RICKET			TOT N	TE CO	508		<u>▶ 47-608</u>	3491 75-8		
		I rimi's address ▶ -	134 S 13TH ST	, SIE 120	O, LIN	CLIN, I	NE 685	000	Phone no		m 990		(2017)
										FOI		(واالاسم

COST OF DISCIPLESHIP FOUNDATION 5059 S 175TH STREET OMAHA, NE 68135

EIN: 27-4864434

U.S. Form 990-PF Return of Private Foundation For the Tax Year ended December 31, 2017

Statement #1			
Part I, Line 18, Taxes			
U.S Taxes	\$	44.00	
Real Estate Taxes	\$	2,129.00	
Total Taxes	\$	2,173.00	
Part I, Line 23, Other Expenses:			
Insurance - Investment	\$	1,266 00	
Bank Fees	\$	26.00	
Insurance	\$	2,741.00	
Total Other Expenses	\$	4,033.00	

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Employer identification number

CODI	OL DISCIPLESHIE		DOMDALTON		27-4864434
Organiz	ation type (check on	ne):			
Filers o	f:	Se	ction:		
Form 99	90 or 990-EZ		501(c)() (enter number) organization	
			4947(a)(1) non	exempt charitable trust not treated as a private	foundation
			527 political or	rganization	
Form 99	90-PF	X	501(c)(3) exem	pt private foundation	
			4947(a)(1) non-	exempt charitable trust treated as a private four	ndation
			501(c)(3) taxab	ole private foundation	
	only a section 501(c)(7		•	neral Rule or a Special Rule. zation can check boxes for both the General Ru	le and a Special Rule. See
Genera	i Rule				
X		r pro	perty) from any	o-EZ, or 990-PF that received, during the year, or one contributor. Complete Parts I and II. See i	
Special	Rules				
	regulations under se 13, 16a, or 16b, and	ection that	ns 509(a)(1) and received from	n 501(c)(3) filing Form 990 or 990-EZ that met th I 170(b)(1)(A)(vi), that checked Schedule A (Form any one contributor, during the year, total contr orm 990, Part VIII, line 1h; or (ii) Form 990-EZ, li	n 990 or 990-EZ), Part II, line ributions of the greater of (1)
	contributor, during the	he ye	ear, total contrib	501(c)(7), (8), or (10) filing Form 990 or 990-EZ (putions of more than \$1,000 exclusively for religithe prevention of cruelty to children or animals.	ous, charitable, scientific,
	contributor, during the contributions totaled during the year for a General Rule applied	he ye d mo in <i>ex</i> es to	ear, contribution re than \$1,000 clusively religion this organization	n 501(c)(7), (8), or (10) filing Form 990 or 990-EZ ns exclusively for religious, charitable, etc., purp If this box is checked, enter here the total contus, charitable, etc., purpose. Don't complete aron because it received nonexclusively religious,	poses, but no such ributions that were received ny of the parts unless the charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization

Employer identification number

Part I	Contributors (see instructions). Use duplicate co		needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DEAN HODGES 5059 S 175TH STREET OMAHA, NE 68135	\$\$	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization **Employer identification number** COST OF DISCIPLESHIP FOUNDATION 27-4864434 Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed Part II (a) No. (c) FMV (or estimate) (b) Description of noncash property given (d) from Date received Part I (See instructions.) (a) No. (c) FMV (or estimate) (d) Date received (b) from Description of noncash property given (See instructions.) Part I

		\$	
(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 990, 990-EZ, or 990-PF) (2017)

lame of or	rganization			Employer identification number
	DISCIPLESHIP FOUNDATION			27-4864434
Part III	Exclusively religious, charitable, etc., (10) that total more than \$1,000 for the the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if additional entry.	ne year from any one ns completing Part III, year (Enter this inform	contributor. enter the total	Complete columns (a) through (e) and I of exclusively religious, charitable, etc.,
(a) No.			r.	ADD 141 ADD 156 Inches
from Part I	(b) Purpose of gift	(c) Use of git	nt :	(d) Description of how gift is held
		(e) Transfer of	f gift	
	Transferee's name, address, and	ZIP + 4	Relation	ship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of git	ft	(d) Description of how gift is held
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(a) No. from Part I	(b) Purpose of gift	(c) Use of git	ft	(d) Description of how gift is held
		(e) Transfer of	f gift	
	Transferee's name, address, and	ZIP + 4	Relation	ship of transferor to transferee
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Cost of Discipleship Foundation Statement #2

EIN# 27-4864434

2017 CHARITABLE CONTRIBUTIONS

NAME	ADDRESS	PURPOSE	AMOUNT
Abide Network	3223 N 45th Street, Omaha, NE 68104	General Support	63,000.00
American Heart Assn	9900 Nicholas St, Omaha, NE68114	General Support	82.90
American Red Cross	2912 S. 80th Ave, Omaha, NE 68124	General Support	70.00
Big Brothers/Sisters Midlands	10831 Old Mill Rd, Omaha, NE 68154	General Support	140.00
Big Brothers/Sisters Southern NV	2000 E Flamingo Rd, Las Vegas, NV 89119	General Support	200.00
Christian Business Men	1065 N 115th St, Omaha, NE 68154	General Support	26,800.00
C4K Leadership	9945 Maple St, Omaha, NE 68134	General Support	12,000.00
Calvary Chapel Omaha	4428 S 180th St, Omaha, NE 68135	General Support	22,750.00
Creighton Prep Bash	7400 Western Ave. Omaha, NE 68104	Post Prom Event	250.00
Core Bank	2545 W Center Rd, Omaha, NE 68130	Support for Employee Awards	00.06
Feed the Children	333 N Meridian Ave, Ok City, OK 73107	General Support	200.00
Fontenelle Forest Guild	1111 Bellevue Blvd, Bellevue, NE 68005	General Support	100.00
Food Bank for the Heartland	10525 J St, Omaha, NE 68127	General Support	1,500.00
Food for the Poor	6401 Lyons Rd, Coconut Creek, FL 33073	General Support	200.00
Good News Prison Ministry	710 S 17th St, Omaha, NE 68102	General Support	200.00
Grace Baptist Church	650 E Madison Ave, Gardner, KS 66030	General Support	208.38
Johnny Rodgers Foundation	11711 Arbor St, Ste 3000, Omaha, NE 68144	General Support Jet Award	1,500.00
Lutheran Family Services	1941 S 42nd St, Omaha, NE 68105	General Support	100.00
Muscular Dystrophy Association	222 S Riverside Place #1500 Chicago, IL 60606	General Support	250.00
Make A Wish Idaho	310 W Idaho St. Boise, ID 83702	General Support	200.00
Manchester PTO	2750 N HWS Cleveland Blvd, Omaha, NE 68116 Teacher Appreciation Event	Teacher Appreciation Event	250.00
Metro Tech Reentry Program	30th and Fort Streets, Omaha, NE 68111	General Support	236.90
Miss Teen Nebraska	20701 Shirley St Omaha, NE 68022	General Support	1,237.08
Multiple Schlerosis Society	2730 S 114th St, Omaha, NE 68144	General Support	200.00
Museum of the Bible	409 3rd St, Washington DC 20034	General Support	1,000.00
Navigators	3820 N 30th St, Co Springs, CO 80904	General Support	200.00
Nebraska State Soccer	4151 S 84th St, Omaha, NE 68122	General Support	100.00
Omaha Community Foundation	302 South 30th Street, #100 Omaha, NE 68131	Omaha Gives Event	76,000.00
Omaha Home for Boys	4343 N 52nd St, Omaha, NE 68104	General Support	10,000.00
Open Door Mission	2828 N 23rd St East, Omaha, NE 68108	General Support	2,500.00
Partnership 4 Kids	1004 Farnam St, Omaha, NE 68102	General Support	159.68

ost of Discipleship Foundation	tatement #2
Cost	State

EIN# 27-4864434

2017 CHARITABLE CONTRIBUTIONS

NAME	ADDRESS	PURPOSE	AMOUNT
Release Ministries	3223 N 45th St Omaha, NE 68104	General Support	2,000.00
Ronald McDonald House	620 S 38th Ave, Omaha, NE 68105	General Support	250.00
SOAR- Community Alliance	4001 Leavenworth St, Omaha, NE 68105	General Support	100.00
Saint James Seton School	4720 N 90th St, Omaha, NE 68134	General Support	20.00
St Lukes Health Foundation	190 E Bannock, Boise, ID 83712	General Support	2,200.00
St Marys Womens Basketball Scholarship	7000 Mercy Rd, Omaha, NE 68106	Scholarship Support	2,500.00
Salem Broadcasting	11711 Arbor Street, Omaha NE 68144	Support to Abide Network - Fundraiser Advertising	3,024.00
Sienna Francis Homeless Shelter	1702 Francis St, Omaha, NE68101	General Support	2,500.00
Special Olympics of Nebraska	9427 F St, Omaha, NE68127	General Support	200.00
Susan Komen Foundation for the Cure	2425 S 67th St, Omaha, NE 68106	General Support	1,000.00
Victory Boxing Club	3009 R St, Omaha, NE 68107	General Support	3,500.00
Wounded Warrior Project	4899 Belfort Rd, Jacksonville, FL 32256	General Support	200.00

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