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

OMB No 1545-0052

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

For	calend	dar year 2017 or tax year beginning , a	ind ending				
Na	ne of fou	undation			A Emplo	yer identification number	
ĸ	יייזק	SINGER FAMILY FOUNDATION INC			46-	-4602121	
_	_	d street (or P O box number if mail is not delivered to street address)	Ro	om/suite		one number (see instructions))
_7	<u> 15</u> 1	N 25TH STREET			402	2-371-9721	
		state or province, country, and ZIP or foreign postal code			C If exem	nption application is pending, i	check here
	ORF				1		
G	check a		n of a former public ch	arity	D 1. For	eign organizations, check her	re 🕨 📋
		Final return Amended			1	eign organizations meeting th	
		Address change Name cha		- 11.	ļ °°°	% test, check here and attach	computation
		type of organization: 🛛 Section 501(c)(3) exempt private		θΨ	1 '	te foundation status was term	inated under
		:	e private foundation	<u> </u>	1	1 507(b)(1)(A), check here	
		rket value of all assets at J Accounting method	X Cash Acc	rual		oundation is in a 60-month ter section 507(b)(1)(B), check he	
	-	ear (from Part II, col. (c), Under (specify)	L \		under	Section 507 (b)(1)(b), Greek IN	
	ne 16) art I				.]	···	(d) Disbursements
F-1	art :	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net in		(c) Adjusted net income	for chantable purposes
		the amounts in column (a) (see instructions))	books	moc	nne	meome	(cash basis only)
03	1	Contributions, gifts, grants, etc., received (attach schedule)					·····
WI	2	Check ► X if the foundation is not required to attach Sch B					
UM	3	Interest on savings and temporary cash investments	295		295	295	
	4	Dividends and interest from securities			· -		
	5a	Gross rents					
ne	b	Net rental income or (loss)					
e	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a	I DEAL	IVED	0		
Œ	7 8	Capital gain net income (from Part IV, line 2) Net short-term capital gain	- T	3 > 1	78	0	
	9	Income modifications	-rt) 6	g ^^48	Ϋ́		
	10a	Gross sales less returns and allowances		\$ 6 - 10 -	92	***************************************	
	Ь	Less Cost of goods sold		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , ,		
	c	Gross profit or (loss) (attach schedule)	0GU	V CO			
G2	11	Other income (attach schedule)					
0.0	12	Total. Add lines 1 through 11	295		295	295	
penses (1018	13	Compensation of officers, directors, trustees, etc	0				
<u>~</u> ⊕	14	Other employee salaries and wages					
ē	15	Pension plans, employee benefits		ļ			
ι×	16a	Legal fees (attach schedule)		_	-	· · · · · · · · · · · · · · · · · · ·	
(e)	b	Accounting fees (attach schedule) STMT 1	525				525
	C	Other professional fees (attach schedule)					
£	17	Interest			<u>.</u>		
	18	Taxes (attach schedule) (see instructions)		<u> </u>			
Œ	19 20	Depreciation (attach schedule) and depletion Occupancy		<u> </u>			
A O	21	Travel, conferences, and meetings					
Operating and Administrative Exp	22	Printing and publications		<u> </u>			
ja	23	Other expenses (att sch.) STMT 2	5,900				5,900
ij	24	Total operating and administrative expenses.	,		_ =		
Tal		Add lines 13 through 23	6,425	L	0	0	6,425
) be	25	Contributions, gifts, grants paid	29,912				29,912
-O	26	Total expenses and disbursements. Add lines 24 and 25	36,337		0	0	36,337
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	-36,042				
	b	Net investment income (if negative, enter -0-)		ļ	295		
	c_	Adjusted net income (if negative, enter -0-)		ł		295	<u> </u>

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For Paperwork Reduction Act Notice, see instructions.

DAA

Fo	orm 99	0-PF (2017) KRUTSINGER FAMILY FOUNDATION	INC	46-460212	1	Page 2
	Part I	Balance Sheets Attached schedules and amounts in the description column	nn	Beginning of year	End o	
_	FAIL	should be for end-of-year amounts only (See instructions	s)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing				
	2	Savings and temporary cash investments		312,243	276,201	276,201
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶		l l		
		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 (att. schedule)				
		Less allowance for doubtful accounts ▶	0			
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
ž	10a	Investments – U S and state government obligations (attach schedule)				
	ь	Investments – corporate stock (attach schedule)				
	С	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch.)				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch.)				
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the				
4		instructions. Also, see page 1, item I)		312,243	276,201	276,201
	17	Accounts payable and accrued expenses				
	18	Grants payable				
ë	19	Deferred revenue				
Ĭ	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				
7	22	Other liabilities (describe ▶)			
4	23	Total liabilities (add lines 17 through 22)		0	0	
		Foundations that follow SFAS 117, check here	► X]		
S		and complete lines 24 through 26 and lines 30 and 31.				
崩	24	Unrestricted		312,243	276,201	
ğ	25	Temporarily restricted				
٥	26	Permanently restricted	_ 			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here]		
딋		and complete lines 27 through 31.				
2	27	Capital stock, trust principal, or current funds				
Se	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
AS	29	Retained earnings, accumulated income, endowment, or other funds				
힐	30	Total net assets or fund balances (see instructions)		312,243	276,201	
2	31	Total liabilities and net assets/fund balances (see		1		
بِـ		instructions)		312,243	276,201	
_	Part II					
1		net assets or fund balances at beginning of year – Part II, column (a), lii	ne 30 (mu	ist agree with		
_		f-year figure reported on prior year's return)			1	312,243
2		amount from Part I, line 27a			2	-36,042
3		increases not included in line 2 (itemize)			_ 3	A
4		nes 1, 2, and 3			4	276,201
5		pases not included in line 2 (itemize)		h) lime 20	5	076 001
v	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II,	, column (u), line 30	1 6	276,201

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

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7

36,568

36,337

7 Add lines 5 and 6

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

	1990-PF (2017) KRUTSINGER FAMILY FOUNDATION INC 46-4602121			Pa	<u>ge 4</u>
_ <u>P</u>	art VI · Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
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				6
	here ▶ ☐ 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-)				_0
3	Add lines 1 and 2				6
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				6
6	Credits/Payments.				
а	2017 estimated tax payments and 2016 overpayment credited to 2017				
b	Exempt foreign organizations – tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments. Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				<u>6</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
<u> 11 </u>	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11				
P	art VII-A Statements Regarding Activities				
1a	, , , , , , , , , , , , , , , , , , , ,			Yes	No
	participate or intervene in any political campaign?		<u> 1a</u>		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				~,
	Instructions for the definition		1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.				77
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. ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
_	on foundation managers \$			ĺ	v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		<u>x</u> _
2	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				v
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	-	3		<u>x</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N/A	4a	-	
b	· · · · · · · · · · · · · · · · · · ·	N/A	4b		<u>x</u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		5		<u> </u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
J	By language in the governing instrument, or	-			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	ĺ	6	x	
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	ŀ	7	X	
، 8a	Enter the states to which the foundation reports or with which it is registered. See instructions.		-		
Ja	NE				
ь	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	ŀ	8b	\mathbf{x}	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		<u> </u>		
•	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Part XIV. If "Yes,"			ĺ	1/
	complete Part XIV	Î	9		x V
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	Ì	-		<u></u> -
	names and addresses		10		x
				0-PF	

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of

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 charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

foundation had excess business holdings in 2017)

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X

3b

4a

N/A

	n 990-PF (2017) KRUTSINGER FA	MILY FOUNDATION Activities for Which Fo		602121	nued)		Pa	ge 6
	During the year did the foundation pay or inc		IIII 4720 May Bolte	squired (oorkii		T	T	
	(1) Carry on propaganda, or otherwise atter	-	tion 4945(e))?	☐ Ye	s X No	1		
	(2) Influence the outcome of any specific po							
	directly or indirectly, any voter registration	•		[Ye	s X No			
	(3) Provide a grant to an individual for trave		es?	☐ Y6	s X No			
	(4) Provide a grant to an organization other							
	section 4945(d)(4)(A)? See instructions	, , ,			s X No			
	(5) Provide for any purpose other than relig	ious, charitable, scientific, litera	ry, or educational ,			- 1		
	purposes, or for the prevention of cruelt			Ye	es X No			
b	If any answer is "Yes" to 5a(1)-(5), did any		under the exceptions de	escribed in		- 1		
	Regulations section 53 4945 or in a current	notice regarding disaster assist	tance? See instructions		N/A	5b		
	Organizations relying on a current notice re	garding disaster assistance, che	eck here		▶ 🔲			
С	If the answer is "Yes" to question 5a(4), does	es the foundation claim exemption	on from the tax			- 1		
	because it maintained expenditure responsi	bility for the grant?		N/A 🔙 Y	es 🗌 No			
	If "Yes," attach the statement required by R	egulations section 53.4945–5(d)		Į.			
6a	Did the foundation, during the year, receive	any funds, directly or indirectly,	, to pay premiums					
	on a personal benefit contract?			Y	es 🗶 No			
b	Did the foundation, during the year, pay pre	miums, directly or indirectly, on	a personal benefit contra	act?	Ļ	6b		X
	If "Yes" to 6b, file Form 8870.							
7a	At any time during the tax year, was the fou	ndation a party to a prohibited t	ax shelter transaction?	[Y	es X No	1		
	If "Yes," did the foundation receive any production				N/A	7b		
P	art VIII Information About Office	ers, Directors, Trustees	s, Foundation Mana	agers, Highly I	Paid Employe	es,		
	and Contractors			4				
1	List all officers, directors, trustees, and fo	undation managers and their	compensation. See ins	tructions.	(4) Cantabutana ta		_	
	(a) Name and addr	ess	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		oense ad r allowar	
RO	ONALD KRUTSINGER	NORFOLK	PRESIDENT					
71	15 N 25TH STREET	NE 68701	0.00	o	0			0
C.Z	AROL KRUTSINGER	NORFOLK	VICE-PRES					
71	15 N 25TH STREET	NE 68701	0.00	0	0			0
CI	HRIS KALKOWSKI	OMAHA	DIRECTOR					
10	520 DODGE STREET, STOP 1057	NE 68197-1057	0.00	0	0			0
2	Compensation of five highest-paid empl	oyees (other than those inclu	ded on line 1 – see inst	tructions). If none	e, enter			
	(a) Name and address of each employee paid	more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		pense ao er allowa	
N	ONE							
							 .	
					 			
Cota	at number of other employees paid over \$50 (ነበበ			•	1		0

Form 990-PF (20	017) KRUTSINGER FAMILY FOUNDATION INC	46-4602121	Page 7
Part VIII	Information About Officers, Directors, Trustees, Found	ation Managers, Highly Paid I	Employees,
	and Contractors (continued)		
_ 3 Five high	est-paid independent contractors for professional services. See instru	ctions. If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			_
		1	
		i	
	·		
Total number of	others receiving over \$50,000 for professional services		>
Part IX-A	Summer of Direct Ober 14-ble Astroities		
Part IA-A	Summary of Direct Charitable Activities		
List the foundation!	s four largest direct chantable activities during the tax year. Include relevant statistical information s	uch as the number of	
organizations and o	other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1 N/A			
_			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instru	ctions)	
Describe the two la	rgest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-re	elated investments See instructions		
3			

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Total. Add lines 1 through 3

	3a	
	3b	
	4	36,337
	5	0
	6	36,337
found	lation	

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 section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

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b

4

Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

Enter 1% of Part I, line 27b. See instructions

43,854

21,853

8,607

d

Excess from 2014

Excess from 2015

Excess from 2016

Excess from 2017

	1990-PF (2017) KRUTSINGER	FAMILY FOUNI	DATION I	NC	46-4602	121	Page 10
Pi	art XIV Private Operating For	u ndations (see in	structions an	d Part V	II-A, question	9)	
1a	If the foundation has received a ruling or	determination letter th	at it is a private	operating			
	foundation, and the ruling is effective for	2017, enter the date of	of the ruling		•		
b	Check box to indicate whether the found	ation is a private opera	ting foundation	described	In section	4942(j)(3) or 4	1942(j)(5) /
2a	Enter the lesser of the adjusted net	Tax year			Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2017	(b) 2016		(c) 2015	(d) 2014	/ (e) rotal
	investment return from Part X for						'
	each year listed						
b	85% of line 2a						
С	Qualifying distributions from Part XII,						
	line 4 for each year listed						
d	Amounts included in line 2c not used directly						
	for active conduct of exempt activities					<u>/</u> '	
e	Qualifying distributions made directly						
	for active conduct of exempt activities		[
	Subtract line 2d from line 2c						
3	Complete 3a, b, or c for the						
	alternative test relied upon:]			1	
а	"Assets" alternative test – enter:						
	(1) Value of all assets		ļ	/	/		
	(2) Value of assets qualifying under	,		Δ			
	section 4942(j)(3)(B)(i)			_/ -			
b	"Endowment" alternative test – enter 2/3						
	of minimum investment return shown in		/	'			
	Part X, line 6 for each year listed		/				
С	"Support" alternative test – enter.		/	Ì			
	Total support other than gross investment income (interest,		/				
	dividends, rents, payments on		/				i
	securities loans (section		/				
	512(a)(5)), or royalties)		/				
	(2) Support from general public	/				1	
	and 5 or more exempt						
	organizations as provided in section 4942(j)(3)(B)(iii)						
	(3) Largest amount of support from	/			·		
	an exempt organization			-			
	(4) Gross investment income						
Pa	ert XV Supplementary Inform	nation (Complete	this part o	nly if the	e foundation	had \$5 000 or m	ore in assets at
	any time during the y			,		40,000 01 111	oro iii accoto at
1	Information Regarding Foundation Ma					, <u>-</u>	
а	List any managers of the foundation who	have contributed mor	e than 2% of th	e total cor	ntributions receive	ed by the foundation	
	before the close of any tax year (but only					-	
	N/A			, ,		. , ,	
b	List any managers of the foundation who	own 10% or more of	the stock of a co	orporation	(or an equally la	rge portion of the	
	ownership of a partnership or other entity	v) of which the foundat	tion has a 10%	or greater	ınterest		
	N/A						
2	Information Regarding Contribution, C						
	Check here ▶ 🗓 If the foundation only						
	unsolicited requests for funds If the foun	idation makes gifts, gr	ants, etc , to inc	dıvıduals o	r organizations u	nder other conditions,	ı
	complete items 2a, b, c, and d. See instr	uctions				·	
а	The name, address, and telephone numb	oer or email address o	f the person to	whom app	lications should	be addressed.	
	N/A						
					 		
b	The form in which applications should be	submitted and inform	ation and mate	rials they s	should include		
	N/A						
С	Any submission deadlines:						
	N/A		<u> </u>		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
ď	Any restrictions or limitations on awards,	such as by geographi	cal areas, chan	table field	s, kınds of ınstıtu	tions, or other	
	factors:						
	N/A						202 25
DAA							Form 990-PF (2017)

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Grants and Contributions Paid During th	If recipient is an individual,		- 	
Recipient	show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
SEE STATEMENT 3				
				29,912
				29,912
Total		<u></u>	▶ 3a	29,912
b Approved for future payment				
N/A				
			- ·	
Total		L	▶ 3b	

Preparer's signature

SCHUMACHER SMEJKAL BROCKHAUS & HERLEY PC

508 WEST PROSPECT AVENUE

68701

NORFOLK, NE

Mark Brownhaws CPA

402-379-2722 Form 990-PF (2017)

Check _____ if self-employed

Date

PTIN

Firm's EIN ▶

Phone no

2/6/18

P00267749

47-0552214

Paid

Preparer

Use Only

Print/Type preparer's name

MARK BROCKHAUS

Firm's name ▶

Firm's address ▶

46-4602121	Federal St	deral Statements		
Sta	Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	rt I, Line 16b - Accou	nting Fees	
Description ACCOUNTING TOTAL	Total \$ 525	Net Investment	Adjusted Net	Charitable Purpose \$ \$ \$ \$ \$225
18	Statement 2 - Form 990-PF, Pa	Part I, Line 23 - Other Expenses	xpenses	
Description	Total	Net Investment	Adjusted	Charitable Purpose
EXPENSES ADMINISTRATION FEES MISC TOTAL	5,400 5 500 s 5,900	n v		5,400
Statement 3 - Fo	Statement 3 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year	- Grants and Contril	outions Paid During t	he
Name	Address Relationship Status	<u>s</u>	Purpose	Amount
HAIGLER METHODIST CHURCH HAIGLER NE 69030 MAYO CLINIC ROCHESTER MN 55905 NEBRASKA HISTORICAL SOCIETY LINCOLN NE 68501 FIRST UNITED METHODIST CHURCH NORFO NORFOLK NE 68701 KIDS WISH NETWORK HOLIDAY FL 34691 HAIGLER COMMUNITY FOUNDATION HAIGLER NE 69030-0127 HAXTUN FIRE RELIEF HAXTUN CO 80731 KANSAS LIVESTOCK FOUNDATION TOPEKA KS 66614	361 S KING AVE PUBI 200 FIRST STRE PUBI 1500 R ST PUBI 406 W PHILIIP PUBI PUBI PUBI PUBI PO BOX 127 PUBI PO BOX 38 PUBI PO BOX 38 PUBI PUBI PO BOX 38 PUBI PUBI PUBI PUBI PUBI PUBI PUBI PUBI	SW CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARITABLE		5,000 1,300 100 5,000 1,000 1,000

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Σ.	
460212	

Federal Statements

Statement 3 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	A	Address			
Address	Relationship	Status		Purpose	Amount
NORFOLK FAMILY YMCA	301 W BENJAMIN AVE	AMIN AVE			
NORFOLK NE 68701		PUBLIC	CHARITABLE		2,000
SHELLER CEMETERY % BLAINE MOATS	PO BOX 38				
GRUNDY CENTER IA 50638		PUBLIC	CHARITABLE		4,000
HILLSDALE COLLEGE	33 EAST COI	COLLEGE STREET			
HILLSDALE MI 49242		PUBLIC	CHARITABLE		200
ST. JOHN'S LUTHERAN CHURCH	42534 GERMA	RMAN VALLY RD			
BREWSTER NE 68821		PUBLIC	CHARITABLE		200
ST. JUDE CHILDRENS RESEARCH HOSPITA 501 ST.		JUDE PLACE			
MEMPHIS TN 38105		PUBLIC	CHARITABLE		100
DUNDY COUNTY STRATTON HIGH SCHOOL	400 9TH AVE	ۓ			
BENKELMAN NE 69021		PUBLIC	CHARITABLE		100
NORFOLK AREA COMMUNITY FOUNDATION	609 W NORF(RFOLK AVE			
NORFOLK NE 68701		PUBLIC	CHARITABLE		2,000
NORFOLK AREA HABITAT FOR HUMANITY	PO BOX 1251	_			
NORFOLK NE 68702-1251		PUBLIC	CHARITABLE		200
NET PUBLIC TV	1800 N 33RD ST) ST			
LINCOLN NE 68503		PUBLIC	CHARITABLE		100
TOTAL					29,912