

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.
- Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

2018

Open to Public  
Inspection

For calendar year 2018, or tax year beginning 10-01-2018, and ending 09-30-2019

Name of foundation CARRIAGE HOUSE FOUNDATION		A Employer identification number 36-3390546	
Number and street (or P O box number if mail is not delivered to street address) 701 S 13TH ST		B Telephone number (see instructions) (402) 475-1079	
City or town, state or province, country, and ZIP or foreign postal code LINCOLN, NE 68508		C If exemption application is pending, check here ► <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D</b> 1. Foreign organizations, check here ► <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 3,513,187		<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	

<b>Part I</b> Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc, received (attach schedule)		500			
2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments		18,325	18,325	18,325	
4 Dividends and interest from securities		1,956	1,956	1,956	
5a Gross rents		150,346	150,346	150,346	
b Net rental income or (loss) 98,796					
6a Net gain or (loss) from sale of assets not on line 10		181			
b Gross sales price for all assets on line 6a 388,569					
7 Capital gain net income (from Part IV, line 2)					
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11		171,308	170,627	170,627	
13 Compensation of officers, directors, trustees, etc					
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees (attach schedule)					
b Accounting fees (attach schedule)		1,730	1,730	1,730	
c Other professional fees (attach schedule)		15,021	9,021	9,021	6,000
17 Interest					
18 Taxes (attach schedule) (see instructions)		22,013	22,013	22,013	
19 Depreciation (attach schedule) and depletion		3,765	3,765	3,765	
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses (attach schedule)		15,021	15,021	15,021	
24 Total operating and administrative expenses.					
Add lines 13 through 23		57,550	51,550	51,550	6,000
25 Contributions, gifts, grants paid		221,194			221,194
26 Total expenses and disbursements. Add lines 24 and 25		278,744	51,550	51,550	227,194
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements		-107,436			
b Net investment income (if negative, enter -0-)			119,077		
c Adjusted net income (if negative, enter -0-)				119,077	

<b>Part II</b>	<b>Balance Sheets</b>	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	<b>Beginning of year</b>	<b>End of year</b>	
			<b>(a) Book Value</b>	<b>(b) Book Value</b>	<b>(c) Fair Market Value</b>
<b>1</b>	Cash—non-interest-bearing	15,085	6,004	6,004	
<b>2</b>	Savings and temporary cash investments	21,413	24,401	24,401	
<b>3</b>	Accounts receivable ►				
	Less allowance for doubtful accounts ►				
<b>4</b>	Pledges receivable ►				
	Less allowance for doubtful accounts ►				
<b>5</b>	Grants receivable				
<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
<b>7</b>	Other notes and loans receivable (attach schedule) ►				
	Less allowance for doubtful accounts ►				
<b>8</b>	Inventories for sale or use				
<b>9</b>	Prepaid expenses and deferred charges				
<b>10a</b>	Investments—U S and state government obligations (attach schedule)				

Assets

**Part IV Capital Gains and Losses for Tax on Investment Income**

**(a)** List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, 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.)

1a

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

**(i)**  
Gains (Col (h) gain minus  
col (k), but not less than -0-) or  
Losses (from col (h))

<b>(i)</b> F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col (i) over col (j), if any
a		
b		

[REDACTED]



**Part VII-A Statements Regarding Activities (continued)**

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

		<b>Yes</b>	<b>No</b>
<b>5a</b>	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
(4)	Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? See instructions. . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions . . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ►		
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . <i>If "Yes," attach the statement required by Regulations section 53 4945–5(d)</i>	<input type="checkbox"/>	<input type="checkbox"/> Yes
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . <i>If "Yes" to 6b, file Form 8870</i>		
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**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
NONE		

Total number of others receiving over \$50,000 for professional services. . . . . ►

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1		
2		
3		
4		

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

1 N/A		
2		

All other program-related investments. See instructions

3		

**Total. Add lines 1 through 3 . . . . . ►**

**Part X Minimum Investment Return** (All domestic foundations must complete this part Foreign foundations, see instructions )

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	823,208
b	Average of monthly cash balances. . . . .	1b	33,125
c	Fair market value of all other assets (see instructions). . . . .	1c	2,697,458
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	3,553,791
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).		

**Part XIII Undistributed Income (see instructions)**

**1** Distributable amount for 2018 from Part XI, line 7

**2** Undistributed income, if any, as of the end of 2018

**a** Enter amount for 2017 only. . . . .

**b** Total for prior years 20\_\_\_\_, 20\_\_\_\_, 20\_\_\_\_

**3** Excess distributions carryover, if any, to 2018

**a** From 2013. . . . .

**b** From 2014. . . . .

**c** From 2015. . . . .

**d** From 2016. . . . .

**e** From 2017. . . . .

**f** **Total** of lines 3a through e. . . . .

**4** Qualifying distributions for 2018 from Part XII, line 4 ► \$ 227,194

**a** Applied to 2017, 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)

	<b>(a) Corpus</b>	<b>(b) Years prior to 2017</b>	<b>(c) 2017</b>	<b>(d) 2018</b>
1 Distributable amount for 2018 from Part XI, line 7				173,833
2 Undistributed income, if any, as of the end of 2018			217,558	
a Enter amount for 2017 only. . . . .				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2018				
a From 2013. . . . .				
b From 2014. . . . .				
c From 2015. . . . .				
d From 2016. . . . .				
e From 2017. . . . .				
f Total of lines 3a through e. . . . .				
4 Qualifying distributions for 2018 from Part XII, line 4 ► \$ 227,194				
a Applied to 2017, but not more than line 2a			217,558	
b Applied to undistributed income of prior years (Election required—see instructions). . . . .				
c Treated as distributions out of corpus (Election required—see instructions)				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ►

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(1)(3) or  4942(1)(5)

**TY 2018 Taxes Schedule****Name:** CARRIAGE HOUSE FOUNDATION

11-26-2018

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FARM PROPERTY SHERMAN CO,NE	22,013	22,013	22,013	

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .				► 3a
<i>b Approved for future payment</i>				
<b>Total</b> . . . . .				► 3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	18,325	
<b>4</b> Dividends and interest from securities. . . . .			14	1,956	
<b>5</b> Net rental income or (loss) from real estate					
a Debt-financed property. . . . .			16	98,796	
b Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	181	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). . . . .				119,258	
<b>13</b> Total. Add line 12, columns (b), (d), and (e). . . . .					119,258
(See worksheet in line 13 instructions to verify calculations.)					

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**



Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title and average	(c) Compensation (\$)	(d)	Expense account
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
SOUTHEAST COMMUNITY COLLEGE 600 STATE ST MILFORD, NE 68405	NONE	PUBLIC	SCHOLARSHIPS	67,250
WESTERN COMMUNITY COLLEGE 1601 EAST 27TH SCOTTSBLUFF, NE 69361	NONE	PUBLIC	SCHOLARSHIPS	13,000
CENTRAL COMMUNITY COLLEGE PO BOX 1024 HASTINGS, NE 68902	NONE	PUBLIC	SCHOLARSHIPS	26,000
<b>Total . . . . .</b>			► 3a	221,194

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
NORTHEAST COMMUNITY COLLEGE PO BOX 469 NORFOLK, NE 68702	NONE	PUBLIC	SCHOLARSHIPS	27,500
METROPOLITAN COMMUNITY COLLEGE PO BOX 3777 OMAHA, NE 68103	NONE	PUBLIC	SCHOLARSHIPS	72,944
NORTH PLATTE COMMUNITY COLLEGE FNDT 1101 HALLIGAN DR NORTH PLATTE, NE 69101	NONE	PUBLIC	SCHOLARSHIPS	10,000
<b>Total . . . . .</b>			► 3a	221,194

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

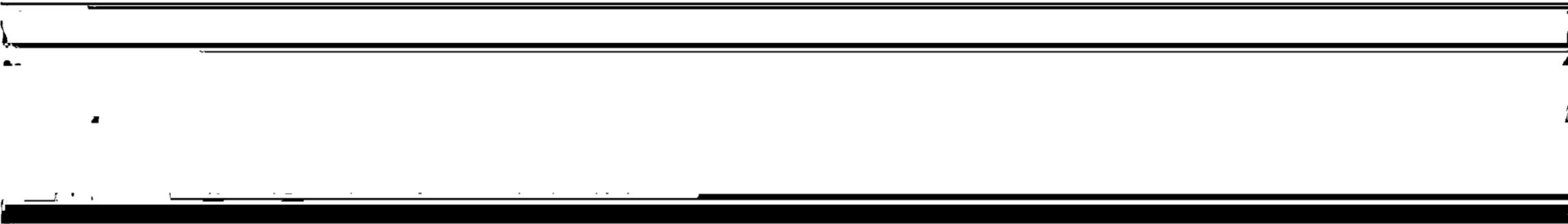
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
MID-PLAINS COMMUNITY COLLEGE 601 WEST STATE FARM RD NORTH PLATTE, NE 69101	NONE	PUBLIC	SCHOLARSHIPS	4,500
<b>Total . . . . .</b>			► 3a	221,194

## TY 2018 Accounting Fees Schedule

**Name:** CARRIAGE HOUSE FOUNDATION**EIN:** 36-3390546

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FARM PROPERTY SHERMAN CO,NE	1,730	1,730	1,730	

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## TY 2018 Gain/Loss from Sale of Other Assets Schedule

**Name:** CARRIAGE HOUSE FOUNDATION

**FTN:** 36-3390546

### **Gain Loss Sale Other Assets Schedules**

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
ALLY BANK C.D.	2016-05	PURCHASE	2018-11		75,000	75,000				

## TY 2018 Investments - Other Schedule

**Name:** CARRIAGE HOUSE FOUNDATION

**EIN:** 36-3390546

### Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENTS IN CDS/BONDS	FMV	782,228	782,228

**TY 2018 Land, Etc.  
Schedule****Name:** CARRIAGE HOUSE FOUNDATION**EIN:** 36-3390546

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
	186,269	184,972	1,297	
	1,631,850		1,631,850	2,694,927

## TY 2018 Other Assets Schedule

Name: CARRIAGE HOUSE FOUNDATION . . .

## TY 2018 Other Expenses Schedule

**Name:** CARRIAGE HOUSE FOUNDATION  
**EIN:** 36-3390546

## Other Expenses Schedule

Description	Revenue and Expenditures	Net Investment	Adjusted Net	Disbursements for Other Expenses

## TY 2018 Other Increases Schedule

**Name:** CARRIAGE HOUSE FOUNDATION

**EIN:** 36-3390546

Description	Amount
UNREALIZED GAIN-INVESTMENTS	16,911

## TY 2018 Other Professional Fees Schedule

**Name:** CARRIAGE HOUSE FOUNDATION

**EIN:** 36-3390546

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ADMINISTRATIVE SUPPORT FEE	6,000			6,000
FARM PROPERTY SHERMAN CO,NE	9,021	9,021	9,021	

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