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2017

Form 990-PF Department of the Treasury

Internal Revenue Service

## **Return of Private Foundation**

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

Open to Public

							Inspection
For	calen	ndar year 2017, or tax year beginning 01-01-20	)17 , ar	nd er	nding 12-31-	2017	
		indation n Foundation				entification numbe	r
%	MARY C	RECKMEYER			40-0002257		
		I street (or P O box number if mail is not delivered to street address) lup Drive	Room/suite		<b>B</b> Telephone nu	mber (see ınstructıor	ns)
					(402) 938-6220	1	
	or town ıha, NE	, state or province, country, and ZIP or foreign postal code 68102			C If exemption	application is pendin	g, check here
- CI	and all	I that apply     Initial return     Initial return of a	former multip phants		D.1 Foreign or	anniantione chooli he	F
or Cr	теск ап	I that apply ☐ Initial return ☐ Initial return of a☐ Final return ☐ Amended return	former public charity			ganizations, check he ganizations meeting	▶ ∟
		Address change Name change				k here and attach co	
H Ch	neck ty	pe of organization Section 501(c)(3) exempt private	foundation			undation status was t n 507(b)(1)(A), chec	
		· · · · · · · · · · · · · · · · · · ·	e private foundation		under sectio	11 307(B)(1)(A), elice	KITCIC
			☑ Cash ☐ Accru	al		ation is in a 60-month	
		rom Part II, col (c), \$ 738,659			under section	n 507(b)(1)(B), chec	k nere
		(Part I, column (d) must	be on cash basis )				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	(b)	Net investment	(c) Adjusted net	(d) Disbursements for charitable
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	expenses per books	(5)	income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach	0				(cush busis only)
		schedule)					
	2	Check ► ☑ if the foundation is <b>not</b> required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	2,091		2,091	2,091	
	5a	Gross rents					
	ь	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	74,875				
ver	ь	Gross sales price for all assets on line 6a 885,823					
$\aleph$ e	7	Capital gain net income (from Part IV, line 2)			884,787		
	8	Net short-term capital gain					
	9	Income modifications					
	10a b	Gross sales less returns and allowances Less Cost of goods sold					
	6	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	4,891				
	12	Total. Add lines 1 through 11	81,857		886,878	2,091	
	13	Compensation of officers, directors, trustees, etc	125,000		,	,	125,000
	14	Other employee salaries and wages	118,750				118,750
Sè	15	Pension plans, employee benefits	8,078				8,078
1156	16a	Legal fees (attach schedule)					
× De	ь	Accounting fees (attach schedule)	<b>%</b> 6,270		1,568	1,568	4,702
Operating and Administrative Expenses	c	Other professional fees (attach schedule)					
Ě	17	Interest	6				(
Stre	18	Taxes (attach schedule) (see instructions)	32,407				32,407
≣	19	Depreciation (attach schedule) and depletion					
Ē	20	Occupancy					
ָ ק	21	Travel, conferences, and meetings					
<u>=</u>	22	Printing and publications	<b>6</b> 1				
ğus	23	Other expenses (attach schedule)	61,011		440	440	58,089
erai	24	Total operating and administrative expenses.	254 522		3.000	3 000	247 023
ă	25	Add lines 13 through 23	351,522 1,129,000		2,008	2,008	347,032 1,129,000
	26	Total expenses and disbursements. Add lines 24 and	1,129,000				1,129,000
		25	1,480,522		2,008	2,008	1,476,032
	27	Subtract line 26 from line 12				-	
	a	Excess of revenue over expenses and disbursements	-1,398,665				
	ь	Net investment income (If negative, enter -0-)			884,870		
	С	Adjusted net income(If negative, enter -0-)				83	
_			1				

	_				
		Less allowance for doubtful accounts ▶	6,317		
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)	810,948	<b>%</b> _0	C
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less_accumulated depreciation (attach schedule)			

738,659

109,526

2,130,961

2,130,961

2,240,487

6,363

6,363

732,296

732,296

738,659

2

3

4

5

6

2,130,961

-1,398,665

732,296

732,296 Form **990-PF** (2017)

738,659

### 12 Investments—mortgage loans . . . . . 13 Investments—other (attach schedule) . 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe > \_ Total assets (to be completed by all filers—see the 16 instructions Also, see page 1, item I) 2,240,487 17 109,526 Accounts payable and accrued expenses . . . . . 18 Liabilities 19 Deferred revenue . 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here ▶

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

Capital stock, trust principal, or current funds . . . . Paid-in or capital surplus, or land, bldg, and equipment fund

22

23

24

25

26

28

29 Net 30

31 Part III

2

**Fund Balances** 

ŏ

Assets 27 Other liabilities (describe -\_

Unrestricted

Temporarily restricted Permanently restricted . .

and complete lines 27 through 31.

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

Add lines 1, 2, and 3 . . . . . . .

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Page **3** 

	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1aSee Additional Data Table	e				
b					
c					
d					
e					
	(f)		(g)	(	h)
(e) Gross sales price	Depreciation allowed (or allowable)	Cost or	other basis ense of sale	Gain o	r (loss) ) minus (g)
a See Additional Data Table	e				
b					
c					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		1)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	( <b>k)</b> of col (ı) (յ), ıf any	Gains (Col ( col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))
a See Additional Data Table			(3),	<u> </u>	. ,,
b					
<u>-</u>					
d					
e					
	or (net capital loss)  gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructions :	ons) If (loss), enter -0	Part I, line 7	3	884,787
Port V Qualification I	Indon Section 4040/a) for De	duced Tay on Not	Tourselment T		
<u> </u>	Jnder Section 4940(e) for Re				
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment inco	me )	
If section 4940(d)(2) applies, le	•				
If "Yes," the foundation does no	e section 4942 tax on the distributal ot qualify under section 4940(e) Do	not complete this part	·		es 🗹 No
	nount in each column for each year,	see instructions before	making any entri		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	<b>(d)</b> Distribution rati (col (b) divided by c	
2016	1,532,358		2,639,348		0 580582
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
2 Total of line 1, column (d	d)		2		1 037637
number of years the foun	o for the 5-year base period—divide to adation has been in existence if less	than 5 years 🔒	′′ <u>  3</u>		0 207527
	ncharitable-use assets for 2017 fron	•	4		1,548,980
<b>5</b> Multiply line 4 by line 3			5		321,455
	ent income (1% of Part I, line 27b)		6		8,849
					330,304
	ons from Part XII, line 4 ,				1,476,032
If line 8 is equal to or gre	eater than line 7, check the box in Pa	art VI, line 1b, and com	plete that part us	ing a 1% tax rate Se	e the Part VI

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

,	
	formation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,
Down WITT	of mation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,
Latt ATTT	d Contractors

1 List all officers, directors, truste	es, f	oundation managers an	d their compensation (	see instructions).	
(a) Name and address		Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred	Expense account, (e) other allowances
Mary C Reckmeyer	Chai	rman/Treasurer	0	compensation 0	0
8441 FIRETHORN LANE	5 0	,		v	
Lincoln, NE 68520	<u> </u>				
Connie A Rath	Pres 40 0	ident	125,000	5,398	0
45 Sutton Square 307 Washington, DC 20024					
Jane E Miller		etary	0	0	0
13401 Nicholas Street Omaha, NE 68354	1 0				
James Clifton	Dire	ctor	0	0	0
3150 South Street NW 3D	1 0		Ĭ	v	Ĭ
Washington, DC 20007	<u> </u>				
2 Compensation of five highest-pa	id eı	nployees (other than th	ose included on line 1		ne, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	aıd	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
KRISTIN MEEK 3020 DENT PLACE APT 24W		DIR OF EDUCATION 40 0	56,250	2,680	0
WASHINGTON, DC 20007					
EMILY MASSEL		EXECUTIVE DIRECTOR	62,500	0	0
2435 I ST NW WASHINGTON, DC 20052		40 0			
Total number of other employees paid ov					
3 Five highest-paid independent of					
(a) Name and address of each perso	n pai	d more than \$50,000	( <b>b)</b> Type	e of service	(c) Compensation
			-		
			-		
			1		
			]		
<b>Fotal</b> number of others receiving over \$50	0,000	for professional services.			
Part IX-A Summary of Direct (					
List the foundation's four largest direct charitable organizations and other beneficiaries served, con	e activ	rities during the tax year Inclu	ide relevant statistical informa	ation such as the number of	Expenses
1 PLEASE REFER TO ENCLOSED ATTACH			s produced, etc		347,032
2					317,7332
3					
4					
Part IX-B Summary of Program	m-R	elated Investments	(see instructions)		
Describe the two largest program-related inve	estme	ents made by the foundation di	uring the tax year on lines 1 a	and 2	Amount
1					
2					
All other program-related investments	See	instructions			
3	200				
Fotal. Add lines 1 through 3 .					
					Form QQ0-DE (2017)

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

1,476,032

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8.849 1,467,183

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

income Enter 1% of Part I. line 27b (see instructions).

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

5

a From 2012. . . . . **b** From 2013. . . . . c From 2014. . . . d From 2015. . . . . e From 2016. . . . .

XII, line 4 ▶ \$

indicated below:

3 Excess distributions carryover, if any, to 2017

f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2017 from Part

same amount must be shown in column (a) )

a Applied to 2016, 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 2017 distributable amount. . . . e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

6 Enter the net total of each column as

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . . **b** Excess from 2014. . c Excess from 2015. . . . d Excess from 2016. . . e Excess from 2017. . .

Subtract lines 7 and 8 from line 6a . . . . . .

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 e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . . f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 . . . . . . 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 2012 not applied on line 5 or line 7 (see instructions) . . . (d)

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Page 9

OIII	1 330-F1 (2017)	,					
R	art XIII U	ndistrib	uted Ir	come	see inst	ructions	)
							(a) Corpus
1	Distributable a	mount for	2017 fro	m Part	XI, line 7		
2	Undistributed i	ncome, if a	ny, as o	f the e	nd of 2017		
а	Enter amount	for 2016 o	nly				
b	Total for prior	years 2	.0,	20	_ , 20		

(b)

Years prior to 2016

(c)

2016

Forr	m 990-PF (2017)					Page <b>10</b>
2	art XIV Private Operating Found	ations (see instru	ctions and Part VI	I-A, question 9)		
	If the foundation has received a ruling or det foundation, and the ruling is effective for 20	17, enter the date of	the ruling	▶∟		
	Check box to indicate whether the organizati	on is a private operat	ing foundation desci		4942(j)(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 each	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	
	year listed	83	8,185		1,874	10,142
	85% of line 2a	71	6,957		1,593	8,621
	Qualifying distributions from Part XII, line 4 for each year listed	1,476,032	1,537,427	1,451,836	126,869	4,592,164
d	Amounts included in line 2c not used directly for active conduct of exempt activities	1,125,000	1,125,000	1,125,000		3,375,000
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	351,032	412,427	326,836	126,869	1,217,164
	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	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	51,633	87,978	144,482	101,703	385,796
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) (3) Largest amount of support					0
	from an exempt organization (4) Gross investment income					0
	Supplementary Information	(Complete this p	art only if the o	rganization had	\$5.000 or more	
Pa	assets at any time during the			· <b>3</b>	40,000 00 000	
1 a	Information Regarding Foundation Mana- List any managers of the foundation who hav before the close of any tax year (but only if SHIRLEY M CLIFTON	e contributed more th				
b	List any managers of the foundation who own ownership of a partnership or other entity) o NONE				rge portion of the	
<b>4</b>						•
2	Information Regarding Contribution, Gra	ant, Gift, Loan, Scho	olarship, etc., Prog	grams:		
	Check here ▶ ☐ If the foundation only mak unsolicited requests for funds If the foundar other conditions, complete items 2a, b, c, ar	tion makes gifts, gran				der 
a	The name, address, and telephone number of APPLICATIONS TO MARY C RECKMEYER 1001 Gallup Drive Omaha, NE 68102 (402) 938-6220	or e-mail address of th	he person to whom a	applications should	be addressed	
b	The form in which applications should be sub APPLICATION FORM AS REQUIRED BY FOUN					
С	Any submission deadlines DEADLINES FOR SUBMISSION ARE NOT SPE	CIFIED				
d	Any restrictions or limitations on awards, surfactors		areas, charitable fie	elds, kınds of ınstıtu	tions, or other	
	THERE ARE NOT RESTRICTIONS OR LIMITAT	IONS ON AWARDS				

nter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
a	Buomicos code	Announc	Exclusion code	, and diffe	
b					
c					
e					
f					
g Fees and contracts from government agencies  2 Membership dues and assessments					
Interest on savings and temporary cash					
Investments			14	2,091	
5 Net rental income or (loss) from real estate				,	
a Debt-financed property					
<ul><li>b Not debt-financed property.</li><li>.</li><li>.</li><li>Net rental income or (loss) from personal property</li></ul>					
7 Other investment income					
Gain or (loss) from sales of assets other than			18	74,875	
Inventory			18	74,673	
O Gross profit or (loss) from sales of inventory					
1 Other revenue a FORM 990-PF FEDERAL TAX REFUND					4,89
b					4,65
c					
d					
e				76,966	4,89
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)			1	76,966 <b>3</b>	
e	lations )			· · · · · · · · · · · · · · · · · · ·	
e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
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e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
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e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
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e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	
e	lations)  le Accomplisi  income is report	hment of Exem	pt Purposes of Part XVI-A contribu	3ited importantly to	4,89: 81,857

Form 990-PF (2017)		Pa	ge <b>13</b>
Part XVII  Information Regarding Transfers To and Transactions and Relationships With No Exempt Organizations	oncharitable		
1 Did the organization directly or indirectly engage in any of the following with any other organization described in sec (c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?	tion 501	Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	.  1a(1)		No
(2) Other assets			No
<b>b</b> Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization			No
(3) Rental of facilities, equipment, or other assets		_	No
(4) Reimbursement arrangements			No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	. 1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No
In any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services reco (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transaction		naomon	to
(a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transaction	is, and sharing arra	ingemen	LS
	-		

(0)	enc	of filance of Services of It	lembership of full	diaising soi	icitations					10(0)	140
<b>c</b> Shar	ing o	of facilities, equipment, r	mailing lists, other	assets, or	paid employees					1c	No
<b>d</b> If the	e an	swer to any of the above	ıs "Yes." complet	e the follow	una schedule C	olumn (b	) should alv	ways show the t	fair market	value	
		ods, other assets, or ser									
		ansaction or sharing arra									
	•	_	•		-						
(a) Line I	No	(b) Amount involved	(c) Name of nonc	harıtable exe	mpt organization	(d) D	Description of	transfers, transac	tions, and sha	ring arrangem	ents
					-						
	-+										
	-+										
	-										
	_										
	_										
2a Is th	e foi	undation directly or indir	ectly affiliated wit	h. or relate	d to, one or mor	e tax-exe	empt organi	zations			
		d in section 501(c) of the	•	•	•					☐ Yes <b></b>	<b>Z</b> No
		, ,	•	i section se	11(0)(3)) 01 111 50	-cuon 52.	/· · · ·			L ies E	Y IVO
b If "Y	es,"	complete the following s		1							
		(a) Name of organization	on	(1	) Type of organiza	ition		(c) Descri	ption of relati	onship	
	11		T 4-1 T 1			11					- 1
		der penalties of perjury, my knowledge and belief									
		nch preparer has any kno		it, and comp	Diete Declaratio	ii oi prep	arer (other	than taxpayer)	is based on	all lillorillati	1011 01
Sign	****	inch preparer has any kind	owieuge		I						
		*****			2018-05-15		*****		May t retur	he IRS discuss	this
Here							<b>\</b>			the preparer sh	nown
	7	C			Data	,	T.H.		below	<i>r</i>	
		Signature of officer or t	rustee		Date		Title		(see i	nstr )? 🗹 Ye	s 🗆 No
								I	<u> </u>	•	

Print/Type preparer's name Preparer's Signature Date PTIN Check if self-P00415828 employed ▶ □ Vonita L Wood 2018-11-13 Firm's name ► Labenz & Associates LLC Fırm's EIN ▶ Firm's address ▶ 8555 Pioneers Boulevard Lincoln, NE 68520

Paid **Preparer Use Only** 

Phone no (402) 437-8383 Form **990-PF** (2017)

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 123 SH GALLUP INC 2008-12-31 2017-01-01 123 SH GALLUP INC D 2008-12-31 2017-02-01 123 SH GALLUP INC D 2008-12-31 2017-03-01 D 107 SH GALLUP INC 2008-12-31 2017-04-01 D 107 SH GALLUP INC 2008-12-31 2017-05-01 107 SH GALLUP INC D 2008-12-31 2017-06-01 107 SH GALLUP INC D 2008-12-31 2017-07-01 D 107 SH GALLUP INC 2008-12-31 2017-08-31 94 64 SH GALLUP INC D 2008-12-31 2017-09-01 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 99,876 128 99,748 99,876 128 99,748 99.876 128 99,748 99,617 111 99,506 99,617 111 99,506 99,506 99,617 111 99,617 111 99,506 99,617 111 99,506 97 88,110 88,013 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 99,748 99,748 99,748 99,506 99,506 99,506 99,506 99,506 88,013

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Data -		D	LN: 93491319020608
TY 2017 Accounting Fe	ees Sche	dule			_
	Name:	The Clifton Fo	oundation		
	EIN:	40-0002257			
Accounting Fees Schedule					
Category	Amo	unt Ne	t Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

1,568

1,568

4,702

6,270

ACCOUNTING FEES

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491319020608 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2017 Depreciation Schedule

# Name: The Clifton Foundation EIN: 40-0002257

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319020608					
TY 2017 Investments Corporate Stock Schedule								
14 2017 Investments Corporat	e stock sche	uie						
Name: 7	The Clifton Found	ation						
ETNI. /	10 0003357							

<b>EIN:</b> 40-0002257				
Name of Stock	Name of Stock		End of Year Fair Market Value	
GALLUP, INC		0	0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491319020608
TY 2017 Other Expenses Schedule				
Name:	The Clifton Four	ndation		
<b>EIN:</b> 40-0002257				
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	15	4	4	11
POSTAGE	312	78	78	234
CHARITABLE TRAVEL	1,766			1,766

2,627

1,588

15,544

3,043

15,000

577

144

332

2,627

794

166

15,544

1,521

15,000

433

144

TRAVEL

CHARITABLE MEALS

STRENGTH LAB TRAVEL

STRENGTHS LAB MEALS

**DUES & SUBSCRIPTIONS** 

STRENGTH LAB PROMOTIONAL MEALS

STRENGTHS LAB SUBCONTRACTING

Expenses per Income Income Charitable Books Purposes 87 OFFICE SUPPLIES 348 87 261 STRENGTHS LAB OFFICE SUPPLIES 1,157 1,157 STRENGTHS LAB MATERIALS&SUPPLY 13,034 13,034

**Net Investment** 

**Adjusted Net** 

Disbursements for

3,207

117

99

78

Revenue and

STRENGTHS LAB DUES & SUBSCRIPT	773			773
INTERNET, SOFTWARE	506	127	127	379
WEBSITE/BRANDING CONSULTING	456			456

3,207

117

99

78

WEBSITE/BRANDING CONSULTING 456

Other Expenses Schedule

STRENGTHS LAB BUILDERS EVENTS

STRENGTHS LAB POSTAGE/SHIPPING

STRENGTHS LAB ADVERTISING

STRENGTHS LAB TEAM BUILDING

Description

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

Other Expenses Schedule

SUPPLIES AND MATERIALS

DLN: 93491319020608

Name: The Clifton Foundation

As Filed Data -

**EIN:** 40-0002257

FORM 990-PF FEDERAL TAX REFUND

Other Income Schedule Description Revenue And Net Investment **Adjusted Net Income Expenses Per Books** Income

4,891

efile GRAPHIC print - DO NOT PROCESS	As Filed Data		DL	N: 93491319020608
TY 2017 Taxes Schedule				
	The Clifton F 40-0002257			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FORM 990-PF EXCISE TAX ESTIMTE	3,000			3,000
FORM 990-PF EXTENSION	11,000			11,000
PAYROLL TAX EXPENSE	18,407			18,407