

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.

For	r caler	ndar year 2017 or tax year beginning Januar		7, and		December 31	, 20 17
		oundation	<u> </u>			er identification numb	
Ra	imondo	Foundation				47-3435990	
Nu	mber an	nd street (or P.O. box number if mail is not delivered to street address)	Room	√suite	B Telephor	e number (see instruct	ions)
40	25 E. 23	3rd Street				402 563 7209	1
, Crt	y or tow	n, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ling, check here ▶ □
Co	lumbus	s, NE 68601			•		
G	Check	call that apply: Initial return Initial return	of a former public	charity	D 1. Foreig	n organizations, check	here ▶ 🗌
		☐ Final return ☐ Amended i			2 Foreig	n organizations meetin	n the 85% test
		Address change Name char) check	here and attach compi	tation · · ▶ 🗌
Н		type of organization: Section 501(c)(3) exempt p		• 1		foundation status was 07(b)(1)(A), check here	
		on 4947(a)(1) nonexempt charitable trust 🔲 Other tax			30000011	or (b)(1)(v), chock here	
ı		narket value of all assets at J Accounting method	: 🗹 Cash 🗌 A	ccrual	F If the fou	ndation is in a 60-mont	h termination
		f year (from Part II, col. (c), Other (specify)			under se	ction 507(b)(1)(B), chec	k here ▶ 🗌
		6) ► \$ 10,102 (Part I, column (d) must be	on cash basis.)	,		· · · · · · · · · · · · · · · · · · ·	
Ľ	art I		(a) Revenue and	(b) Net	investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books		come	income	purposes
_			250.000				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	250,000	<u> </u>			
	3	Check ▶ ☐ if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments	0	 			
	4	Dividends and interest from securities	0		0		
	5a	Gross rents	- 0				
	b	Net rental income or (loss)		 			
Ф	6a	Net gain or (loss) from sale of assets not on line 10	0		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
Revenue	b	Gross sales price for all assets on line 6a		 			
Š	7	Capital gain net income (from Part IV, line 2)			0		-
æ	8	Net short-term capital gain			<u></u>	0	
	9	Income modifications		l		0	
	10a	Gross sales less returns and allowances				- · · · · -	
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)	0			0	
	11	Other income (attach schedule)	0		0		
	12	Total. Add lines 1 through 11	250,000		0		 !
g	13	Compensation of officers, directors, trustees, etc.	0		0	~	<u> </u>
Expenses	14 15	Other employee salaries and wages	0		0		
8	16a				0		
Щ	b	A securation force (attack colored (a)	0		= 17/10		
Ş	C	Other professional fees (attach schedule)			EIVE	-1, 0	
äŧ	17	Interest	0		0	31 0	
istr	18	Taxes (attach schedule) (see instructions)	;~0		0 2 26		
Operating and Administrative	19	Depreciation (attach schedule) and depletion	0,		<u> </u>	0	
퉏	20	Occupancy			DENO	IT 0	0
₹ P	21	Travel, conferences, and meetings	, 0	(,10	والسالاة	0	0
aŭ	22	Printing and publications	- 0		0	0	0
ğ	23	Other expenses (attach schedule)	0		0	0	0
atir	24	Total operating and administrative expenses.					
9		Add lines 13 through 23	0		0	0	
Q	25	Contributions, gifts, grants paid	250,000				250,000
_	26	Total expenses and disbursements. Add lines 24 and 25	250,000		0		250,000
	27	Subtract line 26 from line 12:	0]
	a b	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) .			- 0		
	l	Adjusted net income (if negative, enter -0-)				<u> </u>	
For		work Reduction Act Notice, see instructions.	Cat No	. 11289X		Fr	m 990-PF (2017)

Da		Rolonge Shoots Attached schedules and amounts in the description column	Beginning of year	End o	f year
Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	10,102	10,102	10,102
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	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 ▶			
ş	8	Inventories for sale or use		·····	
Assets	8	Prepaid expenses and deferred charges			
ĕ	10a	Investments—U.S. and state government obligations (attach schedule)		i	
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			·
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers-see the			
_		instructions. Also, see page 1, item l)	10,102	10,102	10,102
	17	Accounts payable and accrued expenses			
တ္တ	18	Grants payable			
豐	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
.B	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)			
Ø		Foundations that follow SFAS 117, check here ▶ □			
8		and complete lines 24 through 26, and lines 30 and 31.		,	
<u>a</u>	24	Unrestricted		<u></u>	İ
Balances	25	Temporarily restricted			
=	26	Permanently restricted			
جَ		Foundations that do not follow SFAS 117, check here ▶			
Net Assets or Fund	0.7	and complete lines 27 through 31.			
Š	27	Capital stock, trust principal, or current funds			
361	28	Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds			}
Ş	29	• • • • • • • • • • • • • • • • • • • •	10,102	10,102	
et,	30 31	Total net assets or fund balances (see instructions)	10,102	10,102	
Ž	0.	instructions)	10,102	10,102	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	10,102	10,102	<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)			10,102
2		er amount from Part I, line 27a		<u> </u>	0
3	Othe	er increases not included in line 2 (itemize)			0
4	Add	lines 1, 2, and 3		4	10,102
-	D			-	0
6	-Tota	reases not included in line 2 (itemize) ► II-net-assets or-fund-balances at-end of-year-(line 4-minus-line 5)—	Part II, column (b), li	ne.306_	10,102
					000 PF

		ind(s) of property sold (for example, real of use; or common stock, 200 shs. MLC Co		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<u> 1a</u>						
<u>b</u> _				ļ		
<u>c</u>						
<u>d</u>				 		
<u>е</u>			T	<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		er other basis ense of sale		n or (loss) (f) minus (g))
<u>a</u>						
<u> </u>						
<u>C</u>				 		
<u>d</u>						
<u>e</u>						
	Complete only for assets she	owing gain in column (h) and owned	by the foundation	n on 12/31/69.		l. (h) gain minus
	(I) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col. (i) vl. (j), if any		t less than -0-) or rom col. (h))
a				<u> </u>		
ь						
С						
d				 -		
e						
2	Capital gain net income of	nrinet canital incel i -	, also enter in Pa), enter -0- in Pa		2	
3		in or (loss) as defined in section				
		t I, line 8, column (c). See instr		s), enter -0- in }		
		<u> </u>			3	
Part		der Section 4940(e) for Red ivate foundations subject to the				
Was t		ve this part blank. e section 4942 tax on the distribition qualify under section 4940(e). D			base period?	☐ Yes ☐ No
1		ount in each column for each ye			aking any entries	
<u> </u>	(a)	(b)		(c)	aking any charcs.	(d)
Cale	Base period years ndar year (or tax year beginning in		ns Net value o	of noncharitable-use a		tribution ratio divided by col. (c))
	2016			· · · · · · · · · · · · · · · · · · ·		
	2015					
	2014					
	2013					
	2012					
_	Total of time 4 column (d	1				
2 3	Total of line 1, column (d) 			· 2	· · · ·
3		oundation has been in existence				
4	Enter the net value of nor	ncharitable-use assets for 2017	from Part X, line	5	. 4	
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investme	ent income (1% of Part I, line 27I	o)		. 6	
7	Add lines 5 and 6				. 7	
8	Enter qualifying distribution	ons from Part XII, line 4			. 8	
	If line 8 is equal to or gre Part VI instructions.	ater than line 7, check the box i	n Part VI, line 11	b, and complete	that part using a 1	% tax rate. See the

18 Exempt operating foundations described in section 4940(6)(2), check here ▶ ☐ and enter "NVA" on line 1. Date of niling or determination lister. (ethach copy of letter if increasary—see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 196 of Part I, line 12, col. (b). All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Subtritle (Ancome) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Subtritle (Ancome) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Tax based on investment Income. Subtract line 4 from line 3. If zero or less, enter -0-) Exempt foreign organizations—tax withheld at source 6b. Tax based on investment Income. Subtract line 4 from line 3. If zero or less, enter -0-) Exempt foreign organizations—tax withheld at source 6b. Tax due If the total or extension of time to file (Form 8989) Exempt foreign organizations—tax withheld at source 6b. Enter any penalty for undersepwment of estimated tax. Check here ☐ if Form 2220 is attached Backup withholding erroneously withheld 6d. Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid 7 Total credits and psyments. Add lines 6a through 6d. Enter any penalty for undersepwment of estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 10 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 10 Domestic tax year, did the foundation attempt to influence any national, state	Part \		nstru	ctio	1S)				
b Domestic foundations that meet the section 494(0e) requirements in Part V, check here ► and enter 19% of Part I, line 27b. Exempt foreign organizations, enter 49% of Part I, line 27b. All other domestic foundations enter 29% of line 27b. Exempt foreign organizations, enter 49% of Part I, line 12, col. (b). Tax under section 511 (domestic section 4947(a)(f) trusts and taxable foundations only; others, enter -0-} Add lines 1 and 2 Subtitle A (encome) tax (domestic section 4947(a)(f) trusts and taxable foundations only; others, enter -0-} Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-} Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-} Tax based with application for extension of time to file (Form 8868) Exempt roreign organizations — tax withheld at source Tax paid with application for extension of time to file (Form 8868) Extension payments. Add lines 6 at through 6d Total credits and payments. Add lines 6 at through 6d Enter any penalty for underpayment of settimated tax. Check here ☐ if Form 2220 is attached Tax due, If the total of lines 5 and 8 is more than line 7, enter amount owerpaid Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Deferment of the second o	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)							
here ▶ □ and enter 1% of Part, line 27b. Exempt foreign organizations, enter 4% of Part, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, it zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3, it zero or less, enter -0- 5 Credits/Payments: 2017 estimated tax payments and 2016 overpayment credited to 2017 6e	h	Domestic foundations that meet the section 4940(e) requirements in Part V check							
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, cot. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 2 3 3 4 4 5 5 3 4 5 5 5 5 5 5 5 5 5	•								
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 5 Add lines 1 and 2 5 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 4 5 Tax besed on investment income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 6 Credits/Payments: a 2017 estimated tax payments and 2016 overpayment credited to 2017 6 6 B Exempt foreigin organizations—tax withheld at source 6 B Exempt foreigin organizations—tax withheld at source 6 B Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 7 Total credits and payments. Add lines 6a through 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 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Tax due, if the total of lines 5 and 8 is more than line 7, enter amount ower paid 9 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 11 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 10 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 11 If the answer is "Yes" to 1 are 10, attach a detailed description of the activities and copies of any materials published or distributed by 10 favor political expenditures (section 4955) imposed during the year: 11 (1) On the foundation line Form 1120-POL for this year? 12 Enter the reimbursement (if any) paid by the foundation under the very form political expenditure tax imposed on foundation managers. ▶ \$ 12 Has the foundation have unrelated business gross income of \$1,000 or more during the y	С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of							
3 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) Tax based on Investment Income. Subtract line 4 from line 3. If zero or less, enter -0- Tax based on Investment Income. Subtract line 4 from line 3. If zero or less, enter -0- Tax based on Investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- Ecretical Payments: 2017 estimated tax payments and 2016 overpayment credited to 2017 Exempt foreign organizations—tax withheld at source Tax paid with application for extension of time to file (Form 8868) Ecretical credits and payments. Add lines 6e through 6d Backup withholding erroneously withheld Total credits and payments. Add lines 6e through 6d Enter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed Tax due, if the case of the second of the second overpayment if line 7 is more than the total of lines 5 and 8, enter the amount of under the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 10 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11 Particular Statements Regarding Activities To Uning the tax year, did the foundation attempt to influence any national, state, or local legislation or did it particular to influence any national, state, or local legislation or did it particular to influence any national, state, or local legislation or did it particular to influence any national, state, or local legislation or did it particular to influence any national, state, or local legislation or did it particular to influence any national, state, or local legislation or did it particular to influence any national, state, or local legislation or did it particular to influence any national, state, or local legislation or did it particular to influence any political expendi	2								
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 Tax based on investment and 2016 overpayment credited to 2017 Be lement foreign organizations—tax withheld at source. Tax paid with application for extension of time to file (Form 8868). Backup withholding erroneously withheld Total credits and payments. Add lines 8a through 6d Total credits and payments. Add lines 8a through 6d Total credits and payments. Add lines 8a through 6d Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed. Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owerpaid. Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owerpaid. Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and 8, enter the amount owerpaid. Tax due, if the total of lines 5 and									
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a 2017 estimated tax payments and 2016 overpayment credited to 2017	_								
b Exempt foreign organizations—tax withheld at source C Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owned Tax due. If the total of lines 5 and 8 is more than line 7, enter amount of line 10 to be. Credited to 2018 estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount of line 10 to be. Credited to 2018 estimated tax. Check here ☐ if Form 2220 is attached Tax due. If the samount of line 10 to be. Credited to 2018 estimated tax. Check here ☐ if Form 2220 is attached description of the activities. Did the foundation file Form 1120-POL for this year? The total credit and 10 an	-	· · · · · · · · · · · · · · · · · · ·							
c Tax paid with application for extension of time to file (Form 8868)	_								
d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penathy for underpayment of estimated tax. Check here		· · · · · · · · · · · · · · · · · · ·							
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 1 Tax due, If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9 10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid ▶ 10 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11 11 Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 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. Did the foundation in Form 1120-PCUL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (i) On the foundation. ▶ \$ 2 (2) On foundation interpretation of the activities and copies of any materials published or distributed by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 2 Has the foundation angaged in any activities that have not previously been reported to the IRS? 1 Has the foundation managers, or the reviously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 V 16 If "Yes," has it filed a tax return on Form 990-T for this year? 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 6 V 17 V 18 The answer is "Yes," attach the statement required by General Instruction 7. Are the requirements of section					1				
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount oved ▶ 9 ☐ 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 ☐ 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11 ☐ 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11 ☐ 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 10 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 11 If the answer is "Yes" to 1 a 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 and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation managers. ▶ \$ 10 Did the foundation file Form 1120-POL for this year? 11 T'Yes," attach a detailed description of the activities (2) On foundation managers. ▶ \$ 12 Has the foundation engaged in any activities that have not previously been reported to the IRS? 12 If "Yes," attach a detailed description of the activities. 13 Has the foundation have unrelated business gross income of \$1,000 or more during the year? 14 If "Yes," attach the statement required by General Instruction 7. 15 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: 16 Yes, By language in the governing instrument, or 17 Yes," attach the states to which the foundation re	_	Decrete that the state of the s							
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(or designate) of each state as required by General Instruction G? If "No," attach explanation	b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General							
Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV			8b		~				
4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	9								
complete Part XIV	_	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"		<u> </u>					
			9		~				
	10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	Γ						
		· · · · · · · · · · · · · · · · · · ·	10_						
Form 990-PF (2017)				n-PF	(2017)				

Part	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		,	
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		,	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		~		
	Website address ► N/A				
14	The books are in care of ► Tom Burton Telephone no. ►	102 563			
	The books are in care of ▶ Tom Burton Telephone no. ▶ Located at ▶ 4025 E 23rd Street, Columbus, NE ZIP+4 ▶ Section 4947(a)(1) popeyampt charitable tructs filing Form 999 PE in liquid Form 1041—check here	6860			
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	· · ·	•	► ⊔ 	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No	
	over a bank, securities, or other financial account in a foreign country?	16		"	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name the foreign country ▶)1 			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	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? ☐ Yes ☑ No. (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?		}	1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes	,	1		
	(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)?	<u> </u>			
	(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.)	,			
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	ļ		
	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	<u> </u>	•	
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)):				
a	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		~	
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 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 of				
_	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		1		
	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		ļ		
	foundation had excess business holdings in 2017.)	3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	~	
b	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?	4b	<u></u>	<u> </u>	

Page	6

uring the year, did the foundation pay or incur at 1) Carry on propaganda, or otherwise attempt to 2) Influence the outcome of any specific public directly or indirectly, any voter registration drows a grant to an individual for travel, study Provide a grant to an organization other than section 4945(d)(4)(A)? See instructions	o influer c election dy, or on a char charita children e transa regardir ng disas	nce legislation (see section (see section) ther similar pitable, etc., of the scientific or animals?	ion 4955); purposes? organizati ic, literary	or to ca	arry on, ribed in cational	Yes Yes Yes	No No No No		Yes	No
2) Influence the outcome of any specific public directly or indirectly, any voter registration dr. 3) Provide a grant to an individual for travel, stu. 4) Provide a grant to an organization other than section 4945(d)(4)(A)? See instructions. 5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to any answer is "Yes" to 5a(1)–(5), did any of the egulations section 53.4945 or in a current notice organizations relying on a current notice regardithe answer is "Yes" to question 5a(4), does to	c election ve? dy, or on a char charita children e transa regardir ng disas	on (see section on the similar pritable, etc., on the scientification or animals?	ion 4955); purposes? organizati ic, literary	or to ca	arry on, ribed in cational	☐ Yes	☑ No ☑ No			
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rganizations relying on a current notice regards the answer is "Yes" to question 5a(4), does t	ng disas						ibeu iii	5b		
the answer is "Yes" to question 5a(4), does t	_	-					▶□	30		
	he foun									
						Yes	□No	1	1	
"Yes," attach the statement required by Regula	ations s	ection 53.49	45-5(d).			_	_			
				pay pre	miums					
						☐ Yes	_			
id the foundation, during the year, pay premiun	ns, direc	ctly or indired	ctly, on a	personal	benefit	contract	?.	6b		~
"Yes" to 6b, file Form 8870.						_	_	ĺ		
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	ation n	nanagare an	nd their co	nmene	ation S	oe instr	ıctions			
ist an officers, directors, dustees, and found										
(a) Name and address	hour	s per week	(If not	paid,	emplo	yee benefit	plans			
F. Raimondo & M. Jeanne Ralmondo				0			0			0
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compensation of five highest-paid employed	es (oth	er than thos	se includ	ed on li	ne 1—:	see instr	uction	s). If n	one,	enter
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mber of other employees paid over \$50,000 .		<u> </u>	<u></u>	· · ·	· · ·	<u>· · · · </u>	. ▶			
	n a personal benefit contract? id the foundation, during the year, pay premium "Yes" to 6b, file Form 8870. t any time during the tax year, was the foundation a "Yes," did the foundation receive any proceeds Information About Officers, Direct and Contractors ist all officers, directors, trustees, and found (a) Name and address F. Raimondo & M. Jeanne Ralmondo 3rd St., Columbus, NE 68601 Imondo 3rd St., Columbus, NE 68601 Myers-Bock 3rd St., Columbus, NE 68601 F. Ralmondo, Jr. 3rd St., Columbus, NE 68601 F. Ralmondo, Jr. 3rd St., Columbus, NE 68601 Gompensation of five highest-paid employed NONE,"	n a personal benefit contract? id the foundation, during the year, pay premiums, direct "Yes" to 6b, file Form 8870. It any time during the tax year, was the foundation a party to "Yes," did the foundation receive any proceeds or have and contractors. Information About Officers, Directors, Total and Contractors ist all officers, directors, trustees, and foundation in (a) Name and address F. Raimondo & M. Jeanne Ralmondo Preside Sec./Trustees, and St., Columbus, NE 68601 Sec./Trustees, and St., Columbus, NE 68601 Trustees, and foundation in the first of the f	n a personal benefit contract? id the foundation, during the year, pay premiums, directly or indirer "Yes" to 6b, file Form 8870. It any time during the tax year, was the foundation a party to a prohibited "Yes," did the foundation receive any proceeds or have any net interest. Information About Officers, Directors, Trustees, Fand Contractors ist all officers, directors, trustees, and foundation managers are (a) Name and address (b) Title, and average hours per week devoted to position F. Raimondo & M. Jeanne Ralmondo President/Trustee 3rd St., Columbus, NE 68601 Myers-Bock St., Columbus, NE 68601 Myers-Bock Vice-President/Trustee/1hr F. Raimondo, Jr. 3rd St., Columbus, NE 68601 F. Raimondo, Jr. 3rd St., Columbus, NE 68601 Trustee/1hr compensation of five highest-paid employees (other than tho NONE." 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3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities Lat the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 4 Part IX-B Summary of Program-Related investments (see instructions) Describe the two largest program-related envestments made by the foundation during the tax year on lines 1 and 2. Amount 1 All other program-related investments. See instructions 3 Form 990-PF (2):	Part VIII	Information About Officers, Directors, Trustees, Foundation Manager and Contractors (continued)	s, Highly Paid Employees,
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pi a A b A	see instructions.) air market value of assets not used (or held for use) directly in carrying out charitable, etc., urposes:		
pi a A b A			
a A	urposes:		
b A			
	verage monthly fair market value of securities	1a	0
	verage of monthly cash balances	1b	30,936
c Fa	air market value of all other assets (see instructions)	1c	0
d To	otal (add lines 1a, b, and c)	1d	30,936
e R	eduction claimed for blockage or other factors reported on lines 1a and		
	c (attach detailed explanation)		
	cquisition indebtedness applicable to line 1 assets	2	0
	ubtract line 2 from line 1d	3	30,936
	ash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	464
	let value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	30,472
	linimum investment return. Enter 5% of line 5	6	1,524
Part XI			
art Ai	and certain foreign organizations, check here ▶ □ and do not complete this part.)	Jul 100:101	.0
1 M	linimum investment return from Part X, line 6	1	1,524
	ax on investment income for 2017 from Part VI, line 5	- -	
	ncome tax for 2017. (This does not include the tax from Part VI.)		
	dd lines 2a and 2b	2c	
	istributable amount before adjustments. Subtract line 2c from line 1	3	
		4	
	ecoveries of amounts treated as qualifying distributions	5	
	dd lines 3 and 4	6	
6 D	eduction from distributable amount (see instructions)	-	
	distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	_	15210
	ne 1	7	1700
Part X	Qualifying Distributions (see instructions)		1
		 	
	mounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		c
	xpenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	
b P	rogram-related investments—total from Part IX-B	1b	
	mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
•	urposes	2	
	mounts set aside for specific charitable projects that satisfy the:		
	uitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
4 Q	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	
	oundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	
	inter 1% of Part I, line 27b. See instructions	5	
	djusted qualifying distributions. Subtract line 5 from line 4	6	
N	lote: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation
	demonstrate and apparent to refer to apparent or was it means home.		m 990-PF (2017)

Part	VIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years pnor to 2016	(c) 2016	(d) 2017
2	Undistributed income, if any, as of the end of 2017:				
а	Enter amount for 2016 only				
b	Total for prior years: 20 ,20 ,20				
3	Excess distributions carryover, if any, to 2017:				
а	From 2012				
b	From 2013				
C	From 2014				
đ	From 2015				
е	From 2016				
f	Total of lines 3a through e				
4	Qualifying distributions for 2017 from Part XII, line 4: ▶ \$				
а	Applied to 2016, but not more than line 2a				
	Applied to undistributed income of prior years				
_	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
•	required—see instructions)				}
_	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
d	Applied to 2017 distributable amount				
е _	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2017				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
_	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
•	amount—see instructions				
_		· · · · · · · · · · · · · · · · · · ·			
е	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount—see				
	instructions				
f	Undistributed income for 2017. Subtract lines				1 11.
	4d and 5 from line 1. This amount must be				(524)
	distributed in 2018				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section	İ			
	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) .				
9	Excess distributions carryover to 2018.				<u> </u>
-	Subtract lines 7 and 8 from line 6a	'		Ï	
40	Analysis of line 9:				<u> </u>
10_	,				
a	Excess from 2013				
b	Excess from 2014				
C	Excess from 2015				
d	Excess from 2016]
e	Excess from 2017				

_	0-PF (2017)	/ ! !-	-diama amid Bank	/ / / / / / / / / / / / / / / / / / /		Page 10
	YIV Private Operating Foundat If the foundation has received a ruling				<u>"</u>	
а	foundation, and the ruling is effective for					
h	Check box to indicate whether the found		-	,	ection [] 4942(i)	(3) or 4942(j)(5
а	Enter the lesser of the adjusted net	Tax year	o oporating roundar	Pnor 3 years	10 12 ()	
_	income from Part I or the minimum	(a) 2017	(b) 2016	(c)/2015	(d) 2014	(e) Total
	investment return from Part X for each year listed			1	(-,	
ь	85% of line 2a			 		
_	Qualifying distributions from Part XII,			†		
	line 4 for each year listed			/		
d	Amounts included in line 2c not used directly			- <i>j</i>		
	for active conduct of exempt activities			1 /	j	1
Э	Qualifying distributions made directly			l i		
	for active conduct of exempt activities.			1 /		1
	Subtract line 2d from line 2c			1.1		
	Complete 3a, b, or c for the					
	alternative test relied upon:			11		
3	"Assets" alternative test-enter:			11	ĺ	İ
	(1) Value of all assets					
	(2) Value of assets qualifying under			1		
	section 4942(j)(3)(B)(i)			<u> </u>		<u> </u>
)	"Endowment" alternative test-enter 2/3 of minimum investment return shown in			11		
	Part X, line 6 for each year listed					<u> </u>
C	"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)					
	(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 from an exempt organization					
	(4) Gross investment income	-				
rt	XV Supplementary Information	n (Complete t	his part only if t	he foundation h	ad \$5,000 or m	ore in assets a
	any time during the year-	-	-		•	
	Information Regarding Foundation N					
8	List any managers of the foundation w					by the foundatio
	before the close of any tax year (but or	nly if they have c	contributed more th	nan \$5,000). (See s	section 507(d)(2).)	
			<u> </u>		·····	
þ	List any managers of the foundation					arge portion of th
	ownership of a partnership or other en	tity) of which the	foundation has a	10% or greater int	erest.	
						
	Information Regarding Contribution. Check here ▶ ☐ if the foundation of unsolicited requests for funds. If the focomplete items 2a, b, c, and d. See insome	only makes cont undation makes	tributions to prese	lected charitable		
a ip		nber or email ad		n to whom applica	ations should be a	ddressed:

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

c Any submission deadlines:

Part XV Supplementary Information (cont	inued)			
3 Grants and Contributions Paid During t	ne Year or Approv			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Columbus Area Future Fund affiliated with the Nebraska Cummunity Foundation		PC	For community support and	
3838 South 14th Street, Lincoln, NE 68501			services.	\$200,000
Wayne State College		PC	For educational support	\$50,000
1111 Main Street, Wayne, NE 68787				
Total			▶ 3a	\$250,000
b Approved for future payment				
				Ī
	į			İ
Total				\$250,000

ter gross	amounts unless otherwise indicated.	Unrelated bus	siness income	Excluded by secti	on 512, 513, or 514	{ (e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemple function income (See instructions
Progra	am service revenue:					
a				ļ		
b			· · · · · · · · · · · · · · · · · · ·	 		
d _			· · · · · · · · · · · · · · · · · · ·	 		
<u> </u>				 		
f —				 		
g Fe	es and contracts from government agencies					
-	pership dues and assessments					
	st on savings and temporary cash investments					
Divide	ends and interest from securities					
	ental income or (loss) from real estate:					
	ebt-financed property			 		
	ot debt-financed property			-		
	ental income or (loss) from personal property	_	· · · ——	 		
	investment income	 		 		
	come or (loss) from special events	 		 		
	profit or (loss) from sales of inventory		······································	 		
	revenue: a			 		
b						
c _						
d _						
						_
e _						
Total. e worksl	otal. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation				13	
Total. worksl rt XVI-	otal. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation	s.) ccomplishme	ent of Exemp	t Purposes		mportantly to
Total. works rt XVI- e No.	otal. Add columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes		mportantly to
Total. works rt XVI- e No.	otal. Add columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes		mportantly to
Total. works t XVI- e No.	otal. Add columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes		mportantly to tions.)
Total. works t XVI- e No.	otal. Add columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes		mportantly to ctions.)
Total. works t XVI- e No.	otal. Add columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes		mportantly to
Total. works rt XVI- e No.	otal. Add columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes		mportantly to ctions.)
Total. works rt XVI- e No.	otal. Add columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes		mportantly to ctions.)
Total. works rt XVI- e No.	otal. Add columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes		mportantly to ctions.)
Total. works rt XVI- ne No.	otal. Add columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes		mportantly to ctions.)

Form 99	0-PF (2											ge 13
Part	XVII	Information Organization	n Regarding Transons	sfers to and Tr	ansaction	s and R	elationshi	ps With I	Noncha	ritabl	e Exe	mpt
1	in s		lirectly or indirectly e ther than section								Yes	No
a	Tran	sfers from the rep	porting foundation to	a noncharitable e	exempt org	anization	of:			}		
	(1) (Cash								1a(1)		~
	• •	Other assets .								1a(2)		~
Ъ		er transactions:										لـــا
			a noncharitable exer							1b(1)		
			ets from a noncharita , equipment, or other						• •	1b(2)	\vdash	<u> </u>
			rrangements							1b(3)	_	
		oans or loan gua	-					 		1b(5)	-	~
	-	-	ervices or membersh							1b(6)		~
C	Shar	ring of facilities, ed	quipment, mailing lis	ts, other assets, o	or paid emp	loyees				1c		~
d 	value value	e of the goods, of e in any transaction	of the above is "Yes ther assets, or servic on or sharing arrange	es given by the r	eporting fo	undation.	If the found	lation rece	eived less	than	fair m	arket
(a) Line	no.	(b) Amount involved	(c) Name of nonch	aritable exempt organi	zation	(d) Descr	iption of transfe	rs, transactio	ons, and sha	aring arr	angeme	ınts
	-+											
	\dashv											
												
								· — -				
											-	
												
	\dashv											
	-											
	-+						······································					
												
	desc	ribed in section 5	ectly or indirectly affi 601(c) (other than sec following schedule.				e tax-exem			Yes	. 🗆 1	Mo
		(a) Name of organi		(b) Type of	organization		 	(c) Descripti	on of relatio	nship		
						I						
						\longrightarrow		-				
	Und	er penalties of periury 1	declare that I have examined	t this return, including ac	COMPANAIN S	thedules and	statements and	to the best o	f my knowled	doe and	heliaf it	is true
Sign Here	con	and complete. Declar of the complete of officer of the complete of the complet	M. Raumon	nytatipayer) is based on T	Il information of	f which prepared from the control of	arer has any kno	wiedge	May the II with the p	RS discu	iss this shown b	return elow?
	Joigi	Print/Type preparer		Preparer's signature			Date			TIN	=	
Paid			-						ck [] if [' employed;			
Prepa		Firm's name						Firm's EIN				
Use (JNIY	Firm's address Phone no.										
										~~~	<del></del>	

## Schedule B

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

Department of the Treasury Internal Revenue Service

Raimondo Foundation

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

**Employer identification number** 

47-3435990

Organization type (check one):							
Filers o	f:	Section:					
Form 99	90 or 990-EZ	☐ 501(c)( ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 99	00-PF						
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Check if your organization is covered by the <b>General Rule</b> or a <b>Special Rule</b> . <b>Note:</b> Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.							
Genera	l Rule						
V	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special	Rules						
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
	contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one he year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, hal purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
	contributor, during t contributions totaled during the year for a General Rule applie	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, contributions exclusively for religious, charitable, etc., purposes, but no such dimore than \$1,000. If this box is checked, enter here the total contributions that were received an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the less to this organization because it received nonexclusively religious, charitable, etc., contributions here during the year					

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

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 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).

Name of organization
Raimondo Foundation

Employer identification number 47-3435990

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Behien Mfg. Co.  4025 E. 23rd Street  Columbus, NE 68601	\$\$ 	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
i		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli 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