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

OMB No 1545-0047

Department of the Treasury

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

		Go to www.irs.gov/Form990PF to	or motivations and t		• • • • • • • • • • • • • • • • • • • •	
		ndar year 2019 or tax year beginning Januar	y 1 , 2019	, and ending	December 31	, 20 19
Nam	ne of fou	ndation REC	CEIVED	A Employe	r identification number	er
		Laura Nielsen Family Foundation	()	·	82-1936625	
Num	nber and	street (or P O box number if mail is not delivered to street address)	Rosa Rosa	suite B Telephon	e number (see instruct	ons)
			10 2020	40	02-679-6426 (Brad I	lielsen)
Crty	or town	, state or province, country, and ZIP or foreign postal dee	<u>~~</u>	C If exempt	tion application is pend	ing, check here ▶ [
<u>Om</u>	aha, Ni	E 68114-0000	SEN LIT			_
G	Check	call that apply: Initial return Initial return	FoFa former public	eharity p 1. Foreigi	n organizations, check	here ▶[
		☐ Final return ☐ Amended r	return	2 Foreign	n organizations meeting	the 95% test
		Address change Name char	nge		here and attach compu	
Н	Check	type of organization Section 501(c)(3) exempt p	rivate foundation (E If private	foundation status was	terminated under
	Section	on 4947(a)(1) nonexempt charitable trust 🔲 Other tax	able private found	ation section 5	07(b)(1)(A), check here	▶[
ı	Fair m	narket value of all assets at J Accounting method	: 🗸 Cash 🗌 Ad	crual E If the four	ndation is in a 60-mont	h termination
	end of	f year (from Part II, col. (c), Other (specify)		I II I	ction 507(b)(1)(B), check	
	line 16	5) ► \$ 59,055 (Part I, column (d), must be	e on cash basis)			
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and			(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net investment income	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions))	books		<i>"</i>	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	71,425			
	2	Check ► ☐ If the foundation is not required to attach 5ch B		• •		
	3	Interest on savings and temporary cash investments	72	72	72	
	4	Dividends and interest from securities .	262	262	262	
	5a	Gross rents	0	0	0	
	ь	Net rental income or (loss)		-		
<u>a</u>	6a	Net gain or (loss) from sale of assets not on line 10	6,819			
쿹	ь	Gross sales price for all assets on line 6a 100,900	0,010			
Revenue	7	Capital gain net income (from Part IV, line 2)		6,819	1	
٣ ا	8	Net short-term capital gain			3,605	
	9	Income modifications			0,000	1
	10a	Gross sales less returns and allowances 0				
	b	Less: Cost of goods sold 0				
S	c	Gross profit or (loss) (attach schedule)	0		0	
SCAN sesuedxa	11	Other income (attach schedule)	0	0	0	- , .
41	12	Total. Add lines 1 through 11	78,578	7,153	3,939	
•	13	Compensation of officers, directors, trustees, etc	0	0	0,000	
èè	14	Other employee salaries and wages	0	0	0	
š	15	Pension plans, employee benefits	0	0	0	
çbe	16a	Legal fees (attach schedule)	0	0	0	
		Accounting fees (attach schedule)	0	0	0	
tive		Other professional fees (attach schedule)	0	0	0	
at	17	Interest	0	0		
stı	18	Taxes (attach schedule) (see instructions)	0	0	0	
ੂੋ ∣	19	Depreciation (attach schedule) and depletion	0	0		
티	20	Occupancy	0	0		
₹	21	Travel, conferences, and meetings	0	0		
ם	22	Printing and publications	0	0	0	
g	23	Other expenses (attach schedule)	0	0	0	
ٳڲؚٙ	24	Total operating and administrative expenses.	- 4			
<u>ā</u>		Add lines 13 through 23	م	٥	j	
Operating and Administra	25	Contributions, gifts, grants paid	59,900			59,90
0	26	Total expenses and disbursements. Add lines 24 and 25	59,900	59,900	59,900	
\dashv	27	Subtract line 26 from line 12:	39,300	39,300		59,90
1	a	Excess of revenue over expenses and disbursements	18,678		ļ	
	-	- <u>-</u>	10,0/8			
	b	Net investment income (if negative, enter -0-) .		0		

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2019)

Pá	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		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	2,424	7,524	7,524
	2	Savings and temporary cash investments	297	51,531	51,531
	3	Accounts receivable ►0			
	1	Less: allowance for doubtful accounts ▶ 0			
	4				
		Pledges receivable ► 0 Less. allowance for doubtful accounts ► 0			
	5	Grants receivable	0	0	0
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	o	0	0
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶	0	0	0
ţ	8	Inventories for sale or use	0	0	0
Assets	9	Prepaid expenses and deferred charges	o	0	0
As	10a	Investments—U.S. and state government obligations (attach schedule)	0	0	0
	ь	Investments—corporate stock (attach schedule)	37,656	0	0
	С	Investments—corporate bonds (attach schedule)	0	0	0
	11			· ·	<u>~_</u> <u>*</u>
		Investments—land, buildings, and equipment basis ▶ 0 Less accumulated depreciation (attach schedule) ▶ 0	0	0.	0
	12	Investments—mortgage loans	0	0	0
	13	Investments—other (attach schedule)	0	0	U
	14	Land, buildings, and equipment. basis ▶0			
		Less: accumulated depreciation (attach schedule) ▶ 0	·		
	15	Other appets (describe	0	0	0
	16	Total assets (to be completed by all filers—see the	7		<u> </u>
		instructions. Also, see page 1, item I)	40,377	59,055	59,055
	17	Accounts payable and accrued expenses	0	0	1
	18	Grants payable	0	0	<u> </u>
ë	19	Deferred revenue	0	0	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	Ì
ap	21	Mortgages and other notes payable (attach schedule)	0	0	ì
⊐	22	Other liabilities (describe ▶)	0	0	ì
	23	Total liabilities (add lines 17 through 22)	0	0	i
ņ		Foundations that follow FASB ASC 958, check here	1		<u> </u>
Fund Balances		and complete lines 24, 25, 29, and 30.			
<u>a</u>	24	Net assets without donor restrictions			
Ba	25	Net assets with donor restrictions			
ַ		Foundations that do not follow FASB ASC 958, check here ▶ □			· · · · · · · · · · · · · · · · · · ·
٦		and complete lines 26 through 30.			j
_	26	Capital stock, trust principal, or current funds	40,377	59,055	
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	ì
Net Assets or	28	Retained earnings, accumulated income, endowment, or other funds	0	0	i
155	29	Total net assets or fund balances (see instructions)	40,377	59,055	ì
t A	30	Total liabilities and net assets/fund balances (see		00,000	ì
Ne		instructions)	40,377	59,055	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
		I net assets or fund balances at beginning of year-Part II, colur	nn (a), line 29 (must	t agree with	
		of-year figure reported on prior year's return)			40,377
2		er amount from Part I, line 27a		2	18,678
3	Othe	er increases not included in line 2 (itemize)		3	0
4	Add	lines 1, 2, and 3		4	59,055
5	Decr	reases not included in line 2 (itemize) ▶		5	0
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)-F	art II, column (b), lin	e 29 6	59,055

Part	IV Capital Gains and	d Losses for Tax on Investm	nent Income			
		nd(s) of property sold (for example, real ease, 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	Publicly Traded Securities				_	
b						
c						
<u>d</u>						
е_						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale		Gain or (loss) us (f) minus (g))
<u>a</u>	100,900	0		94,081		6,819
<u> </u>						
С						
<u>d</u>	•					
<u>е</u>						
	Complete only for assets sho	owing gain in column (h) and owned	by the foundatio	n on 12/31/69		Col (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) ol (j), if any		not less than -0-) or s (from col (h))
a						
<u> </u>						
<u>C</u>						
<u>d</u>						
е						
2	Capital gain net income o	rinei cabilal lossi 🔞 🤏 🦠	also enter in Pa , enter -0- in Pa		2	6,819
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c) See instru	ctions. If (loss	s), enter -0- in)		
					3	3,605
Part		ler Section 4940(e) for Reduvate foundations subject to the				
Was t		e this part blank. section 4942 tax on the distribu qualify under section 4940(e) Do			pase period?	☐ Yes ☑ No
1	Enter the appropriate amo	ount in each column for each yea	ar; see the instr	ructions before m	akıng any entrie	s.
Cale	(a) Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net value	(c) of noncharitable-use a		(d) Distribution ratio b) divided by col (c))
	2018	6	9,486		0	100
	2017	3:	2,500		0	100
	2016		NA		NA	NA
	2015		NA		NA	NA
	2014		_NA		NA	NA
2	Total of line 1, column (d)				2	100
3		for the 5-year base period—divoundation has been in existence			by 3	100
4		chantable-use assets for 2019 fr	•		. 4	0
5	Multiply line 4 by line 3				. 5	0
		ot income (10/ of Bort Line 27h)				
6 7	Add lines 5 and 6	nt income (1% of Part I, line 27b)			. 7	0
	-					0
8	Enter qualifying distribution If line 8 is equal to or great	ins from Part XII, line 4 ater than line 7, check the box in	 Part VI, line 1	 b, and complete t	8 hat part using a	59,900 1% tax rate. See the
	Part VI instructions.		.,			

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	<u>instrı</u>	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.			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			0
	here ► □ and enter 1% of Part I, line 27b			- 1
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			0
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. If zero or less, enter -0			0
6	Credits/Payments:			
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0			
b	Exempt foreign organizations—tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c o			
d	Backup withholding erroneously withheld 6d 0			
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			0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10			0
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Refunded ▶ 11			0
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		✓
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		✓
	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.			
С	Did the foundation file Form 1120-POL for this year?	1c		✓
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. ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
	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 incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		'
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
•	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			- 1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	•		- 1
	conflict with the state law remain in the governing instrument?	6	- -	_
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	1	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			\neg
	Nebraska	,	,	İ
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
-	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	8b		
9	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 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"			
	complete Part XIV	9		✓
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10	✓	

Par	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		1
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	<u> </u>
_	Website address ▶		, ,	
14	The books are in care of ▶ Laura Nielsen Telephone no ▶ 40	2-672-	0316	
		8114-0	000	
15	Section 4347(a)(1) nonexempt chantable trusts ining Form 990-PF in field of Form 1041—check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No ✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes✓ No(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(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		
	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 2019?	1c		✓
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	!		
	6d and 6e) for tax year(s) beginning before 2019?			
h	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
•	(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		eg
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?		ĺ	
b				
D	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the]	ì
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		ŀ	
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	[✓
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 2019?	4b		✓

Pa	n	e	E

Part	VII-B	Statements Regarding Activities	s for V	Vhich Form	4720	May Be F	tequire	ed (conti	nued)			
5a	During t	he year, did the foundation pay or incur	any am	ount to:							Yes	No
	(1) Carr	y on propaganda, or otherwise attempt t	o influe	ence legislati	on (sec	tion 4945(e))? .	☐ Yes	✓ No			
	(2) Influ	ence the outcome of any specific publi	c electi	on (see sect	ion 495	55), or to c	arry on	1		ì		
	direc	ctly or indirectly, any voter registration di	ıve?					☐ Yes	✓ No			ı I
	(3) Prov	ride a grant to an individual for travel, stu	dy, or	other sımılar	purpos	es?		☐ Yes	✓ No			ı I
		ride a grant to an organization other that	-					1				ı I
		ion 4945(d)(4)(A)? See instructions						☐Yes	 ✓ No			
	(5) Prov	ride for any purpose other than religious	, charıt	able, scientif	ic, litera	ary, or edu	cationa	1	_			
		oses, or for the prevention of cruelty to				-		Yes	✓ No			
b	If any ar	nswer is "Yes" to 5a(1)-(5), did any of the	e trans	sactions fail t	o quali	fy under th	e exce	otions des	scribed			
	ın Regul	ations section 53.4945 or in a current no	tice re	garding disas	ter ass	istance? S	ee instr	uctions		5b		_
	Organiza	ations relying on a current notice regardi	ng disa	aster assistar	ce, che	eck here	`		ightharpoons			
С	If the ar	nswer is "Yes" to question 5a(4), does t	he fou	ndation clain	n exem	ption from	the tax	(.
	because	e it maintained expenditure responsibility	for the	grant? .				☐ Yes	☐ No			
	If "Yes,"	attach the statement required by Regula	ations s	section 53.49	45-5(d))						
6a	Did the	foundation, during the year, receive any	funds,	directly or in	directly	, to pay pre	emiums	;				
	on a per	sonal benefit contract?						☐ Yes	✓ No			
b	Did the	foundation, during the year, pay premiur	ns, dire	ctly or indire	ctly, on	a persona	benefi	t contract	? .	6b		✓
	If "Yes"	to 6b, file Form 8870.										1
7a		me during the tax year, was the foundation										
b		did the foundation receive any proceed							ո? .	7b		✓_
8		undation subject to the section 4960 ta		_					_			
		ation or excess parachute payment(s) di		-								
Part	VIII	Information About Officers, Direct	tors, 1	Γrustees, F	ounda	tion Man	agers,	Highly F	Paid E	mploy	ees,	
	1:-4 -11	and Contractors										
	List all C	officers, directors, trustees, and found		nanagers ar e, and average		mpensation		See Instru Contribution		•		
		(a) Name and address	hou	rs per week	(If i	not paid,	emplo	yee benefit	plans	(e) Expe	nse aco allowan	
Laural	Niclosa		devot	ed to position	er	nter -0-)	and det	erred compe	nsation			
	Nielsen					_						_
		Drive, Omaha, NE 68114	Preside	ent, one hour		0			0			0
Brad N				esident, one					ا			_
		Drive, Omaha, NE 68114	hour			0	-		- 0			0
	Engvall	. //4		ary, zero		_						_
324 St	John Str	eet, #1, New Haven, CT 06511	hours			0			- 0			0
		•••••										
	Compe	nsation of five highest-paid employed	e (oth	er than tho	e incl	uded on li	no 1 —	eaa inetr	uctions	s) If no	nna 4	anter
-	"NONE.		.0 (0111	ci tildii tilo.	30 11101	uucu on n		300 111311	4011011	,,	J.10, \	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
								(d) Contribu	itions to			
(a) Name an	d address of each employee paid more than \$50,00	0	(b) Title, and a hours per v		(c) Comper	nsation	employee	benefit			
				devoted to p	osition	' '		plans and o compens		othera	illowan	Jes
None								-				
								-				
									[
Total r	number o	f other employees paid over \$50,000 .							. ▶		lone	
									F	orm 99)-PF	(2019)

		Form 990-PF (2019)
Fotal. Add lin	es 1 through 3	None
-		
3		
All other prog	ram-related investments. See instructions	
2		
••••••		
1 None		
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
Part IX-B	Summary of Program-Related Investments (see instructions)	1 140110
		None
•		
4		
•••••		
3		

2		
	•••••••••••••••••••••••••••••••••••••••	
1 NA	, papers pro	
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficiaries served, conferences convened, research papers produced, etc.	of Expenses
Part IX-A	Summary of Direct Charitable Activities	
	r of others receiving over \$50,000 for professional services	None
		
None	(2))	(0, 00
<u> </u>	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
3 Five h	ighest-paid independent contractors for professional services. See instructions. If none, enter "NC	NE"
Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
	Information About Officers Discotors Tructure Foundation Managers Highly Doid	

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	gn foundation	ıs,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	7,361
b	Average of monthly cash balances	1b	46,418
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	53,779
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	53,779
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	807
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	52,972
6	Minimum investment return. Enter 5% of line 5	6	2,649
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	oundations	_
1	Minimum investment return from Part X, line 6	1	2,649
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,649
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	2,649
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	2,649
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	59,900
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	!	
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	59,900
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	
_	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	59,900
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether the f	oundation
		Earn QQ()-PF (2010)

Part	XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7			~	2,649
2	Undistributed income, if any, as of the end of 2019				2,043
a	Enter amount for 2018 only			O	
b	Total for prior years: 20 , 20 , 20		0		
3	Excess distributions carryover, if any, to 2019.				
а	From 2014 NA				
b	From 2015 NA				
C	From 2016 NA				
d	From 2017 32,500		1	1	1
θ	From 2018 . 69,486				
ť	Total of lines 3a through e	101,986			
4	Qualifying distributions for 2019 from Part XII, line 4: ▶ \$;
а	Applied to 2018, but not more than line 2a			0	
b	Applied to undistributed income of prior years (Election required—see instructions)		o.		
C	Treated as distributions out of corpus (Election required – see instructions)	0		ı	
d	Applied to 2019 distributable amount				2,649
е	Remaining amount distributed out of corpus	57,251		v.	2,0,0
5	Excess distributions carryover applied to 2019 (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:	0			0
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	159,237			
þ	Prior years' undistributed income. Subtract line 4b from line 2b		0	. '	
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 .		0		
d	Subtract line 6c from line 6b. Taxable amount—see instructions		o		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section $170(b)(1)(\Gamma)$ or $4942(g)(3)$ (Election may be required—see instructions)	0		, ,	
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	0	•		
A	Faces distributions carryover to 2020 Subtract lines 7 and 8 from line 6a	159,237		J 8 W	, # - *** *(\$,
10	Analysis of line 9:		,	n 1	· · · · · · · · · · · · · · · · · · ·
ล	Excess from 2015 . 0				
b	Excess from 2016 0				,
C	Excess from 2017 32,500		•	,	j
þ	Excess from 2018	ł		· ·]
e	Excess from 2019 57,251	1			

	VIV Divide On a vide of Ferral	A! / ! A	ations and Doub	\//	_	rage 10
Part		· · · · · · · · · · · · · · · · · · ·				
1a	If the foundation has received a ruling	•		private operating		
	foundation, and the ruling is effective fo			▶ [
b	Check box to indicate whether the four		operating founda		ction <u> 4</u> 942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(-,
	each year listed .					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4, for each year listed			ار ا		
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	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					
а	"Assets" alternative test—enter (1) Value of all assets . (2) Value of assets qualifying under 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					
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	-				
Part		n (Complete th	is part only if t	he foundation ha	ed \$5 000 or m	ore in assets at
	any time during the year –		•	ne roundation ne	24 40,000 01 111	ne in assets at
1	Information Regarding Foundation		13.1	<u>-</u>		
а	List any managers of the foundation of before the close of any tax year (but of	who have contribu				by the foundation
Brad a	nd Laura Nielsen			, ,	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	
b	List any managers of the foundation ownership of a partnership or other er					rge portion of the
2	Information Regarding Contribution Check here ▶ ☑ if the foundation unsolicited requests for funds If the fo complete items 2a, b, c, and d See in	only makes controundation makes	ibutions to prese	lected charitable o		
а	The name, address, and telephone nu	mber or email add	lress of the perso	n to whom applicat	ions should be ac	Idressed:
b	The form in which applications should	be submitted and	I information and	materials they shou	ıld ınclude:	
С	Any submission deadlines:					
		_ 			 	
d	Any restrictions or limitations on aw factors:	ards, such as by	geographical ar	eas, charitable fie	lds, kınds of inst	itutions, or other

art }	Supplementary Information (configrants and Contributions Paid During		ed for Eu	ture Payment	_
	Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
	Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
а	Paid during the year	0.0000			
	-				
					1
_	Total	· · · · · · · · ·	·		3a
	Approved for lattire payment				

Ente	r gro	oss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	Pro	gram service revenue:					(OCC IIISTI GOTIONS)
	a						
	b				-	•	
	C				ļ		
	d						
	e		<u> </u>				
	f	Face and contract forms are server to a se					
_		Fees and contracts from government agencies					
_		mbership dues and assessments					
3		erest on savings and temporary cash investments idends and interest from securities.					
4							, ,
5		t rental income or (loss) from real estate:	-		<u> </u>		,
		Debt-financed property		· · · · · ·			
_			<u> </u>				_
7		rental income or (loss) from personal property ier investment income					
_							
8 9		n or (loss) from sales of assets other than inventory tincome or (loss) from special events	ļ				
10		oss profit or (loss) from sales of inventory					
		-					
••	b						
	C						
	d		-			-	
	e				:		
12		ototal. Add columns (b), (d), and (e)					
	00.		L				
13	Tot	al Add line 12 columns (b) (d) and (e)			•	13	
			s.)			13	-
See	wor	ksheet in line 13 instructions to verify calculation	s.)			13	
See Par	wor	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
See Par Line	wor	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
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See Par Line	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)

		Organizati	ons	_												
1		he organization (ection 501(c) (c												Y	es	No
а	orga	nizations? sfers from the rep				•						•				
	(1) C						·						12	1(1)		√
	(2) C	ther assets .												(2)		1
b		r transactions:														
	(1) S	ales of assets to	a noncharitat	ole exempt	organization							_	11:	(1)	_	1
		urchases of asse				zation					•	•	-	(2)	\dashv	·
		ental of facilities								•	•	•		(3)	\dashv	·
		eimbursement a					• •			• •	•	•		(4)	_	Ż
		oans or loan gua				• •	• •	•	• •	• •				(5)	+	
		erformance of se				 dicitation	 ns	• •					<u> </u>	(6)	+	÷
С		ng of facilities, e			_				• •	• •		•	_	c	-+	Ť
		answer to any							· · ·	eboul	Idalw	eve e			r ma	•
_	value	of the goods, o	ther assets of	r services o	niven by the re	norting	foundati	ion If	the foun	dation	rece	ays s	less th	an fai	r ms	arkot
	value	n any transacti	on or sharing	arrangemer	nt. show in coli	ımn (d)	the valu	ie of t	he anods	athe	r asse	ets o	r servic	es re	CEIV	ed ed
(a) Line		b) Amount involved			le exempt organiza				on of transf							
\-7		,	(4)				(4) 5	0001.pt	017 01 11 11 101	0,0, 114	10000110	110, 0010	, driding	unung	CITICI	
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	-						+		<u> </u>							
2a	Is the	foundation dire	ectly or indire	ctly affiliate	ed with, or rel	ated to,	one or	more	e tax-exe	mpt d	organi	zatioi	ns			
	descr	ribed in section 5	501(c) (other th	an section	501(c)(3)) or in	section	527?						_	Yes	(No
b	If "Ye	s," complete the	following sch	edule.												
		(a) Name of organ	ızatıon		(b) Type of o	rganizatioi	1			(c) De	scriptio	n of rel	ationship			
		<u></u>														
_	Unde	r penalties of perjury, I	declare that I have	examined this r	etum, including acc	ompanying	schedules	and sta	itements, and	d to the	best of	my kno	wledge a	nd belie	ef, it is	true,
Sign	corre	ct, and complete Decla	aration of preparer (other than taxp	ayer) is based on all	information	of which p	prepare	has any kno	wledge		May t	he IRS d	scuss t	his re	eturn
Here) (Xaura .	ncelso	1	17/5/7	0 Pr	esident					with th	ne prepar	er show	n bel	ow?
	Sign	ature of officer or trus	stee		Date	Trti						See in	struction	<u>, □</u> 4	es 📋	NO
Paid		Print/Type preparer	's name	Prep	parer's signature	•	_	T	Date		Chac	<u>-</u>	PTIN			
Prepa	rer											mploye				
Use C		Firm's name ▶								Firm's	EIN >	•				
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Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

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

Employer identification number

Brad an	d Laura Nielsen Family	y Foundation		82-1936625
Organi	zation type (check or	ne):		
Filers o	ıf:	Section:		
Form 9	90 or 990-EZ	☐ 501(c)() (enter number) organization	
		☐ 4947(a)(1) no	onexempt charitable trust not treated as a private for	undation
		☐ 527 political	organization	
Form 99	90-PF	√ 501(c)(3) exe	empt private foundation	
		4947(a)(1) no	onexempt charitable trust treated as a private founda	ition
		501(c)(3) tax	able private foundation	
	only a section 501(c)(7	-	eneral Rule or a Special Rule. nization can check boxes for both the General Rule a	and a Special Rule. See
Genera	I Rule			
V		or property) from a	90-EZ, or 990-PF that received, during the year, contributor. Complete Parts I and II. See instr	
Special	Rules			
	regulations under se 13, 16a, or 16b, and	ections 509(a)(1) a I that received fror	on 501(c)(3) filing Form 990 or 990-EZ that met the 3 nd 170(b)(1)(A)(vi), that checked Schedule A (Form 99 n any one contributor, during the year, total contributor, form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line	90 or 990-EZ), Part II, line tions of the greater of (1)
	contributor, during t	he year, total cont	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that the cributions of more than \$1,000 exclusively for religious the prevention of cruelty to children or animals. Co	s, charitable, scientific,
	contributor, during t contributions totaled during the year for a	the year, contributing the sear, contribution of the sear, considerable the sear h sear	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ons exclusively for religious, charitable, etc., purpose 0. If this box is checked, enter here the total contributious, charitable, etc., purpose. Don't complete any outloon because it received nonexclusively religious, chair for the contribution of the contribution of the contribution because it received nonexclusively religious, chair for the contribution of the c	es, but no such utions that were received f the parts unless the

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

Employer identification number

Brad and	Laura Nielsen Family Foundation		82-1936625
Part I	Contributors (see instructions). Use duplicate co	opies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1	Brad and Laura Nielsen 9737 Fieldcrest Drive Omaha, NE 68114-0000	\$\$20,911	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Brad and Laura Nielsen 9737 Fieldcrest Drive Omaha, NE 68114-0000	\$ 35,514	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Brad and Laura Nielsen 9737 Fieldcrest Drive Omaha, NE 68114-0000	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person

Name of organization

Brad and Laura Nielsen Family Foundation

Employer identification number

82-1936625

Part II Noncas	h Property (see instructions). Use duplicate co	pies of Part II if additiona	I space is needed.
----------------	------------------------------	---------------------	------------------------------	--------------------

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	80 shares of Apple (AAPL)		
		\$ 20,911	11/11/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	112 shares of Thermo Fisher Scntfc (TMO)		
		\$ 35,514	12/10/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
İ		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			*
		\$	

Name of org	ganization		-	_	Employer identification number
	aura Nielsen Family Foundation				82-1936625
Part III	(10) that total more than \$1,000 for the following line entry. For organiza contributions of \$1,000 or less for the duplicate copies of Part III if additional contributions of \$1,000 or less for the copies of Part III if additional	or the year from any ations completing Pa the year. (Enter this i	one contributor. art III, enter the tota antormation once. S	Complete of the complete of th	columns (a) through (e) and vely religious, charitable, etc.,
(a) No. from	•				
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Des	scription of how gift is held
	Transferee's name, address, a		fer of gift	nship of trai	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Des	scription of how gift is held
•	•				
					•
-					
	Transferee's name, address, a		fer of gift Relation	nship of trai	nsferor to transferee
-			***************************************		
(-)))					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Des	cription of how gift is held
-					
-					
	Transferee's name, address, a		fer of gift	ship of tran	asforar to transferoe
 			neiatioi	omp or trai	sferor to transferee
-					
-					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Des	cription of how gift is held
-					
-		/=\ T	in at ait		
	Transferee's name, address, a	(e) Trans nd ZIP + 4		ship of tran	sferor to transferee
<u>_</u>				***********	
-					·

Part II, Line 10b—Schedule of Investments—corporate stock

200 shares Lowes Companies Inc. (LOW); \$18,130 value at time of receipt of donation of shares
111 shares Texas Instruments (TXN); \$10,746 value at time of receipt of donation of shares
77 shares VISA Inc (V); \$8,780 value at time of receipt of donation of shares

As deseparent a. NE 68178 a. NE 68144 a. NE 681444049 a. NE 681444049 a. NE 68147 a. NE 681144049 b. NE 68127 Foundation for Television v. NE 68127 Foundation for Television v. NE 68137 A. NE 68145 A.	Scrius 8 Given purpose or contributions
45th Street a. NE 68104 in's Hospital Foundation and in's Hospital Foundation and in's Hospital Foundation and in's Hospital Foundation and in His Dive. Floor 6W a. NE 68114-4049 (1. Olympics Site of the 10 olympics Site of the 10 olympics Site of the 10 olympics Site of the 10 olympics Site of the 10 olympics Site of the 10 olympic Site	\$500 00 To provide free productions and educational expenences to further knowledge of Shakespeare
PP	\$10,000 00 To provide support for programs to revitalize the inner city of Omaha
POF POF POF POF POF POF POF POF POF POF	\$3,000 00 To support services and programs of Children's Hospital and Medical Center
POF POF POF	\$200 00 For housing assistance for families traveling for care at Chidren's Hospital and Medical Center
POF POF POF POF POF POF POF POF POF POF	\$200 00 To support public television
POF POF POF POF POF POF POF POF POF POF	\$750 00 For support of programs to assist children with muscular dystrophy
POF POF POF	\$1,000 00 For support of child abuse victims
POF	\$10,000 00 To support women with unplanned pregnancies
POF POF	\$12,000 00 For assistance to human care services that build and strengthen individuals, family and community
POF POF	\$4,250 00 For support of educational programs for underprivileged youth
POF	\$1,000 00 To provide support for emergency and supplemental food
POF	\$1,000 00 To provide underprivileged girls experiences to develop a vision for a bright and healthy future
	\$10,000 00 For assistance for the homeless
	\$6,000 00 For support of programs of advocacy and support for children with Down syndrome
Total \$59,900 00	00 006 828