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Form	<b>JJU</b>	

## EXTENDED TO NOVEMBER 15, 2016

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.



Department of the Treasury Internal Revenue Service A Ear the 2015 calendar year

AF	or th	e 2015 calendar year, or tax year beginning and e	ending	_	
B C	heck if oplicab	le: C Name of organization		D Employer identifie	cation number
	Address LINCOLN COMMUNITY FOUNDATION INC				
	Name   Name	Doing business as	47-0	458128	
	Initial returr		Room/suite	E Telephone number	r
	Final	215 CENTENNIAL MALL S STE 100		402-	474-2345
	termii ated	City or town, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$	20,759,268.
	Amer	DINCOLN, NE 08308		H(a) Is this a group re	
	Appli tion pend			for subordinates	? Yes X No
	-	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
		empt status: X 501(c)(3) 501(c) ( )◀ (insert no.) 4947(a)(1) c	or 🛄 527	If "No," attach a	list. (see instructions)
		te: ► WWW.LCF.ORG		H(c) Group exemption	
		f organization: X Corporation Trust Association Other ►	L Year	of formation: 1955	State of legal domicile: NE
Ра	rt I	Summary			
e	1	Briefly describe the organization's mission or most significant activities: TO CA	ARRY O	UT CHARITAB	
Activities & Governance	_	ACTIVITIES, PRIMARILY IN AND FOR THE BENH		F THE COMMU	
/err	2	Check this box			ssets. 25
Go	3				25
Š	4	Number of independent voting members of the governing body (Part VI, line 1b)			16
ties	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)			5
tivi	6	Total number of volunteers (estimate if necessary)			0.
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, line 34	 I		
	~			Prior Year 19,436,412.	Current Year 9,906,735.
Revenue	8	Contributions and grants (Part VIII, line 1h)		0.	0.
ven	9	Program service revenue (Part VIII, line 2g)		2,897,231.	3,254,872.
Re	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		67,140.	110,858.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		22,400,783.	13,272,465.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,423,947.	11,772,287.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0,423,547.	0.
	14 15	Benefits paid to or for members (Part IX, column (A), line 4)		1,169,117.	1,284,792.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . Professional fundraising fees (Part IX, column (A), line 11e)	······	0.	0.
pen	lua h	Total fundraising expenses (Part IX, column (D), line 25) $\rightarrow$ 309, 08	88.		
Ĕ				1,275,159.	1,616,991.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,868,223.	14,674,070.
		Revenue less expenses. Subtract line 18 from line 12		13,532,560.	
or				ginning of Current Year	End of Year
ets lanc	20	Total assets (Part X, line 16)	1	13,437,321.	105,201,404.
ASS J Ba	21	Total liabilities (Part X, line 26)		1,207,995.	1,228,235.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		12,229,326.	103,973,169.
	rt II				
Unde	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedules	s and statem	ents, and to the best of my	y knowledge and belief, it is

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer	Date			
Here	SCOTT LAWSON, VICE PRESIDENT-FINANCE				
	Type or print name and title				
	Print/Type preparer's name Preparer's signature Date	Check PTIN			
Paid	KRYSTAL L SIEBRANDT, CPA, KRYSTAL L SIEBRANDT, 11/02/	16 self-employed P00543870			
Preparer		Firm's EIN 🖌 47–0677245			
Use Only	Firm's address 7140 STEPHANIE LANE, P.O. BOX 23110				
	LINCOLN, NE 68542-3110	Phone no. (402) 423-4343			
May the II	RS discuss this return with the preparer shown above? (see instructions)	X Yes No			
532001 12-1	32001       12-16-15       LHA       For Paperwork Reduction Act Notice, see the separate instructions.       Form 990 (2015)				

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	1 990 (2015) LINCOLN COMMUNITY FOUNDATION INC 47-0458128 Pag	e <b>2</b>
Pa	rt III Statement of Program Service Accomplishments	_
1	Check if Schedule O contains a response or note to any line in this Part III	
•	THE LINCOLN COMMUNITY FOUNDATION'S MISSION IS TO PROVIDE LEADERSHIP	
	AND RESOURCES TO HELP BUILD A GREAT CITY.	
2	Did the organization undertake any significant program services during the year which were not listed on	
-	the prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X	No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code: ) (Expenses \$ 13,818,042. including grants of \$ 11,772,287.) (Revenue \$ -88,203 GRANTS AND ALLOCATIONS TO NON-PROFIT CHARITABLE ORGANIZATIONS.	•)
	GRANTS AND ALLOCATIONS TO NON-PROFIT CHARITABLE ORGANIZATIONS.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	)
4		
4c	(Code:         ) (Expenses \$) (Revenue \$)	_)
4d	Other program services (Describe in Schedule O.)	
4-	(Expenses \$ including grants of \$ ) (Revenue \$ )       Total program service expenses ►     13,818,042.	
<u>4e</u>	Total program service expenses ► 13,818,042.	)15)
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001	2 102 758603 4343-000 2015.04030 LINCOLN COMMUNITY FOUNDATIO 4343-00	۱1
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Form	990	(2015)	

LINCOLN COMMUNITY FOUNDATION INC

Pa	t IV Checklist of Required Schedules		-	
	· · ·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	<b> </b>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			v
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.	х	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Λ	x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
14a	, , , , , , , , , , , , , , , , , , , ,	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Ves," complete Schedule E. Parte Land IV.	144		x
1E	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			<u> </u>
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			<u> </u>
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u> </u>
	complete Schedule G, Part III	19		x

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Part IV Checklist of Required Schedules (continued)

LINCOLN COMMUNITY FOUNDATION INC

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			x
~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_ A
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	х	
242	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
240	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b				
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			x
00	Schedule L, Part I	25b		_ A
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schoolule L. Dert II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С				v
~~	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29	~	
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		v	
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

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47-	0458128	Page 5

Yes

Х

Х

1c

2b

3a 3b

4a

5a

5b

5c

6a

6b

7a

7b

No

Х

Х

X X

Х

Х

_	990 (2015) LINCOLN COMMUNITY FOUNDATION INC		47-0458
Form	()		47-0458
	Check if Schedule O contains a response or note to any line in this Part V		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	38
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportal	ole gaming
_	(gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		16
	filed for the calendar year ending with or within the year covered by this return	2a	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		
~	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions		
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule		••
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		
<b>L</b>	financial account in a foreign country (such as a bank account, securities account, or other financial	accour	it)?
D	If "Yes," enter the name of the foreign country:		
<b>F</b> -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		
Ua			
h	any contributions that were not tax deductible as charitable contributions?		
, N	were not tax deductible?	10113 01	giits
7	Organizations that may receive deductible contributions under section 170(c).		
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices n	rovided to the pavor?
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	p	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as reai	uired
2	to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
-		<u>ل</u>	

	to file Form 8282?			7c	Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrac	t?	7e	Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?		7f	Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 88	99 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation fi	le a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	e		
	sponsoring organization have excess business holdings at any time during the year?			8	Х
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a	Х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b	Х
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	)	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
с	Enter the amount of reserves on hand	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?			14a	Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	θΟ <u></u>	<u></u>	14b	

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Form 990	(2015)
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### LINCOLN COMMUNITY FOUNDATION INC

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			
ec	tion A. Governing Body and Management			-
	Enter the number of voting members of the governing body at the end of the tax year 1a 25		Yes	╞
та				
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			l
	Enter the number of voting members included in line 1a, above, who are independent 1b 25			l
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			l
	officer, director, trustee, or key employee?	2		+
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1
6	Did the organization have members or stockholders?	6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			Ι
	persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			T
	The governing body?	8a	X	1
b	Each committee with authority to act on behalf of the governing body?	8b	X	t
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			t
-	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	_ •		-
			Yes	1
0a	Did the organization have local chapters, branches, or affiliates?	10a	1.00	┦
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		1
b	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
4.0				┨
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		┨
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-	x	ł
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	X	┦
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<u> </u>	+
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	4
	Did the organization have a written whistleblower policy?	13	X	4
4	Did the organization have a written document retention and destruction policy?	14	X	1
5	Did the process for determining compensation of the following persons include a review and approval by independent			I
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	ļ
b	Other officers or key employees of the organization	15b	X	l
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			I
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			I
	taxable entity during the year?	16a		I
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			t
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			I
	exempt status with respect to such arrangements?	16b		1
ec	tion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed <b>NONE</b>			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	availah	ole	
	for public inspection. Indicate how you made these available. Check all that apply.          X       Own website       Another's website       X       Upon request       Other (explain in Schedule O)			
٥		1 finan	cial	
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	a man	ual	
~	statements available to the public during the tax year.			
0	State the name, address, and telephone number of the person who possesses the organization's books and records: ►			
	215 CENTENNIAL MALL SOUTH STE 100, LINCOLN, NE 68508		1 <b>990</b>	

Part VII	Со	mpensa	tion o	f Officers,	Directors,	Trustees,	Key E	mployees,	Highest	Compen	sated
	Em	ployees	, and	Independ	ent Contra	ctors	-		-	-	

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received report-

able compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Name and Title         Average hours per veek (st any hours for hours betweek betweek at attractorystee)         Pepotable compension from upanization (v2/1099-MISC)         Estimated aunut of compension from the compension from the compension from the compension from the compensin from the compension from the com from the compension	(A)	(B)	(C)					(D)	(E)	(F)	
hours per week (list any hours for related organizations         compensation from the organizations         compensation from the organizations         compensation the organizations         amount of the organizations           (1) RICHARD VIERK         3.00         X         X         0.         0.         0.           (1) RICHARD VIERK         3.00         X         X         0.         0.         0.         0.           (1) RICHARD VIERK         3.00         X         X         0.         0.         0.         0.           (1) RICHARD VIERK         3.00         X         X         0.         0.         0.         0.           (2) CATHERINE LANG         1.00         X         X         0.         0.         0.         0.           (3) CARL SJULIN         1.000         X         0.         0.         0.         0.         0.           (4) ANTHONY MESSINEO         1.000         X         0.         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           (1) ANTHONY MESSINEO         1.000         X         0.         0.         0.         0.         0.         0.         0.<			(do	Position		000					
Week (list ary bours for leaded organizations below line)         Inom and below line)         Inom and l		hours per	box	, unle	ss pe	rson	is bot	h an	compensation		amount of
(1)         RICHARD VIERK         3.00         X         X         X         0.         0.         0.           CHAIRMAN         X         X         0.         0.         0.         0.         0.           DIRECTOR         1.00         X         0.         0.         0.         0.           (3)         CARL SJULIN         1.00         X         0.         0.         0.           (4)         ANTHONY MESSINEO         1.00         X         0.         0.         0.           (5)         RICH BALLEY         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (6)         CRRISTINA BALL         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (8)         WILLAW CINTANI         1.00         X         X         0.         0.         0.           (10)         DONDE PLOWAN         1.00         X         X         0.         0.         0.           DIRECTOR         X         0.		week		cer an	nd a d	recto	or/trus	tee)	from	from related	other
(1)         RICHARD VIERK         3.00         X         X         X         0.         0.         0.           CHAIRMAN         X         X         0.         0.         0.         0.         0.           DIRECTOR         1.00         X         0.         0.         0.         0.           (3)         CARL SJULIN         1.00         X         0.         0.         0.           (4)         ANTHONY MESSINEO         1.00         X         0.         0.         0.           (5)         RICH BALLEY         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (6)         CRRISTINA BALL         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (8)         WILLAW CINTANI         1.00         X         X         0.         0.         0.           (10)         DONDE PLOWAN         1.00         X         X         0.         0.         0.           DIRECTOR         X         0.			rector								
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(1)         RICHARD VIERK         3.00         X         X         X         0.         0.         0.           CHAIRMAN         X         X         0.         0.         0.         0.         0.           DIRECTOR         1.00         X         0.         0.         0.         0.           (3)         CARL SJULIN         1.00         X         0.         0.         0.           (4)         ANTHONY MESSINEO         1.00         X         0.         0.         0.           (5)         RICH BALLEY         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (6)         CRRISTINA BALL         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (8)         WILLAW CINTANI         1.00         X         X         0.         0.         0.           (10)         DONDE PLOWAN         1.00         X         X         0.         0.         0.           DIRECTOR         X         0.			ustee	truste		e	bens		(W-2/1099-MISC)		0
(1)         RICHARD VIERK         3.00         X         X         X         0.         0.         0.           CHAIRMAN         X         X         0.         0.         0.         0.         0.           DIRECTOR         1.00         X         0.         0.         0.         0.           (3)         CARL SJULIN         1.00         X         0.         0.         0.           (4)         ANTHONY MESSINEO         1.00         X         0.         0.         0.           (5)         RICH BALLEY         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (6)         CRRISTINA BALL         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (8)         WILLAW CINTANI         1.00         X         X         0.         0.         0.           (10)         DONDE PLOWAN         1.00         X         X         0.         0.         0.           DIRECTOR         X         0.			ual tr	ional		ploye	t com				
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(3)         CARL SJULIN         1.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (4)         ANTHONY MESSINEO         1.00         X         0.         0.         0.         0.           (5)         RICH BAILEY         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.	(2) CATHERINE LANG	1.00									
DIRECTOR         X         0.         0.         0.         0.           (4) ANTHONY MESSINEO         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.           (6) CHRISTINA BALL         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           (7) JOHN BERGMEYER         1.00         X         0.	DIRECTOR		x						0.	0.	0.
(4) ANTHONY MESSINEO         1.00         X         0.         0.         0.           DIRECTOR         X         0.0         0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	(3) CARL SJULIN	1.00									
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(5) RICH BALLEY       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (6) CHRISTINA BALL       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         VICE-CHAIR       1.00       X       0.       0.       0.         VICE-CHAIR       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.         DIRECTOR       X       0. <td< td=""><td>(4) ANTHONY MESSINEO</td><td>1.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	(4) ANTHONY MESSINEO	1.00									
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(6)         CHRISTINA BALL         1.00         X         0.         0.         0.           DIRECTOR         X         0. <td>(5) RICH BAILEY</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(5) RICH BAILEY	1.00									
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(8)         WILLIAM CINTANI         1.00         X         X         X         0.         0.         0.           (9)         JOHN DITTMAN         1.00         X         X         0.         0.         0.         0.           DIRECTOR         X         X         0.         0.         0.         0.         0.           DIRECTOR         X         X         0.         0.         0.         0.         0.           (10)         DONDE PLOWMAN         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           (11)         JUAN FRANCO         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.	(7) JOHN BERGMEYER	1.00									
VICE-CHAIR         X         X         X         X         0. <th< td=""><td>DIRECTOR</td><td></td><td>X</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>	DIRECTOR		X						0.	0.	0.
(9) JOHN DITTMAN       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (10) DONDE PLOWMAN       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (11) JUAN FRANCO       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (12) RANDY HAAS       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (13) HELEN RAIKES       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (14) WILLIAM MUELLER       1.00       X       X       0.       0.       0.         (15) WILLIAM OLSON       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (16) MARK WHITEHEAD       1.00       X       0.       0.       0. <td>(8) WILLIAM CINTANI</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(8) WILLIAM CINTANI	1.00									
DIRECTOR         X         X         0. <th< td=""><td>VICE-CHAIR</td><td></td><td>Х</td><td></td><td>Х</td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>	VICE-CHAIR		Х		Х				0.	0.	0.
(10) DONDE PLOWMAN         1.00         X         0.0.0.0.           DIRECTOR         X         0.0.0.0.         0.0.0.           (11) JUAN FRANCO         1.00         X         0.0.0.0.           DIRECTOR         X         0.0.0.0.         0.0.           (12) RANDY HAAS         1.00         0.0.0.0.         0.0.0.           DIRECTOR         X         0.0.0.0.0.         0.0.0.           (13) HELEN RAIKES         1.00         0.0.0.0.         0.0.0.           DIRECTOR         X         0.0.0.0.0.         0.0.0.           (14) WILLIAM MUELLER         1.00         0.0.0.0.         0.0.0.           SECRETARY         X         0.0.0.0.0.         0.0.0.           (15) WILLIAM OLSON         1.00         0.0.0.0.         0.0.0.           DIRECTOR         X         0.0.0.0.         0.0.0.           (16) MARK WHITEHEAD         1.00         0.0.0.0.         0.0.0.           DIRECTOR         X         0.0.0.0.         0.0.0.           (17) SUE WILKINSON         1.00         0.0.0.0.         0.0.0.	(9) JOHN DITTMAN	1.00									
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(11) JUAN FRANCO       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (12) RANDY HAAS       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (13) HELEN RAIKES       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (14) WILLIAM MUELLER       1.00       X       X       0. <td< td=""><td>(10) DONDE PLOWMAN</td><td>1.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	(10) DONDE PLOWMAN	1.00									
DIRECTOR         X         0. <t< td=""><td>DIRECTOR</td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>	DIRECTOR		Х						0.	0.	0.
(12) RANDY HAAS       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (13) HELEN RAIKES       1.00       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.         (14) WILLIAM MUELLER       1.00       X       X       0.       0.       0.         SECRETARY       X       X       0.       0.       0.       0.         (15) WILLIAM OLSON       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (16) MARK WHITEHEAD       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (17) SUE WILKINSON       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.	(11) JUAN FRANCO	1.00									_
DIRECTOR         X         0. <t< td=""><td>DIRECTOR</td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>	DIRECTOR		Х						0.	0.	0.
(13) HELEN RAIKES       1.00       X       0.       0.       0.         DIRECTOR       X       1.00       X       0.       0.       0.         (14) WILLIAM MUELLER       1.00       X       X       0.       0.       0.         SECRETARY       X       X       0.       0.       0.       0.         (15) WILLIAM OLSON       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (16) MARK WHITEHEAD       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (17) SUE WILKINSON       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.	(12) RANDY HAAS	1.00									
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(14) WILLIAM MUELLER       1.00       X       X       0.       0.       0.         SECRETARY       X       X       0.       0.       0.       0.       0.         (15) WILLIAM OLSON       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.         (16) MARK WHITEHEAD       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.	(13) HELEN RAIKES	1.00									
SECRETARY         X         X         X         0. <th< td=""><td>DIRECTOR</td><td></td><td>X</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>	DIRECTOR		X						0.	0.	0.
(15) WILLIAM OLSON       1.00       0.0.0.0.         DIRECTOR       X       0.0.0.0.         (16) MARK WHITEHEAD       1.00       0.0.0.0.         DIRECTOR       X       0.0.0.0.         DIRECTOR       X       0.0.0.0.         DIRECTOR       X       0.0.0.0.         DIRECTOR       X       0.0.0.0.	(14) WILLIAM MUELLER	1.00									
DIRECTOR         X         0. <t< td=""><td></td><td></td><td>X</td><td></td><td>X</td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>			X		X				0.	0.	0.
(16) MARK WHITEHEAD         1.00         X         0. <td></td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		1.00									
DIRECTOR         X         0. <t< td=""><td></td><td>1 00</td><td>X</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>		1 00	X						0.	0.	0.
(17) SUE WILKINSON         1.00         X         0. <td></td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td><u>^</u></td>		1.00									<u>^</u>
DIRECTOR X 0. 0. 0.		1 00	X						0.	0.	0.
		1.00								_	^
			X						0.	0.	

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Form 990 (2015)

Form	990	(201	5

LINCOLN COMMUNITY FOUNDATION INC

47-0458128 Page 8

Part VII Section A. Officers, Directors, Trus		ploy	ees			ighe	st C	Compensated Employe	es (continued)				
(A)	(B)			•	C)			(D)	(E)			(F)	
Name and title	Average	(do	not c	Pos heck		<b>1</b> e than	one	Reportable	Reportable		Es	timat	ed
	hours per	box	, unle	ss pe	erson	is bot or/trus	th an	compensation	compensatio			nount	
	week (list any	<u> </u>						from	from related			other	
	hours for	irecto						the organization	organizations			pensa om th	
	related	e or d	tee			sated		(W-2/1099-MISC)	(W-2/1099-MIS	.0)		aniza <sup>:</sup>	
	organizations	truste	al trus		/ee	mpen		(112/1000 11100)			•	d rela	
	below	Individual trustee or director	nstitutional trustee	5	mploy	est co o yee	er					anizat	
	line)	Indiv	In stit	Officer	Key employee	Highest compensated employee	Former						
(18) NANCY WIEDERSPAN	1.00												
DIRECTOR		X						0.		0.			0.
(19) HANK WOODS	1.00												
DIRECTOR		Х						0.		0.			0.
(20) KIMBERLY RATH	1.00												
DIRECTOR		Х						0.		0.			0.
(21) ROBERT CALDWELL	1.00												_
DIRECTOR		Х						0.		0.			0.
(22) DAVID LANDIS	1.00												
DIRECTOR		Х						0.		0.			0.
(23) DIANE MENDENHALL	1.00												
DIRECTOR		х						0.		0.			0.
(24) DEB SCHORR	1.00												•
DIRECTOR	1 00	х						0.		0.			0.
(25) KENT SEACREST	1.00												•
DIRECTOR	1 00	х						0.		0.			0.
(26) ROBERT SCOTT	1.00	.,						0					•
DIRECTOR		X						0.		0.			0.
1b Sub-total								•••		0.		<u> </u>	
c Total from continuation sheets to Part VI								479,142.		0.			62.
d Total (add lines 1b and 1c)								479,142.		-	9	0,0	02.
2 Total number of individuals (including but n	ot limited to th	lose	liste	ed a	bov	e) w	ho r	eceived more than \$100	,000 of reportable	e			ე
compensation from the organization												Yes	2 No
	-11							• · · · · · · · · · · · · · · · · · · ·		I		163	NO
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s				•	•	-		<b>o</b>	npioyee on		3		x
								har companyation from :	the organization		3		- 21
4 For any individual listed on line 1a, is the su and related organizations greater than \$150			-						the organization		4	Х	
5 Did any person listed on line 1a receive or a									dual for convicos	····	4		
rendered to the organization? If "Yes," com	•							ed organization of more	dual for services		5		X
Section B. Independent Contractors			0/ 01	uon	per	3011			<u></u>				
1 Complete this table for your five highest co	mpensated in	depe	ende	ent c	cont	racto	ors t	that received more than	\$100.000 of com	pens	ation f	rom	
the organization. Report compensation for													
(A)	y							(B)			(C	;)	
Name and business	address							Description of s	ervices	С	omper		on
GRASSROOTS SOLUTIONS, 282		ERS	SI	ΓҮ	A	VE	,						
SUITE 50, MINNEAPOLIS, MI	1 55414							CONSULTATION			18	2,9	76.
H3 STUDIO, INC.													
4395 LACLEDE AVE, ST. LOU	JIS, MO	63	31(	38				CONSULTATION			11	2,8	09.
2 Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se li	stec	above) who received m	ore than				
\$100,000 of compensation from the organiz		<del></del>			TO	2	a						
SEE PART VII, SECTION 532008 12-16-15	N A CON	111	NÜZ	Α'Γ.	10]	N S	SH]	EETS			Form	990 (	(2015)
12-10-13													

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Form 990 LINCOLN									47-045	8128
Part VII Section A. Officers, Directors, Tr						est		ees (continued) (E)		
(A)	(B)	(B) (C)						(D)	(F)	
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week					oyee		the	organizations	compensation
	(list any	rector				ample.		organization	(W-2/1099-MISC)	from the
	hours for	or di	e,			ated		(W-2/1099-MISC)		organization
	related	Istee	truste		e	pens				and related
	organizations	al tru	onal		ploye	com				organizations
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
	,	Ē	Ë	đ	Ke	王	ß			
(27) DAN VOKOUN	1.00	x						0.	0.	0
DIRECTOR (28) MARK WALZ	2.00	^						0.	0.	0.
(28) MARK WALZ TREASURER	2.00	x		x				0.	0.	0.
(29) JUDY GAIASHIKBOS	1.00							0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(30) KEVIN KELLER	1.00							0.	•	0.
DIRECTOR	1.00	x						0.	0.	0.
(31) LEE STUART	1.00									
DIRECTOR		x						0.	0.	0.
(32) AVA THOMAS	1.00									
DIRECTOR		x						0.	0.	0.
(33) BARBARA BARTLE	40.00									
PRESIDENT		1		X				161,106.	0.	42,898.
(34) PAULA METCALF	40.00									
VP FOR GIFT PLANNING				Х				126,787.	0.	19,744.
(35) SCOTT LAWSON	40.00									
VP FOR FINANCE	40.00			X				99,113.	0.	16,807.
(36) SARAH PEETZ	40.00			x				00 106	0	17 010
VP FOR COMMUNITY OUTREACH				<u> </u>				92,136.	0.	17,213.
		-								
		1								
		<u> </u>								
		ł								
		{								
		-								
		1								
					•					
Total to Part VII, Section A, line 1c								479,142.		96,662.

04-01-15

Form 990 (20	15)	LINCOLN	COMMUNITY	FOUNDATION	INC
Part VIII	Statement	of Revenue			

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
			·	-	<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
ts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
Pa Gu		Fundraising events						
ar J		Related organizations						
s, C		Government grants (contribut						
r S	f	All other contributions, gifts, gran	ts, and					
ibut		similar amounts not included abov	ve 1f	9,906,735.				
4 q t	g	Noncash contributions included in lines	1a-1f: \$	1,536,041.				
ခြိုင်	h	Total. Add lines 1a-1f		►	9,906,735.			
				Business Code				
e	2 a							
ervi Je	b							
Program Service Revenue	с							
lev Rev	d							
2 F	е							
₽	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f						
	3	Investment income (including						
		other similar amounts)			3,453,933.			3,453,933.
	4	Income from investment of tax						
	5	Royalties						
			(i) Real	(ii) Personal				
		Gross rents	284,260.					
		Less: rental expenses	245,993.					
		Rental income or (loss)	38,267.		20.067	20.067		
					38,267.	38,267.		
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	7,041,749.					
	b	Less: cost or other basis	7 240 910					
	_	and sales expenses	100.061					
	c	Gain or (loss)	-199,001.		-199,061.	-199,061.		
		Net gain or (loss)		🕨	-199,001.	-199,001.		
anu	8 a	Gross income from fundraising including \$	-					
Other Reven			of					
Å.		contributions reported on line Part IV, line 18						
her	h	Less: direct expenses						
đ		Net income or (loss) from func						
		Gross income from gaming ac						
	5 u	Part IV, line 19						
	h	Less: direct expenses						
		Net income or (loss) from gam						
		Gross sales of inventory, less		F				
		and allowances						
	b	Less: cost of goods sold						
		Net income or (loss) from sale		▶				
Ī		Miscellaneous Revenu		Business Code				
Ī	11 a	MISCELLANEOUS INCOME		900099	72,591.	72,591.		
	b							
	с							
	d	All other revenue						
		Total. Add lines 11a-11d		►	72,591.			
	12	Total revenue. See instructions.			13,272,465.	-88,203.	0.	3,453,933.
53200	9 12-16							Form <b>990</b> (2015)

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Part IX Statement of Functional Expenses

LINCOLN COMMUNITY FOUNDATION INC

<u> </u>	Check if Schedule O contains a respon	nse or note to any line in (A)	TINIS Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	<b>(B)</b> Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	11,772,287.	11,772,287.		
2	Grants and other assistance to domestic				
~	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,				
5	trustees, and key employees	575,804.	386,991.	105,559.	83,254
6	Compensation not included above, to disqualified	57570010	50075510	100,000	007201
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	559,630.	302,861.	141,548.	115,221
7	Other salaries and wages		502,0010		110,001
' 8	Pension plan accruals and contributions (include				
0	section 401(k) and 403(b) employer contributions)	13,821.	7,089.	3,713	3.019
9	Other employee benefits	65,385.	35,207.	3,713. 16,393.	3,019 13,785
0		70,152.	42,246.	15,465.	12,441
1	Payroll taxes Fees for services (non-employees):	, , , 1521	12,2100	15,1050	
a	Management				
		3,600.		3,600.	
	Accounting	38,811.		38,811.	
	Lobbying				
e e	Professional fundraising services. See Part IV, line 17				
	Investment management fees	91,699.		91,699.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
Э	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	225,742.	149,576.	38,083.	38,083
13	Office expenses	33,726.	20,310.	7,435.	5,981
14	Information technology	<b>,</b> -		,	- ,
5	Royalties				
16	Occupancy	71,144.	43,517.	15,311.	12,316
17	Troval	36,131.	24,013.	5,189.	6,929
8	Payments of travel or entertainment expenses	•		,	•
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,770.	2,250.	3,800.	720
20	Interest	•		,	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	248,018.	227,409.	11,421.	9,188
3	Insurance	3,181.	1,916.	701.	564
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	FISCAL SPONSORSHIPS	302,413.	302,413.		
b	MISSION INITIATIVES	300,957.	300,957.		
С	LIFE INSURANCE PREMIUM	96,393.	96,393.		
d	ANNUITY DISTRIBUTION	81,858.	81,858.		
e	All other expenses	76,548.	20,749.	48,212.	7,587
25	Total functional expenses. Add lines 1 through 24e	14,674,070.	13,818,042.	546,940.	309,088
26	Joint costs. Complete this line only if the organization				-
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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Check here

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if following SOP 98-2 (ASC 958-720)

11 2015.04030 LINCOLN COMMUNITY FOUNDATIO 4343-001

Form 990 (2015)

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	LINCOLN	COMMUNITY	FOUNDATION	INC
heet				

		Check if Schedule O contains a response or not	o to any line in this Part Y			
		Check if Schedule O contains a response of not				
				(A) Beginning of year		<b>(B)</b> End of year
						-
	1	Cash - non-interest-bearing		774,151.	1	1,749,742.
	2	Savings and temporary cash investments		18,218,997.	2	10,257,642.
	3	Pledges and grants receivable, net		3,316,373.	3	3,559,842.
	4	Accounts receivable, net		3,568,462.	4	223,233.
	5	Loans and other receivables from current and for	rmer officers, directors,			
		trustees, key employees, and highest compensation	ted employees. Complete			
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualit	ied persons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sect	ion 501(c)(9) voluntary			
ts		employees' beneficiary organizations (see instr).	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7	
A	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a 6,953,864.	,		
	b	Less: accumulated depreciation	10b 3,626,065.		10c	3,327,799.
	11	Investments - publicly traded securities		81,285,858.	11	83,262,347.
	12	Investments - other securities. See Part IV, line 1	1	2,566,972.	12	2,575,437.
	13	Investments - program-related. See Part IV, line	11	260,214.	13	245,362.
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equa		113,437,321.	16	105,201,404.
	17	Accounts payable and accrued expenses		493,333.	17	592,924.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete F	Part IV of Schedule D		21	
es	22	Loans and other payables to current and former	officers, directors, trustees,			
Liabilities		key employees, highest compensated employee	s, and disqualified persons.			
iab.		Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrela			23	
	24	Unsecured notes and loans payable to unrelated	third parties		24	
	25	Other liabilities (including federal income tax, page	ables to related third			
		parties, and other liabilities not included on lines	17-24). Complete Part X of			<b>605 044</b>
				714,662.		635,311.
	26	Total liabilities. Add lines 17 through 25		1,207,995.	26	1,228,235.
		Organizations that follow SFAS 117 (ASC 958				
Fund Balances		complete lines 27 through 29, and lines 33 an		104,867,217.		07 040 404
lan	27	Unrestricted net assets		7,362,109.	27	97,049,494. 6,923,675.
Ba	28	Temporarily restricted net assets		7,302,109.	28	0,923,073.
pur	29				29	
		Organizations that do not follow SFAS 117 (A	SC 958), Check here 🕨 📖			
S S	00	and complete lines 30 through 34.			00	
set	30	Capital stock or trust principal, or current funds			30	
As	31	Paid-in or capital surplus, or land, building, or eq			31	
Net Assets or	32	Retained earnings, endowment, accumulated in		112,229,326.	32	103,973,169.
_	33	Total net assets or fund balances		112,229,320.	33	105,201,404.
	34	Total liabilities and net assets/fund balances		1 113,431,341.	34	Form <b>990</b> (2015)
						Form <b>330</b> (2015)

Form 990 (2015)
Part X Balance Sh

	990 (2015) LINCOLN COMMUNITY FOUNDATION INC	47-0	)458128	Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,27		
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,67		
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,40		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	112,22		
5	Net unrealized gains (losses) on investments	5	-7,04	1,7	33.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	18	<u>7,1</u>	81.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	103,97	3,1	69.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	•			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
			Form	990	(2015)

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(Form	990	or	990-	·ΕΖ
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# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047
2015
Open to Public Inspection

Department of the Treasury Internal Revenue Service

	Information about Schedule A (Form 990 or 990-EZ) and its instructions is at WWW.irs.gov/form990	О.
•		

Nan	ne o	r tr	ne organization		Tmv	ت مرينين مرينين		C			7-0458128
Pa	rt I		Reason for Public	COLN COMMUN					o instruction		7-0450120
										5.	
1ne 1	Giga		zation is not a private four A church, convention of c								
	$\vdash$								I)(A)(I).		
2	$\vdash$		A school described in <b>sec</b>						::)		
3	$\vdash$		A hospital or a cooperativ						•	VIII) Entor	the beenitel's name
4			A medical research organ	ization operated in co	njuncu	on with a nospita	a described	u in sectio	n 170(a)(1)(A	<b>J(III).</b> Enter	the hospital's hame,
5			city, and state: An organization operated	for the henefit of a or			d or oporo	tod by a a	ovornmontal	unit dooorik	ad in
5	L		section 170(b)(1)(A)(iv).		niege o		u or opera	lieu by a g	oveninentai		
6		1			montol	unit described in	contion 1	70(6)(4)(4)	64		
6 7	X		A federal, state, or local g An organization that norm	-						the general	public described in
'			section 170(b)(1)(A)(vi). (		annai pa	art of its support	nom a gov	ennentai		uie general	public described in
8			A community trust descril		(1)(A)()	(Complete Pa	4 II )				
9			An organization that norm					contributi	one mombor	shin foos	and aross resoluts from
5			activities related to its exe	•					-	•	•
			income and unrelated bus								
			See section 509(a)(2). (C		5 (1033 3	section of r tax) h		5365 acqu	ined by the o	Iganization	
10			An organization organized	• •	sively to	test for public s	afety See	section 50	)9(a)(4)		
11			An organization organized	-	-	-	•			arry out the	e purposes of one or
•••			more publicly supported of	-	-		-			-	
			lines 11a through 11d tha								
а			<b>Type I.</b> A supporting or					•		0	giving
			the supported organization	tion(s) the power to re	gularly	appoint or elect	a majority	of the dire	ctors or trust	ees of the s	supporting
			organization. You must	complete Part IV, S	ections	A and B.					
b			<b>Type II.</b> A supporting or	ganization supervised	d or cor	ntrolled in connec	ction with it	ts support	ed organizati	on(s), by ha	iving
			control or management	of the supporting org	anizatio	on vested in the	same perso	ons that co	ontrol or man	age the sup	ported
	_		organization(s). You mu	ist complete Part IV,	Sectio	ons A and C.					
с			Type III functionally in	tegrated. A supportir	ig orgai	nization operated	l in connec	tion with, a	and functiona	ally integrate	ed with,
	_		its supported organizati	ion(s) (see instruction	s). <b>You</b>	must complete	Part IV, Se	ections A,	D, and E.		
d	L		Type III non-functional	<b>lly integrated.</b> A supp	oorting	organization ope	rated in co	nnection v	vith its suppo	orted organi	zation(s)
			that is not functionally in	ntegrated. The organi	zation g	generally must sa	tisfy a dist	ribution re	quirement an	d an attent	iveness
	_		requirement (see instruc		-						
е			Check this box if the or	ganization received a	written	determination fr	om the IRS	6 that it is a	а Туре I, Туре	e II, Type III	
			functionally integrated,		,	0 11	0 0				
			r the number of supported								
g	Pr		ide the following information Name of supported	on about the support (ii) EIN	<u> </u>	nization(s). pe of organization	(iv) Is the o	ragnization	(v) Amount o	fmonotony	(vi) Amount of
		(1)	organization			ribed on lines 1-9	listed i	in vour	suppor		other support (see
			0		above	(see instructions))	governing of Yes	document?	instruct	-	instructions)
							165				
Tota	al										
		P	aperwork Reduction Act	Notice, see the Inst	ruction	s for			Sche	dule A (For	m 990 or 990-EZ) 2015

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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2011	<b>(b)</b> 2012	(c) 2013	<b>(d)</b> 2014	<b>(e)</b> 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	4,699,019.	7,215,144.	23,520,360.	19,436,412.	9,906,735.	64,777,670.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	4,699,019.	7,215,144.	23,520,360.	19,436,412.	9,906,735.	64,777,670.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						25,102,433.
	Public support. Subtract line 5 from line 4.						39,675,237.
See	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2011	<b>(b)</b> 2012	(c) 2013	<b>(d)</b> 2014	(e) 2015	(f) Total
7	Amounts from line 4	4,699,019.	7,215,144.	23,520,360.	19,436,412.	9,906,735.	64,777,670.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources $\dots$	1,116,500.	1,212,569.	2,236,793.	2,495,012.	3,453,933.	10,514,807.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	729.	2,851.	7,870.	6,118.	72,591.	
11	Total support. Add lines 7 through 10						75,382,636.
	Gross receipts from related activities,		,			12	
13	First five years. If the Form 990 is for	-	first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
<u> </u>	organization, check this box and stop ction C. Computation of Publi	here	oontago				
							52.63 %
	Public support percentage for 2015 (li					14	
	Public support percentage from 2014					15	
168	33 1/3% support test - 2015. If the o	-					
le le	stop here. The organization qualifies a						
L.	33 1/3% support test - 2014. If the o	-					
17-	and stop here. The organization quali 10% -facts-and-circumstances test						
1/8							
	and if the organization meets the "fac meets the "facts-and-circumstances"				-	-	
<b>h</b>	10% -facts-and-circumstances test						
L.	more, and if the organization meets th						
	organization meets the "facts-and-circ				•		
18	Private foundation. If the organization						
				,,,		dule A (Form 990	

### Schedule A (Form 990 or 990-EZ) 2015 LINCOLN COMMUNITY FOUNDATION INC Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	<b>(f)</b> Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth	tax year as a sectio	on 501(c)(3) or	ganization,
	check this box and stop here					<u></u>	
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2015 (	line 8, column (f) d	ivided by line 13,	column (f))		15	%
	Public support percentage from 2014					16	%
See	ction D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20	<b>)15</b> (line 10c, colur	mn (f) divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	%
<b>19</b> a	<b>33 1/3% support tests - 2015.</b> If the	organization did r	not check the box	on line 14, and lin	ne 15 is more than 3	33 1/3%, and	line 17 is not
	more than 33 1/3%, check this box a						▶∟
b	<b>33 1/3% support tests - 2014.</b> If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19	9a, or 19b, check t			<b>&gt;</b>
5320	23 09-23-15			16	Sch	edule A (Forr	n 990 or 990-EZ) 2015

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

### Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer* (*b*) *and* (*c*) *below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked 11a or 11b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "*Yes*," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2015

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			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions):			
а	The organization satisfied the Activities Test. <i>Complete line 2</i> below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	L The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	_		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	<b>C</b> 1		
~	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0-		
Ŀ-	trustees of each of the supported organizations? Provide details in <i>Part VI.</i>	3a		
D	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3b		
52000	of its supported organizations? If "Yes," describe in <i>Part VI</i> the role played by the organization in this regard. 5 09-23-15 Schedule A (Form 9		0_E7	2015
002028	5 09-23-15 Schedule A (Form 9	30 01 95	/U-EZ)	2013

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### Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations ot Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	y-integrat	ed Type III supporting org	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2015

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Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsive	9	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015
			110 2010	
_1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
a				
b				
C				
	From 2013			
-	From 2014			
-	Total of lines 3a through e			
	Applied to underdistributions of prior years			
-	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
-	Applied to 2015 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
<u>a</u>				
<u>b</u>	Excess from 2013			
-	Excess from 2013			
	Excess from 2014			
e	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

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Part VI	(Form 990 or 990-EZ) 2015 LINCO	Drovido the oveleneticas		10. Dort IL line 17c	47-0458128 Pa
	Supplemental Information. Part IV, Section A, lines 1, 2, 3b, 3c, line 1; Part IV, Section D, lines 2 and	4b, 4c, 5a, 6, 9a, 9b, 9c,	11a, 11b, and 11c; Pa	t IV; Part II, line 1/a oi tt IV, Section B, lines 1 P Part V, line 1: Port V	and 2; Part III, line 12; Section P. line 10; Dort V.
	Section D, lines 5, 6, and 8; and Par (See instructions.)	V, Section E, lines 2, 5,	and 6. Also complete th	nis part for any additio	, Section B, line Te; Part V, nal information.
	(อออ แรกสอบเปลร์)				
32028 09-23-1	5			Schedul	e A (Form 990 or 990-EZ)
			21	MMUNITY FOU	(

Department of the Treasury Internal Revenue Service

(Form 990)

# Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.



Nam	e of the organization LINCOLN COMMUNITY	FOUNDAT	ION INC		Emp	ployer identification nu 47-0458128	
Pa				Funds or	Accou		
	organization answered "Yes" on Form 990, Part IV, lin						
			nor advised funds		(b) Fun	nds and other accounts	
1	Total number at end of year			228			
2	Aggregate value of contributions to (during year)		4,023,9	92.			
3	Aggregate value of grants from (during year)		6,109,5				
4	Aggregate value at end of year		24,093,6				
5	Did the organization inform all donors and donor advisors in v				unds		
·	are the organization's property, subject to the organization's	-				X Yes	N
6	Did the organization inform all grantees, donors, and donor a						
•	for charitable purposes and not for the benefit of the donor o		0 0		,		
	impermissible private benefit?				-	X Yes	N
Pa							
1	Purpose(s) of conservation easements held by the organization	-		11000, 1 art	,		
•	Preservation of land for public use (e.g., recreation or e			of a historica	ully impor	rtant land area	
	Protection of natural habitat	ducation	Preservation of		• •		
	Preservation of open space			a certineu	Thatone .	Structure	
2		find concernation	on contribution in t	a form of a	0000000	ation accoment on the l	ot
2	Complete lines 2a through 2d if the organization held a qualif	neu conservati		le ionn of a	Conserva	Held at the End of the Ta	
_	day of the tax year.				0-	neiu al lie ciiu oi lie ta	XICa
b	Total acreage restricted by conservation easements						
с	Number of conservation easements on a certified historic structure				. <b>2</b> c		
a	Number of conservation easements included in (c) acquired a						
	listed in the National Register					<u> </u>	
3	Number of conservation easements modified, transferred, rel	leased, extingi	uished, or terminate	d by the org	anizatior	1 during the tax	
	year						
4	Number of states where property subject to conservation eas						
5	Does the organization have a written policy regarding the per		•	•			٦
_	violations, and enforcement of the conservation easements it						_ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of vie	plations, and enforc	ing conserva	ation eas	ements during the year	
_							
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violatio	ns, and enforcing c	onservation	easemer	nts during the year	
	►\$						
8	Does each conservation easement reported on line 2(d) abov		•				-
	and section 170(h)(4)(B)(ii)?						_ No
9	In Part XIII, describe how the organization reports conservation			1	,	,	
	include, if applicable, the text of the footnote to the organizat	tion's financial	statements that de	scribes the o	organizat	tion's accounting for	
_	conservation easements.				<u> </u>		
Pa	t III Organizations Maintaining Collections of			s, or Othe	r Simil	ar Assets.	
	Complete if the organization answered "Yes" on Form	1990, Part IV, I	ine 8.				
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to	report in its revenu	e statement	and bala	ance sheet works of art,	,
	historical treasures, or other similar assets held for public exh	nibition, educa	tion, or research in	furtherance	of public	service, provide, in Par	rt XIII,
	the text of the footnote to its financial statements that descri	bes these iten	ıs.				
h	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to rep	ort in its revenue st	atement and	l balance	e sheet works of art, his	+
n		ducation, or re	search in furtherand	ce of public s	service, p	provide the following an	torica
U	treasures, or other similar assets held for public exhibition, ec		scarch in functionality				
U	treasures, or other similar assets held for public exhibition, ec relating to these items:						
U	•				► :	\$	
U	relating to these items:				<b>N</b>		
2	relating to these items: (i) Revenue included on Form 990, Part VIII, line 1				🕨 :	\$	
	<ul><li>relating to these items:</li><li>(i) Revenue included on Form 990, Part VIII, line 1</li><li>(ii) Assets included in Form 990, Part X</li></ul>	asures, or othe	er similar assets for	financial gai	🕨 :	\$	
	<ul> <li>relating to these items:</li> <li>(i) Revenue included on Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>If the organization received or held works of art, historical treat the following amounts required to be reported under SFAS 1</li> </ul>	asures, or othe 16 (ASC 958)	er similar assets for relating to these iter	financial gai ms:	n, provid	\$ le	
2 a	<ul> <li>relating to these items:</li> <li>(i) Revenue included on Form 990, Part VIII, line 1</li> <li>(ii) Assets included in Form 990, Part X</li> <li>If the organization received or held works of art, historical treatment</li> </ul>	asures, or othe 16 (ASC 958)	er similar assets for relating to these ite	financial gai ns:	▶ : n, provid ▶ :	\$ le \$	

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Sche	dule D (Form 990) 2015 LINCOLN	COMMUNITY	FOUNDATIC	N INC		47-04	158128	B Pa	.ge <b>2</b>			
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or	Other 3	Similar Ass	ets(contin	ued)				
3	Using the organization's acquisition, accessi (check all that apply):	on, and other record	s, check any of the	following that a	are a sign	ificant use of its	collection	items	3			
а	Public exhibition	d	Loan or exc	hange program	s							
b	Scholarly research	e										
c	Preservation for future generations											
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.											
5	During the year, did the organization solicit o	•		•	•							
-	to be sold to raise funds rather than to be ma						Yes		No			
Par	t IV Escrow and Custodial Arran											
	reported an amount on Form 990, Par						,,					
<b>1</b> a	Is the organization an agent, trustee, custod	ian or other intermed	iary for contribution	ns or other asse	ts not inc	luded						
	on Form 990, Part X?		•				Yes		No			
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:									
			U				Amount					
с	Beginning balance					1c						
	Additions during the year					1d						
	Distributions during the year					1e						
f	Ending balance					1f						
2a	Did the organization include an amount on F					2	Yes		No			
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has beer	provided on Pa	art XIII							
Par												
		(a) Current year	(b) Prior year	(c) Two years I	back (d)	Three years back	(e) Four	years t	back			
1a	Beginning of year balance	75,106,044.	64,507,663.	55,721,	643.	51,304,766	. 52,	772,	759.			
	Contributions	1,657,110.	11,207,087.	810,	481.	546,394	. 3,	136,	474.			
	Net investment earnings, gains, and losses	-1,614,531.	2,628,094.	10,775,	958.	6,694,590	. 1,	159,	927.			
	Grants or scholarships	2,530,011.	1,272,200.	1,285,	929.	2,824,107	. 3,	444,	540.			
	Other expenditures for facilities											
	and programs	1,698,334.	1,136,600.	751,	266.							
f	Administrative expenses	964,307.	828,000.	763,	224.							
	End of year balance	69,955,971.	75,106,044.	64,507,	663.	55,721,643	. 51,	304,	766.			
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1g, column (	a)) held as:								
а	Board designated or quasi-endowment	,	%									
	Permanent endowment  100.00	%	_									
	Temporarily restricted endowment	%										
	The percentages on lines 2a, 2b, and 2c sho											
3a	Are there endowment funds not in the posse	•	ation that are held a	nd administere	d for the	organization						
	by:	0				C	Г	Yes	No			
	(i) unrelated organizations						3a(i)		Х			
	(ii) related organizations						3a(ii)		Х			
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on Schedule R?	·			3b					
4	Describe in Part XIII the intended uses of the											
Par	t VI Land, Buildings, and Equipm											
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line 11a. S	See Form 990, F	Part X, lin	e 10.						
	Description of property	(a) Cost or ot	ther (b) Cost	or other	(c) Accu	imulated	(d) Book	value	, ,			
		basis (investm		(other)	depre		( )					
<b>1</b> a	Land		64	1,294.			641	,29	94.			
	Buildings			2,174.	3,07	4,773.	2,547					
	Leasehold improvements			·	-	·	-					
	Equipment		69	0,396.	55	1,292.	139	9,10	)4.			
	Other					-						
-	Add lines 1a through 1e. (Column (d) must e		X, column (B). line	10c.)		►	3,327	7,79	<del>.</del> 99			
			, , , , , , , , , , , , , , , , , , , ,	,		Schedul	e D (Form	-				
								-,	. 2			

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Complete fit the organization answerd "Yes" on Form 930, Part V, Ine 11b. See Form 930, Part X, Ine 12.           (a) Postified of early of stelly of stelly of the organization answerd "Yes" on Form 930, Part X, Ine 12.           (b) Cosely-held equity interests           (c)           (d)           (e)           (f)	Part VII Investments - Other Securities.	on Form 990 Part IV line	11b See Form 990 Part X line 1	2
(1) Francial defination         (2) Closelyheld equity interests         (3) Other         (A)         (A)         (A)         (B)         (C)         (B)         (C)         (B)         (C)         (D)         (E)         (C)         (D)         (E)         (D)         (E)         (D)	-			
(2)       Clockey-held equity interests         (3)       Other         (4)				
(a)       (b)         (b)       (c)         (c)				
(A)         (B)           (B)         (C)           (C)         (C)           (D)         (C)           (E)         (C)           (F)         (C)           (G)         (C)           (F)         (F)           (F)				
(B)				
CO       Image: Complete if the organization answered 'Yes' on Form 980, Part IV, line 11c. See Form 980, Part X, line 13.         (a)       Image: Complete if the organization answered 'Yes' on Form 980, Part IV, line 11c. See Form 980, Part X, line 13.         (a)       (b)         (b)       Image: Complete if the organization answered 'Yes' on Form 980, Part IV, line 11c. See Form 980, Part X, line 13.         (a)       (b)         (b)       Image: Complete if the organization answered 'Yes' on Form 980, Part IV, line 11c. See Form 980, Part X, line 15.         (b)       Image: Complete if the organization answered 'Yes' on Form 980, Part IV, line 11d. See Form 990, Part X, line 15.         (c)       Image: Complete if the organization answered 'Yes' on Form 980, Part IV, line 11d. See Form 990, Part X, line 15.         (c)       Image: Complete if the organization answered 'Yes' on Form 980, Part IV, line 11d. See Form 990, Part X, line 15.         (a)       Image: Complete if the organization answered 'Yes' on Form 980, Part IV, line 11d. See Form 990, Part X, line 15.         (b)       Image: Complete if the organization answered 'Yes' on Form 980, Part IV, line 11d. See Form 990, Part X, line 25.         (c)       Image: Complete If the organization answered 'Yes' on Form 980, Part IV, line 11c or 111. See Form 980, Part X, line 25.         (c)       Image: Complete If the organization answered 'Yes' on Form 980, Part IV, line 11c or 111. See Form 980, Part X, line 25.         (c)       Image: Complete If the organiza				
(D)       (E)         (E)       (F)         (G)       (G)         (a)       (G)         (a)       (G)         (a)       (G)         (a)       (G)         (b)       (G)         (a)       (G)         (b)       (G)         (a)       (G)         (b)       (G)         (G)				
(F)       (G)         (G)				
(F)       (a)         (B)       (b)         (A)       (b)         (A)       (b)         (A)       (b)         (B)       (c)         (B)       (c)         (C)       (c)         (A)       (c)         (B)       (c)         (B)       (c)         (C)				
(0)				
(t)       Total. (Col. (t) must equal Form 990, Part X, (col. (B) line 12.) ►         Part VIII       Investments - Program Related.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.         (a) Description of investment       (b) Book value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Book value         (a)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (6)       (c) Method of valuation: Cost or end-of-year market value         (6)       (c) Method of valuation: Cost or end-of-year market value         (7)       (c) Method of valuation: Cost or end-of-year market value         (7)       (c) Method of valuation: Cost or end-of-year market value         (7)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c) Method of value         (2)       (c) Method of value         (4)       (c) Method of value         (6)       (c) Method of value <t< td=""><td></td><td></td><td></td><td></td></t<>				
Part VIII Investments - Program Related.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.         (a) Description of investment       (b) Book value       (c) Method of valuation: Cost or end-of-year market value         (1)       (a)       (b)       (c)       (c) Method of valuation: Cost or end-of-year market value         (1)       (c)       (c)       (c)       (c)       (c)         (3)       (c)       (c)       (c)       (c)       (c)         (6)       (c)       (c)       (c)       (c)       (c)         (7)       (c)       (c)       (c)       (c)       (c)         (7)       (c)       (c)       (c)       (c)       (c)       (c)         (8)       (c)       (c)       (c)       (c)       (c)       (c)         (c) must equal Form 990, Part X, col. (8) line 13.) ►       (c) Part X       (c) Part X       (c) Part X       (c) Part X, line 15.         (a) Description       (b) Part X, col. (B) line 15.)       (c) Part X       (c) Part X       (c) Part X       (c) Part X, col. (B) line 15.)       (c) Part X, col. (C) Part X, col. (B) line 15.)       (c) Part X       (c) Part X       (c) Part X, line 25.       (c) Part X <td></td> <td></td> <td></td> <td></td>				
Complete if the organization answered "Yes" on Form 980, Part IV, line 11c. See Form 980, Part X, line 13.           (a) Description of investment         (b) Book value         (c) Method of valuation: Cost or end-of-year market value           (1)         (c) Method of valuation: Cost or end-of-year market value         (c)           (d)         (c)         (c)           (d)         (c)         (c)           (d)         (c)         (c)           (e)         (c)         (c)           (f)         (c)         (c)           (f)         (c)         (c)           (f)         (c)         (c)           (f)         (c)         (c)           (g)         (c)         (c)           (f)         (c)         (c)           (f)         (c)         (c)           (g)				
(a) Description of investment         (b) Book value         (c) Method of valuation: Cost or end-of-year market value           (1)         (a)         (b)         (c)         (	Part VIII Investments - Program Related.			
(1)       (2)         (3)       (4)         (4)       (5)         (6)       (7)         (7)       (9)         (9)       (9)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►       (9)         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (1)       (a) Description         (2)       (3)         (4)       (5)         (6)       (7)         (7)       (9)         (7)       (9)         (9)       (9)         (1)       (1)         (2)       (2)         (3)       (4)         (4)       (5)         (6)       (7)         (7)       (9)         (9)       (9)         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1)       Federal income taxes         (2)       (3)         (4)       (4)         (5)       (6) </td <td></td> <td></td> <td></td> <td></td>				
(2)       (3)         (3)       (4)         (4)       (5)         (6)       (7)         (7)       (7)         (8)       (7)         (9)       (7)         (9)       (7)         (9)       (7)         (9)       (7)         (9)       (7)         (9)       (7)         (10)       (8)         (11)       (9)         (12)       (13)         (13)       (14)         (14)       (15)         (15)       (16)         (16)       (17)         (17)       (16)         (18)       (17)         (19)       (11)         (10)       (11)         (11)       (11)         (12)       (11)         (13)       (11)         (16)       (11)         (17)       (11)         (18)       (11)         (19)       (11)         (10)       (11)         (10)       (11)         (11)       (12)         (12)       (13)         (13)       (11)				a or onu-or-year market value
(3)       (4)         (4)       (5)         (5)       (6)         (7)       (7)         (8)       (7)         (9)       (7)         Total. (Col. (b) must equal Form 990, Part X, col. (8) line 13.)       (8)         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (b) Book value         (1)       (2)         (3)       (4)         (4)       (5)         (6)       (7)         (7)       (8)         (9)       (9)         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         (6)       (7)         (7)       (9)         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1,       (a) Description of liability         (b) Book value       (1)         (1)       (2)         (3)       (4)         (4)       (5)         (5)       (5)         (6)       (7)         (7)       (6)         (6)       (7)         (6)				
(4)       (4)         (6)       (7)         (7)       (7)         (8)       (7)         (9)       (7)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)▶       (9)         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (b) Book value         (1)       (a) Description       (b) Book value         (6)       (c)       (c)         (7)       (a)       (b)         (8)       (c)       (c)         (9)       (c)       (c)         (a) Description of liability       (b) Book value         (1) Federal income taxes       (c)         (2) ANNUTTIES AND TRUSTS PAYABLE       635 , 311 .         (6)       (c)       (c)         (7)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)				
(6)				
(6)       (7)         (8)       (9)         (9)       (9)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶       (9)         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (9)         (3)       (9)         (6)       (1)         (7)       (9)         (8)       (9)         (9)       (1)         (9)       (1)         (9)       (1)         (9)       (2)         (1)       (2)         (8)       (9)         (9)       (2)         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value       (b) Book value         (1) Federal income taxes       (2) ANNUTTIES AND TRUSTS PAYABLE         (2) ANNUTTIES AND TRUSTS PAYABLE       635, 311.         (6)       (1)         (7)       (2)         (8)       (9)         (9)       (1)         (6)       (2)         (7)       (2)         (8)       <				
(7)       (8)         (9)       (9)         Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►       (1)         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (b) Book value         (1)       (2)         (3)       (4)         (4)       (5)         (6)       (7)         (7)       (8)         (9)       (2)         (1)       (2)         (2)       (3)         (4)       (4)         (5)       (6)         (9)       (2)         (1)       (2)         (1)       (2)         (1)       (2)         (1)       (2)         (1)       (3)         (9)       (4)         (1)       (4)         (2)       (4)         (3)       (5)         (1)       Federal income taxes         (2)       ANNUTTIES AND TRUSTS PAYABLE         (3)       (4)         (5)       (6)         (6)       (7)         (7)       (9)         (6)				
(8)				
(9)       Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶         Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (a) Description       (b) Book value         (1)       (a) Description         (b)       (b)         (c)       (c)         (a)       (c)         (b)       (c)         (c)       (c)         (c)       (c)         (c)       (c)         (d)       (c)         (e)       (c)         (f)       (c)         (g)       (c)         (g)       (c)         (h)       (c)         (b)       (c)         (c)       (c)         (d)       (c)         (e)       (b)         (f)       Form 990, Part X, col. (B) line 15.)         (f)       Foderal income taxes         (g)       (b)         (h)       Foderal income taxes         (g)       (b)         (h)       Foderal income taxes         (g)       (h)         (h)       Foderal income taxes         (g) <td></td> <td></td> <td></td> <td></td>				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►       Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.         (a) Description       (b) Book value         (1)       (a) Description         (2)       (b) Book value         (3)       (c)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (c)         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       (c)         1       (a) Description of liability       (b) Book value         (1)       (a) Description of liability       (b) Book value         (1)       Federal income taxes       (c)         (2)       ANNUITIES AND TRUSTS PAYABLE       635, 311.         (3)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)         (8)       (c)       (c)         (9)       (c)       (c)         (6)       (c)       (c)         (7)				
Part IX       Other Assets.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.       (b) Book value         (1)       (a) Description       (b) Book value         (2)       (a)       (b) Book value         (3)       (a)       (b) Book value         (4)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)         (8)       (c)       (c)         (9)       (c)       (c)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.       (c)         Part X       Other Liabilities.       (c)         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       (a) Description of liability         (1)       Federal income taxes       (c)         (2)       ANNUITTES AND TRUSTS PAYABLE       635 , 311 .         (3)       (c)       (c)         (4)       (c)       (c)         (5)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)         (8)       (c)       (c)         (9)       (c)       (c)				
(a) Description       (b) Book value         (1)       (a) Description         (2)       (a) Description         (3)       (a) Description         (4)       (b) Book value         (5)       (c) Description         (6)       (c) Description         (7)       (c) Description         (8)       (c) Description         (9)       (c) Description of liability         (a) Description of liability       (b) Book value         (1) Federal income taxes       (c) Description of liability         (2) ANNUITIES AND TRUSTS PAYABLE       635, 311.         (3)       (d)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c) Description of liability         (7)       (c) Description of liability         (6)       (c) Description of liability         (7)       (c) Description of liability         (8)       (c) Description of Descr				
(a) Description       (b) Book value         (1)       (a) Description         (2)       (b) Book value         (3)       (c)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1) Federal income taxes       (b) Book value         (2) ANNUTITIES AND TRUSTS PAYABLE       635, 311.         (3)       (c)         (4)       (c)         (5)       (c)         (6)       (c)         (7)       (c)         (8)       (c)         (9)       (c)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       (c) 635, 311.	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 1	5.
(2)       (3)         (4)       (5)         (5)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (7)         (9)       (7)         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1) Federal income taxes       (b) Book value         (2) ANNUITIES AND TRUSTS PAYABLE       635, 311.         (3)       (4)         (5)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       635, 311.	(a)	Description		(b) Book value
(3)       (4)         (5)       (5)         (6)       (7)         (8)       (8)         (9)       (7)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (6)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (9)         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       (1) Federal income taxes         (2)       ANNUITIES AND TRUSTS PAYABLE       635, 311.         (3)       (4)       (1)         (4)       (1)       (1)         (5)       (1)       (1)         (6)       (1)       (1)         (7)       (1)       (1)         (8)       (1)       (1)         (9)       (1)       (1)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       (6)         (7)       (3)       (1)         (8)       (1)       (1)         (9)       (2)       (2)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       (6)	(1)			
(3)       (4)         (5)       (5)         (6)       (7)         (8)       (8)         (9)       (7)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (6)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       (9)         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       (1) Federal income taxes         (2)       ANNUITIES AND TRUSTS PAYABLE       635, 311.         (3)       (4)       (1)         (4)       (1)       (1)         (5)       (1)       (1)         (6)       (1)       (1)         (7)       (1)       (1)         (8)       (1)       (1)         (9)       (1)       (1)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       (6)         (7)       (3)       (1)         (8)       (1)       (1)         (9)       (2)       (2)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       (6)	(2)			
(4)       (5)         (6)       (7)         (7)       (8)         (9)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ►         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value         (1)       Federal income taxes         (2)       ANNUITIES AND TRUSTS PAYABLE         (3)       (4)         (4)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       635 , 311 .				
(6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (b) Book value         (1) Federal income taxes         (2) ANNUITIES AND TRUSTS PAYABLE         (3)         (4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         635, 311.				
(7)       (8)         (9)       Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1)       Federal income taxes         (2)       ANNUITTIES AND TRUSTS PAYABLE         (3)       (3)         (4)       (4)         (5)       (6)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       635 , 311 .	(5)			
(8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>	(6)			
(9)       Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶         Part X       Other Liabilities.       ▶         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.       1.       (a) Description of liability       (b) Book value         (1)       Federal income taxes       635, 311.         (3)       (4)       (5)         (6)       (7)       (6)         (7)       (7)       (7)         (8)       (9)       (6) Inne 25.)       635, 311.         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       635, 311.	(7)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)       ▶         Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1) Federal income taxes       635,311.         (2) ANNUITIES AND TRUSTS PAYABLE       635,311.         (3)	(8)			
Part X       Other Liabilities.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability         (1) Federal income taxes       (b) Book value         (2) ANNUITIES AND TRUSTS PAYABLE       635, 311.         (3)       (4)         (5)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       635, 311.	(9)			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.         1.       (a) Description of liability       (b) Book value         (1)       Federal income taxes       (a) Description of liability       (b) Book value         (2)       ANNUITIES AND TRUSTS PAYABLE       635,311.         (3)       (a)       (b) Book value         (4)       (c)       (c)         (6)       (c)       (c)         (7)       (c)       (c)         (8)       (c)       (c)         (9)       (c)       (c)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       635, 311.		e 15.)		🕨
1.       (a) Description of liability       (b) Book value         (1) Federal income taxes       635,311.         (2) ANNUITIES AND TRUSTS PAYABLE       635,311.         (3)       (4)         (4)       (5)         (6)       (6)         (7)       (8)         (9)       635,311.         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       635,311.				
(1) Federal income taxes       (1) Federal income taxes         (2) ANNUITIES AND TRUSTS PAYABLE       635,311.         (3)       (4)         (4)       (5)         (6)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       635,311.		on Form 990, Part IV, line		, line 25.
(2) ANNUITIES AND TRUSTS PAYABLE       635,311.         (3)       (4)         (4)       (5)         (5)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       635,311.			(b) Book value	
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)		DI D	<u> </u>	
(4)         (5)         (6)         (7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         635, 311.		VRTE	635,311.	
(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)				
(6)       (6)         (7)       (7)         (8)       (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)       635, 311.				
(7)         (8)         (9)         Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)         ►       635,311.				
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)				
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ► 635, 311.				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 635, 311.				
		. 05)	635 211	

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2015

532053 09-21-15

<u>Sche</u>	dule D (Form 990) 2015 LINCOLN COMMONITY FOUNDATI	.ON 11	NC	4/-	0458128 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statem		ith Revenue per l	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ì.			
1	Total revenue, gains, and other support per audited financial statements			1	7,166,209.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a	-7,041,733	<u>.</u>	
b	Donated services and use of facilities	_ 2b			
с	Recoveries of prior year grants	. 2c			
d	Other (Describe in Part XIII.)	2d	1,782,271	•	
е	Add lines 2a through 2d			2e	-5,259,462.
3	Subtract line 2e from line 1			3	12,425,671.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
h	Other (Describe in Part XIII.)	. 4b	846,794	•	
D D	Add lines <b>4a</b> and <b>4b</b>			4c	846,794.
c					
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	13,272,465.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Staten	nents W		5	
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form</i> 990, <i>Part I, line</i> 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	nents W	Vith Expenses pe	5 r Retu	irn.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Staten	nents W	Vith Expenses pe	5	
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         T XII Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents W	Vith Expenses pe	5 r Retu	irn.
5 Pa	Total revenue. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>t XII Reconciliation of Expenses per Audited Financial Staten</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	nents W	Vith Expenses pe	5 r Retu	irn.
5 Pai 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         T XII Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents W	Vith Expenses pe	5 r Retu	irn.
5 Pai 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII         Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	2a 2b 2c	Vith Expenses pe	5 r Retu	irn.
5 Pai 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a 2b 2b 2d	Vith Expenses pe	5 r Retu	ırn.
5 Pai 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments       Other losses         Other (Describe in Part XIII.)       Add lines 2a through 2d	2a 2b 2c 2d	Vith Expenses pe	5 r Retu 1 2e	ırn. 16,152,744. 1,595,090.
5 Pai 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a 2b 2c 2d	Vith Expenses pe	5 r Retu 1	ırn.
5 Par 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	Vith Expenses pe	5 r Retu 1 2e	ırn. 16,152,744. 1,595,090.
5 Par 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1	2a 2b 2c 2d	Vith Expenses pe	5 r Retu 1 2e 3	ırn. 16,152,744. 1,595,090.
5 Pai 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	Vith Expenses pe	5 r Retu 1 2e 3	ırn. 16,152,744. 1,595,090. 14,557,654.
5 Pai 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>t XII</b> Reconciliation of Expenses per Audited Financial Staten         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part IVIII, line 7b         Other (Describe in Part XIII.)         Add lines 4a and 4b	2a           2b           2c           2d	Vith Expenses pe 1,595,090 116,416	5 r Retu 1 2e 3	<pre>irn.     16,152,744.     1,595,090.     14,557,654.     116,416.</pre>
5 Pai 1 2 a b c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a           2b           2c           2d	Vith Expenses pe 1,595,090 116,416	5 Retu 1 2e 3	ırn. 16,152,744. 1,595,090. 14,557,654.

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4

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

### PART V, LINE 4:

ENDOWMENT FUNDS WILL BE USED TO FUND GRANTS TO NONPROFIT ORGANIZATIONS AND SCHOLARSHIPS TO DESERVING STUDENTS.

### PART X, LINE 2:

LINCOLN COMMUNITY FOUNDATION, INC. IS EXEMPT FROM FEDERAL INCOME TAX UNDER
SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. AS SUCH, INCOME EARNED IN
THE PERFORMANCE OF THE ORGANIZATION'S EXEMPT PURPOSES IS NOT SUBJECT TO
INCOME TAX. ANY INCOME EARNED THROUGH ACTIVITIES NOT RELATED TO THE
ORGANIZATION'S EXEMPT PURPOSES IS SUBJECT TO INCOME TAX AT NORMAL
CORPORATE RATES. FOR THE YEAR ENDED DECEMBER 31, 2015 THERE WAS NO TAX
LIABILITY ON UNRELATED BUSINESS ACTIVITY. THE ORGANIZATION BELIEVES THAT
532054 09-21-15 Schedule D (Form 990) 2015
30 09021102 758603 4343-000 2015.04030 LINCOLN COMMUNITY FOUNDATIO 4343-001

Schedule D (Form 990) 2015       LINCOLN COMMUNITY FOUNDATION INC       4         Part XIII       Supplemental Information (continued)	7-0458128 Page 5
IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND A	S SUCH, DOES
NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE	
STATEMENTS.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
SPLIT INTEREST AGREEMENTS	112,238.
INTERNAL ADMINISTRATIVE FEE REVENUE	1,349,097.
RENTAL EXPENSES	245,993.
ADJUSTMENT FOR AN INTERFUND TRANSFER BETWEEN	74,943.
LINCOLN COMMUNITY FOUNDATION AND LINCOLN FOUNDATION DONOR DIR	ECTED
DEPOSITORY	
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,782,271.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
CONTRIBUTIONS AND INVESTMENT INCOME RELATED TO AGENCY FUNDS	846,794.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
INTERNAL ADMINISTRATIVE FEE EXPENSE	1,349,097.
RENTAL EXPENSES	245,993.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,595,090.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
EXPENSES RELATED TO AGENCY FUNDS	116,416.
S	chedule D (Form 990) 2015

532055 09-21-15

SCHEDULE I (Form 990)	Go	irants and Oth vernments, an ete if the organizatio	nd Individual	<b>s in the Ŭn</b> i on Form 990, Pa	ted States		OMB No. 1545-0047 <b>2015</b> Open to Public
Department of the Treasury Internal Revenue Service	Informati	on about Schedule I	•		t www.irs.gov/form99	00.	Inspection
Name of the organization		FOUNDATION					Employer identification number $47 - 0458128$
Part I General Information on Grants a							
1 Does the organization maintain records	to substantiate the	amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	
criteria used to award the grants or ass	istance?						X Yes 🗌 No
2 Describe in Part IV the organization's pr		<u> </u>					
Part II Grants and Other Assistance to					anization answered "	Yes" on Form 990, Par	t IV, line 21, for any
recipient that received more than		•	· ·		(f) Method of		
<b>1 (a)</b> Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABENDMUSIK LINCOLN							
2000 D ST	26.2004050		20.005				
LINCOLN, NE 68502	36-3094958		38,895.	0.			GENERAL PURPOSES
ACCELERATE NEBRASKA, INC. 7101 MERCY RD STE 150							
OMAHA, NE 68106	47-0964472		25,000.	0.			COMMUNITY COORDINATOR
AKSARBEN FOUNDATION 6910 PACIFIC ST OMAHA, NE 68106	47-0447496		5,000.	0.			GENERAL PURPOSES
ALPHA USA 2275 HALF DAY RD STE 185 BANNOCKBURN, IL 60015	13-3962840		20,000.	0.			GENERAL PURPOSES
AMERICAN RED CROSS OF CAPITAL AREA AND EASTERN NEBRASKA - 220							
OAKCREEK DR - LINCOLN, NE 68528	53-0196605		10,633.	0.			GENERAL PURPOSES
AMERICAN RED CROSS-CORNHUSKER REGIONAL CHAPTER - 220 OAKCREEK DR							
- LINCOLN, NE 68528	47-0376573		7,684.	0.			GENERAL PURPOSES
2 Enter total number of section 501(c)(3) a	0		e line 1 table				▶243.
3 Enter total number of other organization							
LHA For Paperwork Reduction Act Notice	e, see the instruct	ions for Form 990.					Schedule I (Form 990) (2015)

### LINCOLN COMMUNITY FOUNDATION INC Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

BOYS AND GIRLS CLUB OF

22344 - LINCOLN, NE 68542

LINCOLN/LANCASTER COUNTY - PO BOX

20-8677226

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
AMERICANS FOR PROSPERITY FOUNDATION - 2111 WILSON BLVD., STE. 350 - ARLINGTON, VA 22201	52-1527294		25,000.	0.			GENERAL PURPOSES
ANGELS THEATRE COMPANY 2001 SEWELL ST LINCOLN, NE 68502	47-0842314		14,405.	0.			GENERAL PURPOSES
ARC HOUSING DEVELOPMENT CORPORATION - 3300 FOLKWAYS CIR - LINCOLN, NE 68504	47-0647188		10,000.	0.			GENERAL PURPOSES
ARC OF LINCOLN 5730 R ST STE C2 LINCOLN, NE 68505	47-0498629		43,796.	0.			GENERAL PURPOSES
ASIAN COMMUNITY & CULTURAL CENTER 2635 O ST STE A LINCOLN, NE 68510	47-0807501		13,179.	0.			FAMILY RESOURCE PROGRAM AND GENERAL PURPOSES
BEMIS CENTER FOR CONTEMPORARY ARTS 724 S 12TH ST OMAHA, NE 68102	47-0653927		5,000.	0.			GENERAL PURPOSES
BLESSED SACRAMENT CATHOLIC CHURCH 1720 LAKE ST LINCOLN, NE 68502	47-0415802		36,200.	0.			GENERAL PURPOSES
BOY SCOUTS OF AMERICA-CORNHUSKER COUNCIL - PO BOX 269 - WALTON, NE 68461	47-0378985		44,838.	0.			GENERAL PURPOSES
	1	1		1			1

GENERAL PURPOSES

Schedule I (Form 990)

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47 - 0458128Page 1

### LINCOLN COMMUNITY FOUNDATION INC

· · · · ·		FOUNDATION					17-0458128 Page
Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Sche	edule I (Form 990), Pa	art II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIDGE BEHAVIORAL HEALTH							
721 K ST							BUILDING REMODEL AND
LINCOLN, NE 68508	47-0656110		68,390.	0.			GENERAL PURPOSES
BRIGHT LIGHTS, INC.							
5561 S 48TH ST STE 220							
LINCOLN, NE 68516	47-0708499		13,799.	٥.			GENERAL PURPOSES
BRYAN COLLEGE OF HEALTH SCIENCES 5035 EVERETT ST							
LINCOLN, NE 68506			6,250.	٥.			SCHOLARSHIPS
BRYAN HEALTH FOUNDATION 1600 S 48TH ST							
LINCOLN, NE 68506-1299	23-7005720		19,707.	0.			GENERAL PURPOSES
CAMP SONSHINE 13440 S 25TH ST							
ROCA, NE 68430	87-0785556		50,889.	0.			GENERAL PURPOSES
CAMPBELL ELEMENTARY SCHOOL 2200 DODGE ST							
LINCOLN, NE 68521			5,000.	0.			GENERAL PURPOSES
CAPITAL HUMANE SOCIETY 2320 PARK BLVD							
LINCOLN, NE 68502	47-0376622		40,722.	0.			GENERAL PURPOSES
CAPITOL MINISTRIES							
4547 CALVERT ST STE 5							
LINCOLN, NE 68506	68-0005663		26,967.	0.			GENERAL PURPOSES
CASA FOR LANCASTER COUNTY							
1141 H ST STE C							
LINCOLN, NE 68508	47-0833799		16,293.	٥.			GENERAL PURPOSES

## Schedule I (Form 990) LINCOLN COMMUNITY FOUNDATION INC

Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Schoor	edule I (Form 990), Pa I	art II.) T	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CAT HOUSE							
PO BOX 23145							
LINCOLN, NE 68542	47-0823296		33,837.	0.			GENERAL PURPOSES
CATHEDRAL OF THE RISEN CHRIST							
3500 SHERIDAN BLVD							
LINCOLN, NE 68506	47-0438599		7,945.	0.			GENERAL PURPOSES
,			,				
CATHOLIC CHARITIES OF THE							
ARCHDIOCESE OF OMAHA, INC 3300							
N 60TH ST - OMAHA, NE 68104	47-0376612		10,000.	٥.			GENERAL PURPOSES
CATHOLIC FOUNDATION OF THE DIOCESE							
OF LINCOLN - 3400 SHERIDAN BLVD -							JOY TO THE GOSPEL
LINCOLN, NE 68501	47-0825444		1,999,500.	0.			CAMPAIGN
CATHOLIC SOCIAL SERVICES							
2241 O ST							
LINCOLN, NE 68510	47-0751554		22,920.	٥.			GENERAL PURPOSES
CBMC INTERNATIONAL							
2850 N SWAN RD STE 160							
TUCSON, AZ 85712	58-1744271		50,000.	0.			GENERAL PURPOSES
CEDARS HOME FOR CHILDREN							
FOUNDATION - 6601 PIONEERS BLVD							
STE 2 - LINCOLN, NE 68506	47-6024881		41,766.	0.			GENERAL PURPOSES
CEDARS YOUTH SERVICES							
6601 PIONEERS BLVD							COMMUNITY LEARNING
LINCOLN, NE 68506	47-0551975		63,144.	0.			CENTERS
GENMENNIAL DUDI LA GAUGOI							
CENTENNIAL PUBLIC SCHOOL							
1301 CENTENNIAL RD			0.027				
UTICA, NE 68456			9,837.	0.			SCHOLARSHIPS

## Schedule I (Form 990) LINCOLN COMMUNITY FOUNDATION INC Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

47-0458128	Page 1
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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR PEOPLE IN NEED							
3901 N 27TH ST UNIT 1							
LINCOLN, NE 68521	06-1669552		100,848.	0.			GENERAL PURPOSES
CENTER FOR RURAL AFFAIRS							
145 MAIN ST	45.0552002		C1 581				VICTOR OF ANY ADDOGD NY
LYONS, NE 68038	47-0553823		61,571.	0.			MICROLOAN PROGRAM
CENTERPOINTE							
2633 P ST							
LINCOLN, NE 68503-3528	47-0550702		69,961.	0.			GENERAL PURPOSES
CHILD ADVOCACY CENTER							
5025 GARLAND ST				_			
LINCOLN, NE 68504	47-0793765		34,968.	0.			GENERAL PURPOSES
CHILD GUIDANCE CENTER							
2444 O ST							
LINCOLN, NE 68510	47-0398819		8,879.	0.			GENERAL PURPOSES
			-,	- •			
CHILDREN'S HOSPITAL & MEDICAL							
CENTER FOUNDATION - 8401 W DODGE							
RD STE 120 - OMAHA, NE 68114	47-6105603		33,911.	0.			GENERAL PURPOSES
CHRIST LUTHERAN CHURCH							
4325 SUMNER ST				_			
LINCOLN, NE 68506	47-0519511		16,318.	0.			GENERAL PURPOSES
CHRISTIAN APPALACHIAN PROJECT,							
INC PO BOX 55911 - LEXINGTON,							
KY 40555-5911	61-0661137		6 1 2 5	0.			GENERAL PURPOSES
	01-0001137		6,125.	0.			GENERAL PURPUSES
CHRISTIAN HERITAGE CHILDREN'S							
HOMES - 14880 OLD CHENEY RD -							
WALTON, NE 68461	47-0632613		21,192.	0.			GENERAL PURPOSES

## Schedule I (Form 990) LINCOLN COMMUNITY FOUNDATION INC Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CITY IMPACT							
400 N 27TH ST							
LINCOLN, NE 68503	47-0800906		156,465.	0.			GENERAL PURPOSES
			, -				
CITY OF LINCOLN - PARKS &							
RECREATION DEPARTMENT - 2740 A ST							
- LINCOLN, NE 68502	47-6006256		34,639.	0.			GENERAL PURPOSES
CLINIC WITH A HEART							
1701 S 17TH ST STE 4G							
LINCOLN, NE 68502	20-2850139		36,504.	0.			GENERAL PURPOSES
COLLEGE VIEW ACADEMY							
5240 CALVERT ST							
LINCOLN, NE 68506	47-0486636		5,045.	0.			SCHOLARSHIPS
COLONIAL WILLIAMSBURG FOUNDATION							
PO BOX 1776				_			
WILLIAMSBURG, VA 23187	54-0505888		50,000.	0.			GENERAL PURPOSES
CONSTRUCT OF DATE OF DATE OF							
COMMUNITY ACTION PARTNERSHIP OF							
LANCASTER & SAUNDERS COUNTIES -	47-0491162		12,337.	0.			GENERAL PURPOSES
210 O ST - LINCOLN, NE 68508	47-0491102		12,337.	0.			GENERAL FORFOSES
COMMUNITY CROPS							
1551 S 2ND ST							
LINCOLN, NE 68502	20-3174357		31,665.	0.			COMMUNITY GARDENS
	20 31/433/		51,005.	••			
COMMUNITY DEVELOPMENT RESOURCES							
285 S 68TH STREET PL STE 520							
LINCOLN, NE 68510	47-0832685		30,900.	0.			MICRO LOAN FUND SUPPO
,				••			
COMMUNITY FOUNDATION OF NORTHWEST							
MISSOURI - 1006 W SAINT MAARTENS							
DR STE B - SAINT JOSEPH, MO 64506	27-0436182		5,000.	0.			SCHOLARSHIPS

### LINCOLN COMMUNITY FOUNDATION INC Schedule I (Form 990)

47-0658284

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

LINCOLN, NE 68508

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CONCORDIA JR./SR. HIGH SCHOOL 15656 FORT ST OMAHA, NE 68124	91-1759397		12,500.	0.			LIGHTING FOR ATHLETIC FIELD
CROSS CATHOLIC OUTREACH PO BOX 273908 BOCA RATON, FL 33427	65-1156061		5,000.	0.			GENERAL PURPOSES
DESERT SKIES UNITED METHODIST CHURCH - 3255 N HOUGHTON RD - TUCSON, AZ 85749			10,000.	0.			GENERAL PURPOSES
DOANE COLLEGE-CRETE 1014 BOSWELL AVE CRETE, NE 68333			17,540.	0.			SCHOLARSHIPS
DOMESTI-PUPS PO BOX 4782 LINCOLN, NE 68504	47-0836148		14,782.	0.			GENERAL PURPOSES
DRESSAGE FOUNDATION INC. 1314 O ST STE 305 LINCOLN, NE 68508	36-3670953		7,765.	0.			GENERAL PURPOSES
EAST BUTLER PUBLIC SCHOOLS FOUNDATION - 212 S MADISON ST - BRAINARD, NE 68626	36-3431235		29,511.	0.			SCHOLARSHIPS
EASTMONT TOWERS FOUNDATION 6315 O ST LINCOLN, NE 68510	91-1767080		35,202.	0.			GENERAL PURPOSES
EL CENTRO DE LAS AMERICAS 201 O ST							

Schedule I (Form 990)

GENERAL PURPOSES

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47 - 0458128Page 1

## Schedule I (Form 990) LINCOLN COMMUNITY FOUNDATION INC Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

47-0458128 Page 1

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EVERETT COMMUNITY NONPROFIT							
DRGANIZATION - 1026 S 8TH ST -							
LINCOLN, NE 68508	46-1827869		26,627.	0.			GENERAL PURPOSES
FAMILY SERVICE ASSOCIATION							
501 S 7TH ST							COMMUNITY LEARNING
LINCOLN, NE 68508	47-0376584		104,167.	0.			CENTERS
FIRST PLYMOUTH CONGREGATIONAL							
CHURCH - 2000 D ST - LINCOLN, NE							
68502	47-0376589		73,500.	Ο.			GENERAL PURPOSES
FIRST PRESBYTERIAN CHURCH							
840 S 17TH ST							
LINCOLN, NE 68508			28,236.	0.			GENERAL PURPOSES
FIRST UNITED METHODIST CHURCH OF							
WAVERLY - 14410 FOLKESTONE -				_			
WAVERLY, NE 68462			18,000.	0.			GENERAL PURPOSES
FLATWATER SHAKESPEARE COMPANY							
PO BOX 84935							
LINCOLN, NE 68501-4935	20-1712203		16,969.	0.			GENERAL PURPOSES
	20 1712205		10,505.	0.			GENERAL I ORI ODED
FOOD BANK OF LINCOLN							BRIDGES OUT OF POVERTY
PO BOX 29228							PROGRAM AND GENERAL
LINCOLN, NE 68529-0228	47-0640293		196,246.	Ο.			PURPOSES
				•			
FOOD BANK OF LINCOLN FOUNDATION							
4840 DORIS BAIR CIR STE A							
LINCOLN, NE 68504	20-5474034		5,000.	Ο.			GENERAL PURPOSES
	1		,				
FOUNDATION FOR LINCOLN CITY							
LIBRARIES – 136 S 14TH ST –							
LINCOLN, NE 68508-1801	47-6032744		19,653.	Ο.			GENERAL PURPOSES

### Schedule I (Form 990) LINCOLN COMMUNITY FOUNDATION INC

47-0835061

90-0666083

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

418 E 1ST ST OGALLALA, NE 69153

FRIENDS OF TRINITY 1345 S 16TH ST

LINCOLN, NE 68502-1466

FRIENDS OF THE KENFIELD GALLERY

FOUNDATION FOR LINCOLN PUBLIC SCHOOLS - PO BOX 82889 - LINCOLN, NE 68501     36-3490560     106,040.     0.     CAREER ACADEMY, WELLNESS PROGRAM, GENERAL PURPOSES       FOUNDATION TO DEFEND THE FIRST AMENDEMENT - 16000 TRADE ZONE AVE UNIT 406 - UPPER MARLBORO, MD     22 - 2442295     5,000.     0.     SENERAL PURPOSES       FRESH START, INC. 6433 HAVELOCK AVE LINCOLN, NE 68507     36-3785810     13,071.     0.     SENERAL PURPOSES       FRIENDS OF LIED PO BOX 880151     47-0727188     23,905.     0.     SENERAL PURPOSES       FRIENDS OF MARY RIEPAR ROSS MEDIA ARTS CENTRE INC - PO BOX 880253 - LINCOLN, NE 68588-0151     47-0638642     6,045.     0.     SENERAL PURPOSES       FRIENDS OF OPERA, UNIVERSITY OF NEBRASKA-LINCOLM, NE 68508     47-0638642     5,237.     0.     SENERAL PURPOSES       FRIENDS OF THE HAWARKET THEATRE 803 Q ST LINCOLM, NE 68508-1397     47-0842288     5,237.     0.     SENERAL PURPOSES	(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NE 68501         36-3490560         106,040.         0.         PROGRAM, GENERAL PURPOSES           FOUNDATION TO DEFEND THE FIRST AMENDMENT - 16000 TRADE ZONE AVE UNIT 406 - UPPER MARLBORO, MD         22-2442295         5,000.         0.         DENERAL PURPOSES           20774         22-2442295         5,000.         0.         DENERAL PURPOSES           FRESH START, INC.         6433 HAVELOCK AVE         DENERAL PURPOSES         DENERAL PURPOSES           FRIENDS OF LIED         36-3785810         13,071.         0.         DENERAL PURPOSES           FRIENDS OF LIED         7-0727188         23,905.         0.         DENERAL PURPOSES           FRIENDS OF MARY RIEPMA ROSS MEDIA ARTS CENTER INC - FO BOX 880253 - LINCOLN, NE 66588-0151         47-0638642         6,045.         0.         DENERAL PURPOSES           FRIENDS OF OPERA, UNIVERSITY OF NEBRASKA-LINCOLM - 233 S 13TH ST STE 1900 - LINCOLM, NE 66588         47-0842288         5,237.         0.         DENERAL PURPOSES           FRIENDS OF THE HAYMARKET THEATRE         803 Q ST         0.         DENERAL PURPOSES         DENERAL PURPOSES	FOUNDATION FOR LINCOLN PUBLIC							
FOUNDATION TO DEFEND THE FIRST AMENDRENT - 16000 TRADE ZONE AVE UNIT 406 - UPPER MARLBORO, MD     22-2442295     5,000.     0.       20774     22-2442295     5,000.     0.     SENERAL PURPOSES       FRESH START, INC. 6433 HAVELOCK AVE LINCOLM, NE 68507     36-3785810     13,071.     0.       FRIENDS OF LIED PO BOX 880151     47-0727188     23,905.     0.       FRIENDS OF MARY RIEPMA ROSS MEDIA ARTS CENTER INC - PO BOX 880253 - LINCOLN, NE 68588-0153     47-0638642     6,045.     0.       FRIENDS OF OPERA, UNIVERSITY OF NEBRASKA-LINCOLN - 233 S 13TH ST STE 1900 - LINCOLN, NE 68508     47-0842288     5,237.     0.       FRIENDS OF THE HAYMARKET THEATRE 803 Q ST     65.045.     0.     SENERAL PURPOSES	SCHOOLS - PO BOX 82889 - LINCOLN,							CAREER ACADEMY, WELLNESS
AMENDMENT - 16000 TRADE ZONE AVE UNIT 406 - UPPER MARLBORO, MD 2077422-24422955,000.0.SENERAL PURPOSESFRESH START, INC. 6433 HAVELOCK AVE LINCOLN, NE 6850736-378581013,071.0.SENERAL PURPOSESFRIENDS OF LIED PO BOX 88015136-378581013,071.0.SENERAL PURPOSESFRIENDS OF LIED PO BOX 88015147-072718823,905.0.SENERAL PURPOSESFRIENDS OF MARY RIEPMA ROSS MEDIA ARTS CENTER INC - PO BOX 880253 - LINCOLN, NE 68588-025347-06386426,045.0.SENERAL PURPOSESFRIENDS OF OPERA, UNIVERSITY OF NEBRASKA-LINCOLN - 233 S 13TH ST STE 1900 - LINCOLN, NE 6850847-08422885,237.0.SENERAL PURPOSESFRIENDS OF THE HAYMARKET THEATRE 803 Q STST.ST.ST.ST.ST.ST.ST.	NE 68501	36-3490560		106,040.	٥.			PROGRAM, GENERAL PURPOSES
2077422-24422955,000.0.SENERAL PURPOSESFRESH START, INC. 6433 HAVELOCK AVE LINCOLN, NE 6850736-378581013,071.0.SENERAL PURPOSESFRIENDS OF LIED PO BOX 880151 LINCOLN, NE 68588-015136-378581013,071.0.SENERAL PURPOSESFRIENDS OF MARY RIEPMA ROSS MEDIA ARTS CENTER INC - PO BOX 880253 - LINCOLN, NE 68588-025347-06386426,045.0.SENERAL PURPOSESFRIENDS OF OPERA, UNIVERSITY OF NEBRASKA-LINCOLN - 233 S 137H ST STE 1900 - LINCOLN, NE 6850847-08422885,237.0.SENERAL PURPOSESFRIENDS OF THE HAYMARKET THEATRE 803 Q STSTSTSENERAL PURPOSESSENERAL PURPOSES	AMENDMENT - 16000 TRADE ZONE AVE							
FRESH START, INC.     36-3785810     13,071.     0.       FRESH START, INC.     36-3785810     13,071.     0.       FRIENDS OF LIED     36-3785810     13,071.     0.       FRIENDS OF LIED     PO BOX 880151     47-0727188     23,905.     0.       FRIENDS OF MARY RIEPMA ROSS MEDIA     ARTS CENTER INC - PO BOX 880253 -     INCOLN, NE 68588-0253     47-0638642     6,045.     0.       FRIENDS OF OPERA, UNIVERSITY OF     NEBRASKA-LINCOLN - 233 S 13TH ST     ST 1900 - LINCOLN, NE 68508     47-0842288     5,237.     0.       FRIENDS OF THE HAYMARKET THEATRE     803 Q ST     ST     5,237.     0.     SENERAL PURPOSES								
6433 HAVELOCK AVE LINCOLN, NE 6850736-378581013,071.0.SENERAL PURPOSESFRIENDS OF LIED PO BOX 880151 LINCOLN, NE 68588-015147-072718823,905.0.SENERAL PURPOSESFRIENDS OF MARY RIEFMA ROSS MEDIA ARTS CENTER INC - PO BOX 880253 - LINCOLN, NE 68588-025347-06386426,045.0.SENERAL PURPOSESFRIENDS OF OPERA, UNIVERSITY OF NEBRASKA-LINCOLN - 233 S 13TH ST STE 1900 - LINCOLN , NE 6850847-08422885,237.0.SENERAL PURPOSESFRIENDS OF THE HAYMARKET THEATRE 803 Q STContract of the purpose of the pu	20774	22-2442295		5,000.	0.			GENERAL PURPOSES
LINCOLN, NE 6850736-378581013,071.0.GENERAL PURPOSESFRIENDS OF LIED PO BOX 880151 LINCOLN, NE 68588-015147-072718823,905.0.SENERAL PURPOSESFRIENDS OF MARY RIEPMA ROSS MEDIA ARTS CENTER INC - PO BOX 880253 - LINCOLN, NE 68588-025347-06386426,045.0.SENERAL PURPOSESFRIENDS OF OPERA, UNIVERSITY OF NEBRASKA-LINCOLN - 233 S 13TH ST STE 1900 - LINCOLN, NE 6850847-08422885,237.0.SENERAL PURPOSESFRIENDS OF THE HAYMARKET THEATRE 803 Q STGO THE HAYMARKET THEATREGO THE HAYMARKET THEATREGO THE HAYMARKET THEATREGO THE HAYMARKET THEATRE								
FRIENDS OF LIED PO BOX 88015147-072718823,905.0.FRIENDS OF MARY RIEPMA ROSS MEDIA ARTS CENTER INC - PO BOX 880253 - LINCOLN, NE 68588-025347-06386426,045.0.FRIENDS OF OPERA, UNIVERSITY OF 		36-3785810		13 071	0			GENERAL PURPOSES
PO BOX 880151 LINCOLN, NE 68588-015147-072718823,905.0.SENERAL PURPOSESFRIENDS OF MARY RIEPMA ROSS MEDIA ARTS CENTER INC - PO BOX 880253 - LINCOLN, NE 68588-025347-06386426,045.0.SENERAL PURPOSESFRIENDS OF OPERA, UNIVERSITY OF NEBRASKA-LINCOLN - 233 S 13TH ST STE 1900 - LINCOLN, NE 6850847-08422885,237.0.SENERAL PURPOSESFRIENDS OF THE HAYMARKET THEATRE 803 Q STCCCSENERAL PURPOSES		50 5705010		10,071.	<b>.</b>			
PO BOX 880151 LINCOLN, NE 68588-015147-072718823,905.0.SENERAL PURPOSESFRIENDS OF MARY RIEPMA ROSS MEDIA ARTS CENTER INC - PO BOX 880253 - LINCOLN, NE 68588-025347-06386426,045.0.SENERAL PURPOSESFRIENDS OF OPERA, UNIVERSITY OF NEBRASKA-LINCOLN - 233 S 13TH ST STE 1900 - LINCOLN, NE 6850847-08422885,237.0.SENERAL PURPOSESFRIENDS OF THE HAYMARKET THEATRE 803 Q STCCCSENERAL PURPOSES	FRIENDS OF LIED							
LINCOLN, NE 68588-015147-072718823,905.0.SENERAL PURPOSESFRIENDS OF MARY RIEPMA ROSS MEDIA ARTS CENTER INC - PO BOX 880253 - LINCOLN, NE 68588-025347-06386426,045.0.SENERAL PURPOSESFRIENDS OF OPERA, UNIVERSITY OF NEBRASKA-LINCOLN - 233 S 13TH ST STE 1900 - LINCOLN, NE 6850847-08422885,237.0.SENERAL PURPOSESFRIENDS OF THE HAYMARKET THEATRE 803 Q ST60 C60 C60 C60 C60 C								
ARTS CENTER INC - PO BOX 880253 - LINCOLN, NE 68588-025347-06386426,045.0.EENERAL PURPOSESFRIENDS OF OPERA, UNIVERSITY OF NEBRASKA-LINCOLN - 233 S 13TH ST STE 1900 - LINCOLN, NE 6850847-08422885,237.0.EENERAL PURPOSESFRIENDS OF THE HAYMARKET THEATRE 803 Q STLincoln (Market Theatre Book of the construction)Lincoln (Market Theatre Book of the construction) <td>LINCOLN, NE 68588-0151</td> <td>47-0727188</td> <td></td> <td>23,905.</td> <td>0.</td> <td></td> <td></td> <td>GENERAL PURPOSES</td>	LINCOLN, NE 68588-0151	47-0727188		23,905.	0.			GENERAL PURPOSES
NEBRASKA-LINCOLN - 233 S 13TH ST       47-0842288       5,237.       0.       GENERAL PURPOSES         FRIENDS OF THE HAYMARKET THEATRE 803 Q ST       Image: Constraint of the cons	ARTS CENTER INC - PO BOX 880253 -	47-0638642		6,045.	0.			GENERAL PURPOSES
FRIENDS OF THE HAYMARKET THEATRE 803 Q ST	NEBRASKA-LINCOLN - 233 S 13TH ST	47-0842288		5 237.	0.			GENERAL PURPOSES
LINCOLN, NE 68508-1397 47-0811311 6,519. 0. GENERAL PURPOSES	FRIENDS OF THE HAYMARKET THEATRE							
	LINCOLN, NE 68508-1397	47-0811311		6,519.	0.			GENERAL PURPOSES

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Schedule I (Form 990)

GENERAL PURPOSES

GENERAL PURPOSES

### Schedule I (Form 990) LINCOLN COMMUNITY FOUNDATION INC

		FOUNDATION					E7-0436126 Pag
Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Sche	edule I (Form 990), Pa	urt II.) T	İ
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDSHIP HOME OF LINCOLN PO BOX 85358 LINCOLN, NE 68501-5358	47-0619855		75,294.	0.			RENOVATION AND GENERAL PURPOSES
GIRL SCOUTS OF THE UNITED STATES OF AMERICA – 420 5TH AVE – NEW YORK, NY 10018–2798	13-1624016		8,500.	0.			GENERAL PURPOSES
GIRL SCOUTS SPIRIT OF NEBRASKA 8230 BEECHWOOD DR LINCOLN, NE 68510	47-0432299		30,057.	0.			OUTREACH PROGRAM AND GENERAL PURPOSES
GOOD NEIGHBOR COMMUNITY CENTER 2617 Y ST LINCOLN, NE 68503	20-0391739		46,871.	0.			FOOD DISTRIBUTION PROGRAM; RENOVATIONS; GENERAL PURPOSES
GOOD NEWS JAIL AND PRISON MINISTRY 3801 WEST O ST LINCOLN, NE 68528	54-0703077		8,191.	0.			GENERAL PURPOSES
GROUNDWATER FOUNDATION 3201 PIONEERS BLVD STE 105 LINCOLN, NE 68502	36-3413351		7,679.	0.			EDUCATION PROGRAMS
GUIDANCE TO SUCCESS YOUTH CLUB 6500 HOLDREGE ST LINCOLN, NE 68505	27-0692644		10,464.	0.			GENERAL PURPOSES
HAITI LUTHERAN MISSION SOCIETY PO BOX 22544 LINCOLN, NE 68542	47-0727191		21,000.	0.			GENERAL PURPOSES
HARRY AND REBA HUGE FOUNDATION 25 E BATTERY ST CHARLESTON, SC 29401	20-3721428		10,000.	0.			SCHOLARSHIP

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(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HASTINGS COLLEGE							
710 N TURNER AVE							
HASTINGS, NE 68901	47-0376525		9,037.	Ο.			SCHOLARSHIPS
HEAR NEBRASKA							
PO BOX 4591							
OMAHA, NE 68104	27-3452255		13,230.	0.			GENERAL PURPOSES
URADELINE DIA PROMUERA DIA ALAMERA							
HEARTLAND BIG BROTHERS BIG SISTERS							
6201 HAVELOCK AVE	47 0704720		14 500	0			NEWEDDING DROGDIN
LINCOLN, NE 68507-1236	47-0794732		14,588.	0.			MENTORING PROGRAM
HEARTLAND CENTER FOR LEADERSHIP							
DEVELOPMENT INC 3110 N 40TH ST							DISASTER RELIEF FOR
STE A - LINCOLN, NE 68504	47-0692706		35,351.	0.			PILGER NE
,,				- •			
HEARTS UNITED FOR ANIMALS							
PO BOX 286							
AUBURN, NE 68305	47-0773858		35,702.	0.			GENERAL PURPOSES
,			,				
HILDEGARD CENTER FOR THE ARTS							
PO BOX 5304							
LINCOLN, NE 68505	27-0355196		11,441.	0.			GENERAL PURPOSES
HUMAN SERVICES FEDERATION							
1645 N ST							
LINCOLN, NE 68508	36-3470618		7,145.	0.			GENERAL PURPOSES
HUMANITIES NEBRASKA							
215 CENTENNIAL MALL S STE 330	~~ ~~~~~		AC 544				PRIMETIME PROGRAM AND
LINCOLN, NE 68508	23-7359778		46,541.	0.			GENERAL PURPOSES
IMMANUEL LUTHERAN CHURCH -							
LOUISVILLE - 36712 CHURCH RD -							
LOUISVILLE, NE 68037	47-6049024		7,500.	0.			GENERAL PURPOSES

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
IN TOUCH MINISTRIES INC.							
3836 DEKALB TECHNOLOGY PARKWAY							
ATLANTA, GA 30357	58-1495310		20,000.	0.			SUPPORT OF US MINISTRIES
,							
INTERCHURCH MINISTRIES OF NEBRASKA							
2012 S 13TH ST							
LINCOLN, NE 68502	47-0379495		8,050.	0.			GENERAL PURPOSES
INTERCOLLEGIATE STUDIES INSTITUTE							
3901 CENTERVILLE RD							
WILMINGTON, DE 19807-1938	23-6050131		10,000.	0.			GENERAL PURPOSES
INTERNATIONAL SCULPTURE CENTER							
14 FAIRGROUNDS RD STE B	00 0050605		c				
HAMILTON, NJ 08619-3447	22-2259625		6,000.	0.			GENERAL PURPOSES
JACOB'S WELL							
PO BOX 82852							
LINCOLN, NE 68501-2852	26-4503142		56,858.	0.			GENERAL PURPOSES
	20 1303112						
JEWISH FEDERATION OF LINCOLN, INC.							
PO BOX 67218							
LINCOLN, NE 68506	47-0388144		24,989.	0.			GENERAL PURPOSES
JOSHUA COLLINGSWORTH MEMORIAL							
FOUNDATION - PO BOX 21712 -							
LINCOLN, NE 68542-1712	26-3091147		5,313.	0.			GENERAL PURPOSES
JUNIOR ACHIEVEMENT OF LINCOLN,							
INC 285 S 68TH ST PL STE 580 -							
LINCOLN, NE 68510-2572	47-0535692		25,974.	0.			GENERAL PURPOSES
LANCASTER YOUTH SOFTBALL							
ASSOCIATION - 4900 DORIS BAIR CIR	36-3313153		11 202	0.			GENERAL PURPOSES
- LINCOLN, NE 68505	20-2272722		11,323.	۰ <sup>0</sup>		1	GENERAL FURFUSES

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Schedule I (Form 990)	JOHMON 1 1	FOUNDATION	INC			4	E/=0400120 Pag
Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAUNCH LEADERSHIP FOUNDATION							
211 N 14TH ST							
LINCOLN, NE 68508	27-1283595		30,228.	0.			GENERAL PURPOSES
LEADERSHIP LINCOLN							
920 O ST STE 300							TRANSITION SUPPORT AND
LINCOLN, NE 68508-3624	47-0685407		22,089.	0.			GENERAL PURPOSES
LEGAL AID OF NEBRASKA							
941 O ST STE 825							
LINCOLN, NE 68508-3649	47-0483506		12,434.	0.			GENERAL PURPOSES
LIDDADY AND CONTRACTOR DOUBLDATION							
LIBRARY AND COMMUNITY FOUNDATION							
OF RICHARDSON COUNTY - PO BOX 234 - FALLS CITY, NE 68355	47-0842392		5,000.	0.			GENERAL PURPOSES
- FALLS CITE, NE 00355	47-0042352		5,000.	0.			GENERAL FORFOSES
LIGHTHOUSE							
2601 N ST							
LINCOLN, NE 68510-1334	36-3656310		46,988.	0.			GENERAL PURPOSES
LINCOLN ARTS COUNCIL							
1701 S 17TH ST STE 1A							BEAUTIFICATION PROJECTS
LINCOLN, NE 68502	47-6046691		18,753.	0.			AND GENERAL PURPOSES
LINCOLN BEREAN CHURCH							
6400 S 70TH ST							
LINCOLN, NE 68516	47-0677716		20,550.	0.			GENERAL PURPOSES
I TNOOLN GUTLEDEN'S MIGEUN							
LINCOLN CHILDREN'S MUSEUM							
1420 P ST	47-0716636		11 146	0.			GENERAL PURPOSES
LINCOLN, NE 68508	41-0110030		11,146.	U.			JENERAL FURPOSES
LINCOLN CHILDREN'S ZOO							
1222 S 27TH ST							ZOOBILEE SPONSORSHIP;
LINCOLN, NE 68502-1832	47-0482255		63,719.	0.			GENERAL PURPOSES
						I	

# Schedule I (Form 990) LINCOLN COMMUNITY FOUNDATION INC Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
LINCOLN CHRISTIAN SCHOOL FOUNDATION - 5801 S 84TH ST -							
LINCOLN, NE 68516	47-0706907		51,234.	0.			GENERAL PURPOSES
LINCOLN COMMUNITY PLAYHOUSE 2500 S 56TH ST LINCOLN, NE 68506	47-0355388		30,562.	0.			CHILDREN'S BOOKS; GENERAI PURPOSES
LINCOLN EDUCATION ASSOCIATION FOUNDATION - 4920 NORMAL BLVD - LINCOLN, NE 68506	03-0485605		6,000.	0.			GENERAL PURPOSES
, LINCOLN KIDS AGAINST HUNGER 2316 KIMARRA PL LINCOLN, NE 68521	35-2373600		9,645.	0.			GENERAL PURPOSES
LINCOLN LITERACY 745 S 9TH ST							
LINCOLN, NE 68508-3107	47-0655582		80,088.	0.			GENERAL PURPOSES
LINCOLN MUNICIPAL BAND ASSOCIATION 315 S 9TH ST STE 110 LINCOLN, NE 68508-2283	47-0637021		6,277.	0.			GENERAL PURPOSES
LINCOLN MUSIC TEACHERS ASSOCIATION 3022 BROWNING ST							
LINCOLN, NE 68516	47-0681623		5,887.	0.			GENERAL PURPOSES
LINCOLN ORCHESTRA ASSOCIATION 233 S 13TH ST STE 1702 LINCOLN, NE 68508-2003	47-0773445		64,078.	0.			FAMILY CONCERT SERIES; GENERAL PURPOSES
LINCOLN PARKS & RECREATION FOUNDATION - 2740 A ST - LINCOLN, NE 68502	36-3853746		288,821.	0.			WOODS TENNIS CENTER; GENERAL PURPOSES

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
LINCOLN PUBLIC SCHOOLS PO BOX 82889 LINCOLN, NE 68501			28,192.	0.			FAMILY LITERACY; GENERA PURPOSES
LINCOLN SCOTTISH RITE PRESERVATION FOUNDATION - PO BOX 95013 - LINCOLN, NE 68509	47-0730224		33,271.	0.			GENERAL PURPOSES
LINCOLN YOUTH SPORTS PROMOTIONS 2033 WILDERNESS RIDGE DR LINCOLN, NE 68512	47-0826311		12,579.	0.			GENERAL PURPOSES
LINCOLN-LANCASTER COUNTY HABITAT FOR HUMANITY – 144 N ANTELOPE VALLEY PKWY – LINCOLN, NE 68503	47-0714576		22,665.	0.			GENERAL PURPOSES
LONGVILLE AREA COMMUNITY FOUNDATION - PO BOX 92 - LONGVILLE, MN 56655	41-1699500		25,705.	0.			IN MEMORY AND JAMES AND HK STUART
LUTHERAN EDUCATION FOUNDATION 1100 N 56TH ST LINCOLN, NE 68504	41-2032088		30,526.	0.			GENERAL PURPOSES
LUTHERAN FAMILY SERVICES OF NEBRASKA, INC. – 2201 S 17TH ST – LINCOLN, NE 68502	23-7267972		22,166.	0.			GENERAL PURPOSES
LUX CENTER FOR THE ARTS 2601 N 48TH ST LINCOLN, NE 68502	47-0629528		65,812.	0.			ART CAMPUS, LUX COLLECTION MAINTENANCE; GENERAL PURPOSES
MADONNA FOUNDATION 5401 SOUTH ST LINCOLN, NE 68506	23-7159940		24,503.	0.			GENERAL PURPOSES

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MAKE-A-WISH OF NEBRASKA, INC.							
11926 ARBOR ST STE 102							
OMAHA, NE 68144	47-0671096		6,945.	0.			GENERAL PURPOSES
MALONE COMMUNITY CENTER							
2032 U ST							COMMUNITY LEARNING
LINCOLN, NE 68503	47-0376577		22,334.	0.			CENTERS; GENERAL PURPOSES
	4/ 03/03//		22,334.	0.			CENTERS; GENERAL TORIODE
MASONIC - EASTERN STAR HOME FOR							
CHILDREN - PO BOX 1327 - FREMONT,							
NE 68026	47-0384097		11,423.	0.			GENERAL PURPOSES
MATT TALBOT KITCHEN & OUTREACH							
2121 N 27TH ST							
LINCOLN, NE 68501	36-3945814		52,012.	0.			GENERAL PURPOSES
MATTERS ON TOMORROW							
PO BOX 5573							
LINCOLN, NE 68505	26-3385226		20,634.	0.			GENERAL PURPOSES
MEADOWLARK MUSIC FESTIVAL							
1135 M ST STE A	47-0832098		9 602	0.			GENERAL PURPOSES
LINCOLN, NE 68508	47-0832098		8,693.	0.			GENERAL PORPOSES
MEDIATION CENTER							
610 J ST STE 100							
LINCOLN, NE 68508	47-0755044		19,698.	0.			RECRUIT FAMILY MEDIATORS
MENTAL HEALTH ASSOCIATION OF							
NEBRASKA - 1645 N ST STE A -							
LINCOLN, NE 68508	47-0822878		12,034.	0.			KEYA HOUSE RENOVATION
· · ·			, ,				
MESSIAH LUTHERAN CHURCH							
1800 S 84TH ST							
LINCOLN, NE 68506	47-0717241		10,500.	0.			DIGITAL SIGN

# Schedule I (Form 990) LINCOLN COMMUNITY FOUNDATION INC Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MID-AMERICA ARTS ALLIANCE							
2018 BALTIMORE AVE							
KANSAS CITY, MO 64108	23-7303693		5,200.	0.			GENERAL PURPOSES
MIDLAND UNIVERSITY							
FINANCIAL AID OFFICE							
FREMONT, NE 68025			5,100.	0.			SCHOLARSHIPS
			5,100.				
MILFORD SCHOOLS FOUNDATION							
1200 W 1ST ST							
MILFORD, NE 68405	47-0830054		12,837.	Ο.			GENERAL PURPOSES
MILKWORKS							
5930 S 58TH ST STE W							
LINCOLN, NE 68516	47-0835579		14,593.	0.			FACILITY RENOVATION
MOSAIC							
4980 S 118TH ST							
OMAHA, NE 68137	11-3669999		23,058.	0.			AXTELL AGENCY
NATIONAL MUSEUM OF ROLLER SKATING							
4730 SOUTH ST							
LINCOLN, NE 68506	47-0635648		13,376.	0.			GENERAL PURPOSES
	47 0033040		15,570.				
NATIONAL WILDLIFE FEDERATION							
11100 WILDLIFE CENTER DR							
RESTON, VA 20190-5362	53-0204616		6,565.	0.			GENERAL PURPOSES
			,				
NEBRASKA APPLESEED CENTER FOR LAW							
IN THE PUBLIC INTEREST - 941 O ST							PRISON EDUCATION; GENE
STE 920 - LINCOLN, NE 68508-3649	47-0798343		44,554.	0.			PURPOSES
NEBRASKA CHILDREN AND FAMILIES							
FOUNDATION - 215 CENTENNIAL MALL S							PROJECT EVERLAST; GENE
STE 200 - LINCOLN, NE 68508	91-1829974		22,590.	٥.			PURPOSES

Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Sche	edule I (Form 990), Pa	art II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEBRASKA COMMUNITY BLOOD BANK							
100 N 84TH ST							
LINCOLN, NE 68505	41-0693869		11,323.	0.			GENERAL PURPOSES
NEBRASKA COMMUNITY FOUNDATION							NEBRASKA BUSINESS HALL OF
3833 S 14TH ST							FAME SCHOLARSHIP; GENERAL
LINCOLN, NE 68501	47-0769903		40,608.	0.			PURPOSES
NEBRASKA FAMILY ALLIANCE 1106 E ST							
LINCOLN, NE 68508	47-0723178		22,969.	0.			GENERAL PURPOSES
NEBRASKA FFA FOUNDATION PO BOX 94942							
LINCOLN, NE 68509-4942	47-0741774		12,516.	0.			GENERAL PURPOSES
NEBRASKA FOLKLIFE NETWORK 920 O ST STE 102							
LINCOLN, NE 68508	04-3778472		6,467.	٥.			GENERAL PURPOSES
NEBRASKA HIGH SCHOOL SPORTS HALL OF FAME FOUNDATION - 500							
CHARLESTON ST - LINCOLN, NE 68501	47-0769849		10,774.	0.			GENERAL PURPOSES
NEBRASKA HOUSING DEVELOPERS ASSOCIATION - 3883 NORMAL BLVD STE							
206 - LINCOLN, NE 68506	47-0798048		8,026.	٥.			GENERAL PURPOSES
NEBRASKA HUMAN RESOURCES FOUNDATION - UNIVERSITY OF NEBRASKA-LINCOLN - LINCOLN, NE							
68583	47-6040776		9,930.	٥.			GENERAL PURPOSES
NEBRASKA PEACE FOUNDATION 941 O ST STE 1026							
LINCOLN, NE 68508	36-3347131		15,857.	Ο.			GENERAL PURPOSES

# Schedule I (Form 990) LINCOLN COMMUNITY FOUNDATION INC Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEBRASKA STATEWIDE ARBORETUM							
PO BOX 830964							
LINCOLN, NE 68501-9988	47-0600702		10,109.	0.			GENERAL PURPOSES
NEBRASKA TRAILS FOUNDATION INC.							
5533 S 27TH ST STE 203							
LINCOLN, NE 68512	36-0061007		18,093.	0.			GENERAL PURPOSES
NEBRASKA WESLEYAN UNIVERSITY							
5000 ST PAUL AVE							SCIENCE BUILDING PROJECT;
LINCOLN, NE 68504	47-0376524		1,059,934.	0.			SCHOLARSHIPS
NEBRASKANS FOR CIVIC REFORM							
1321 H ST STE 102							COMMUNITY LEARNING
LINCOLN, NE 68508	27-2204391		27,172.	0.			CENTERS
NEIGHBORWORKS LINCOLN, INC.							
2530 Q ST							
LINCOLN, NE 68503	36-3430278		94,412.	0.			GENERAL PURPOSES
NET FOUNDATION FOR RADIO							
1800 N 33RD ST							
LINCOLN, NE 68503	47-0588533		13,987.	0.			GENERAL PURPOSES
NET FOUNDATION FOR TELEVISION							
1800 N 33RD ST							
LINCOLN, NE 68503	23-7122088		19,353.	0.			GENERAL PURPOSES
NEWMAN CENTER AT THE UNIVERSITY OF							
NEBRASKA-LINCOLN - 320 N 16TH ST -							
LINCOLN, NE 68508	47-0464308		8,093.	0.			GENERAL PURPOSES
NORTHEAST COMMUNITY COLLEGE							
FINANCIAL AID OFFICE							
NORFOLK, NE 68702			7,400.	Ο.			SCHOLARSHIPS

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
NORTHEAST FAMILY CENTER							
6220 LOGAN AVE							
LINCOLN, NE 68507	91-1787068		13,975.	0.			GENERAL PURPOSES
,			,				
NORTHWEST MINNESOTA JUVENILE							
CENTER - PO BOX 247 - BEMIDJI, MN							
56619			6,000.	Ο.			GENERAL PURPOSES
OBASI MINISTRY							
614 N 26TH ST							
LINCOLN, NE 68503	20-2113820		5,549.	0.			GENERAL PURPOSES
OPENSKY POLICY INSTITUTE							
1201 O ST STE 010							
LINCOLN, NE 68508	45-3327969		39,373.	0.			GENERAL PURPOSES
ORAL ROBERTS UNIVERSITY							
7777 S LEWIS AVE	72 0720626		11 075	0			
TULSA, OK 74171	73-0739626		11,075.	0.			SCHOLARSHIPS
ORPHAN GRAIN TRAIN INC.							
PO BOX 1466							
NORFOLK, NE 68702	31-1614650		10,000.	0.			GENERAL PURPOSES
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
PARTNERSHIP FOR A HEALTHY LINCOLN							
4600 VALLEY RD STE 250							ENGAGEMENT LEADER FOR
LINCOLN, NE 68510-4892	36-3832796		5,922.	Ο.			PROSPER LINCOLN
			,				
PEOPLE'S CITY MISSION							
110 Q ST							
LINCOLN, NE 68501	47-0376896		154,681.	Ο.			GENERAL PURPOSES
PERU STATE COLLEGE FOUNDATION							
PO BOX 10							
PERU, NE 68421	47-0495359		20,000.	٥.			SCHOLARSHIPS

Fart III         Conditionation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I/Form 990), Part II)           (a) Name and address of organization or government         (b) EIN         (c) IFC section if applicable         (c) Amount of cash grant         (e) Amount of adoition of adoition of adoition of adoition of adoition of states (Schedule I/Form 990), Part II)           PHI KAPPA TAU FOUNDATION 5221 MORATING SUN ND CORRENT SUN	Schedule I (Form 990) DINCOLN C	OMMONITI	FOUNDATION	INC			4	E/-0400120 Pag
organization or governmentIf applicableCash grantInon-cash assistanceValuation (uppression)non-cash assistanceor assistancePHI KAPPA TAU FOUNDATION S221 MORTING BUR RD OXFORD, ON 4505631-602497510,000.0.ENERAL PORPOSESPHILAR SEMINARY 10645 ALARMEY EP OMARA, NE 6615446-50883195,000.0.ENERAL PORPOSESPILLAR SEMINARY 10645 RISSE46-50883195,000.0.ENERAL PORPOSESPINENCOD BOKL INC, 3800 VERMAR PL STE 200 LINCOLM, NE 6651051-020343810,042.0.ENERAL PORPOSESPINENCOD BOKL INC, 3800 VERMAR PL STE 200 LINCOLM, NE 6651023-7074428234,464.0.ENERAL PORPOSESPLANED PARENTHODO OF THE HERATLAN P. DORY 45323-7074428234,464.0.ENERAL PORPOSESPLANED FARENTHODO OF THE HERATLAN P. DORY 45342-072746859,739.0.ENERAL PORPOSESPLANED FARENTHODO OF THE HERATLAN P. DORY 4537 - DES MOINES, IA 5030520-07038315,000.0.ENERAL PURPOSESPLANED FARENTHODO OF THE HERATLAN P. DORY 4537 - DES MOINES, IA 5030520-07038315,000.0.ENERAL PURPOSESPLANET INSTITUTE FOR ECCONNEC RESERANCH P. 900 6445 LINCOLM, NE 6651620-07038315,000.0.ENERAL PURPOSESPRESENCH P. 900 64455 LINCOLM, NE 6651047-066281327,459.0.ENERAL PURPOSESPRESENCH P. 900 655047-066281327,459.0.ENERAL PURPOSESPRESENCH P. 900 6551047-066281327,459.0.ENERAL PURPOSES<	Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	irt II.)	-
5221 MORNING SUN RD     31-6024975     10,000     0.     DENERAL FURPOSES       PILLAR SEMINARY 104845 INARWY ST ONAHA, NE 66154     46-5008319     5,000.     0.     DENERAL FURPOSES       PINENCOD BOWL INC. 3800 VERMARS PL STE 200 LINCOLN, NE 66502     51-0203438     10,042.     0.     DENERAL FURPOSES       PINENCOD BOWL INC. 3800 VERMARS PL STE 200 LINCOLN, NE 66502     51-0203438     10,042.     0.     DENERAL FURPOSES       PINE X FOUNDATION 600 A ST LINCOLN, NE 6810     23-7074428     234,464.     0.     DENERAL FURPOSES       PLANNED PARENTINOD OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     42-0727488     59,739.     D.     DENERAL FURPOSES       PLANNED FARENTINOD OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     42-0727488     59,739.     D.     DENERAL FURPOSES       PLANNES FARENTINOD OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     20-8809060     5,000.     DENERAL FURPOSES       PLANNES FARENTINOCO OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     20-8809060     5,000.     DENERAL FURPOSES       PLANNES FARENTINOCO OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     20-8809060     5,000.     DENERAL FURPOSES       PLANNES FARENTINOCO OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     20-0703831     5,000.     DENERAL FURPOSES       PLOSANTURCA LINCOLN, NE 66506     20-0703831     5,000.     DENERAL FURPOSES <th></th> <th><b>(b)</b> EIN</th> <th></th> <th></th> <th>non-cash</th> <th>valuation (book, FMV,</th> <th></th> <th></th>		<b>(b)</b> EIN			non-cash	valuation (book, FMV,		
5221 MORNING SUN RD     31-6024975     10,000     0.     DENERAL FURPOSES       PILLAR SEMINARY 104845 INARWY ST ONAHA, NE 66154     46-5008319     5,000.     0.     DENERAL FURPOSES       PINENCOD BOWL INC. 3800 VERMARS PL STE 200 LINCOLN, NE 66502     51-0203438     10,042.     0.     DENERAL FURPOSES       PINENCOD BOWL INC. 3800 VERMARS PL STE 200 LINCOLN, NE 66502     51-0203438     10,042.     0.     DENERAL FURPOSES       PINE X FOUNDATION 600 A ST LINCOLN, NE 6810     23-7074428     234,464.     0.     DENERAL FURPOSES       PLANNED PARENTINOD OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     42-0727488     59,739.     D.     DENERAL FURPOSES       PLANNED FARENTINOD OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     42-0727488     59,739.     D.     DENERAL FURPOSES       PLANNES FARENTINOD OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     20-8809060     5,000.     DENERAL FURPOSES       PLANNES FARENTINOCO OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     20-8809060     5,000.     DENERAL FURPOSES       PLANNES FARENTINOCO OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     20-8809060     5,000.     DENERAL FURPOSES       PLANNES FARENTINOCO OF THE HEARTLAND - FO BOX 4557 - DES MOINES , LA SOJO5     20-0703831     5,000.     DENERAL FURPOSES       PLOSANTURCA LINCOLN, NE 66506     20-0703831     5,000.     DENERAL FURPOSES <td>σητ κασρα φαιι βοιτηραφτον</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	σητ κασρα φαιι βοιτηραφτον							
OXFORD, OH 4505631-602497510,000.0.PENERAL PURPOSESPILLAR SEMINARY 10845 HANNEY ST OKAHA, NE 6815446-50883195,000.0.PENERAL PURPOSESPINEWOOD BOWL INC, 3000 VERMAS, PL STE 200 LINCOLN, NE 6850251-020343810,042.0.PENERAL PURPOSESPIUS X FOUNDATION 6000 A ST LINCOLN, NE 6851023-7074428234,464.0.PENERAL PURPOSESPLANNED FARENTHODO OF THE HERATLAND - NO BOX 4557 - DES MOIRES, IA 5030542-072748859,739.0.PENERAL PURPOSESPLATTE INSTITUTE FOR ECONOMIC RESENARCH - 900 S 74TH FLZ - OKAHA, NE 6811420-88090605,000.0.PENERAL PURPOSESPOSSIBILITIES APRICA POED EX 6454 LINCOLN, NE 6651020-07038315,000.0.PENERAL PURPOSESPAREMAL POR SEGS20-07038315,000.0.PENERAL PURPOSESPRESNARCY CENTER 111 FLAZA TERR LINCOLN, NE 6651047-066281327,459.0.PENERAL PURPOSESPRESNARCY CENTER								
PILLAR SEMINARY         ORAFA, NE 68154         46-5088319         5,000.         0.         DENERAL FURPOSES           PINENCOD BORL INC.         3800 VERMAS PL STE 200         10,042.         0.         DENERAL FURPOSES           PINENCOD BORL INC.         3800 VERMAS PL STE 200         10,042.         0.         DENERAL FURPOSES           PINENCOD BORL INC.         3800 VERMAS PL STE 200         10,042.         0.         DENERAL FURPOSES           PINENCOLN, NE 68510         23-7074428         234,464.         0.         DEVELOPMENT DIRECTOR;           ELINCOLN, NE 68510         23-7074428         234,464.         0.         DEVELOPMENT DIRECTOR;           ELINCOLN, NE 68510         23-7074428         234,464.         0.         DEVELOPMENT DIRECTOR;           FLANED PARENTHODO OF THE         HEANTIAND - DO BOX 4557 - DEB         HEANTIAND - DO BOX 4557 - DEB         HEANTIAND - DO BOX 4557 - DEB         HEANTIAND - DO BOX 5457 - DEB         HEANTIAND - DO BOX 5457 - DEB         DENERAL PURPOSES           PLATTE INSTITUTE FOR ECONOMIC         RESEARCE - 900 S 74TH PLZ - OMAHA,         20-8609060         5,000.         0.         DENERAL PURPOSES           POSSIBILITIES AFRICA         20-0703831         5,000.         0.         DENERAL PURPOSES           PRESONANCY CENTER         111 PLAZA TERR         27,459.		31-6024975		10 000	0			GENERAL PURPOSES
10845 HARNEY ST OKAHA, NE 6615446-5083195,0000.SENERAL PURPOSESPINEROD BONU, INC. 3800 VERMARS PL STE 200 LINCOLN, NE 6650251-020343810,042.0.SENERAL PURPOSESPIUS X FOUNDATION 6000 A ST LINCOLN, NE 6651051-020343810,042.0.SENERAL PURPOSESPIUS X FOUNDATION 6000 A ST LINCOLN, NE 6651023-7074428234,464.0.SENERAL PURPOSESPLATE INSTITUTE FOR ECONOMIC RESEARCH - POID STATUTE FOR ECONOMIC NE 6651020-8099605,000.0.SENERAL PURPOSESPLATE INSTITUTE FOR ECONOMIC DOS 74TH PLZ - OMAIR, NE 6811420-88099605,000.0.SENERAL PURPOSESPOSSIBILITIES AFRICA PO BOX 6445 LINCOLN, NE 6651020-07038315,000.0.SENERAL PURPOSESPREGNARCY CENTER 111 PLAZA TERR LINCOLN, NE 6651020-07038315,000.0.SENERAL PURPOSESPREGNARCY CENTER 111 PLAZA TERR PO BOX 1743447-066281327,459.0.SENERAL PURPOSES		51 0024975		10,000.				
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OMAHA, NE 68154         46 - 5088313         5,000         0.         DENERAL PURPOSES           FINEMOOD BOWL INC. 3800 VEEMAAS PL STE 200 LINCOLN, NE 68502         51 - 0203438         10,042.         0.         DENERAL PURPOSES           PIUS X FOUNDATION 600 A ST LINCOLN, NE 68510         23 - 7074428         234,464.         0.         DEVELOPMENT DIRECTOR; DEVELOPMENT DIRECTOR;           PLANNED FARENTHOOD OF THE HEARTLAND - PO BOX 4557 - DES MOINES, IA 50305         42 - 0727488         59,739.         0.         DENERAL PURPOSES           PLATE INSTITUTE FOR ECONOMIC RESEARCH - 900 S 74TH PLZ - OMAHA, PO BOX 6445         20 - 8809060         5,000.         0.         DENERAL PURPOSES           PROSIBILITIES AFRICA PO BOX 6445         20 - 0703831         5,000.         0.         DENERAL PURPOSES           PRECONDUCY CENTER 111 PIAZZA TERR LINCOLN, NE 66510         47 - 0662613         27,459.         0.         DENERAL PURPOSES           PRION FELLOWSHIP INTERNATIONAL PO BOX 17434         47 - 0662613         27,459.         0.         DENERAL PURPOSES								
PINEWOOD BOWL INC.     BENERAL PURPOSES       PINEWOOD BOWL INC.     S1-0203438       BOU VERMAAS PL STE 200     51-0203438       LINCOLN, NE 68502     51-0203438       PIUS X FOUNDATION     BENERAL PURPOSES       6000 A ST     23-7074428       LINCOLN, NE 68510     23-7074428       PLANED PARENTHOOD OF THE     BENERAL PURPOSES       HEARTLAND - PO BOX 4557 - DES     BENERAL PURPOSES       MOINES, IA 50305     42-0727488       SENERAL PURPOSES     SENERAL PURPOSES       PLATE INSTITUTE FOR ECONOMIC     RESEARCH - 900 S 74TH FLZ - OMAHA,       NE 68114     20-8809050       POSSIBILITIES AFRICA     D-0.       PO BOX 6445     20-0703831       LINCOLN, NE 66506     20-0703831       SINCAL PURPOSES     BENERAL PURPOSES       PREGNANCY CENTER     111 FLAZA TERE       LINCOLN, NE 66510     47-0662813       PRISON PELLOWSHIP INTERNATIONAL     DENERAL PURPOSES		46-5088319		5,000.	0.			GENERAL PURPOSES
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LINCOLN, NE 68502 51-0203438 10,042. 0. BENERAL FURPOSES PUS X FOUNDATION 6000 A ST LINCOLN, NE 65510 23-7074428 234,464. 0. BEVELOPMENT DIRECTOR, SENERAL PURPOSES PLANNED PARENTHOOD OF THE HEARTLAND - PO BOX 4557 - DES MOINES, IA 50305 42-0727488 59,739. 0. BENERAL FURPOSES PLATTE INSTITUTE FOR ECONOMIC RESEARCH - 900 S 74TH FLZ - OMAHA, NE 68114 20-8809060 5,000. 0. BENERAL PURPOSES POSSIBILITIES AFRICA PO BOX 6445 LINCOLN, NE 68506 20-0703831 5,000. 0. BENERAL FURPOSES PREGNANCY CENTER 111 FIAZZA TERR LINCOLN, NE 68510 47-0662813 27,459. 0. BENERAL PURPOSES PRISON FELLOWSHIF INTERNATIONAL PO BOX 17434	PINEWOOD BOWL INC.							
PIUS X FOUNDATION 6000 A ST LINCOLN, NE 6851023-7074428234,464.0.DEVELOPMENT DIRECTOR; DEVELOPMENT DIRECTOR; DEVELOPMENT DIRECTOR; DENERAL PURPOSESPLANNED PARENTHOOD OF THE HEARTLAND - FO BOX 4557 - DES MOINES, IA 5030542-072748859,739.0.SENERAL PURPOSESPLATTE INSTITUTE FOR ECONOMIC RESEARCH - 900 S 74TH PLZ - OMAHA, NE 6811420-88090605,000.0.DENERAL PURPOSESPOSSIBILITIES AFRICA PO BOX 6445 LINCOLN, NE 6850620-07038315,000.0.DENERAL PURPOSESPREGNANCY CENTER 111 PIAZZA TERR LINCOLN, NE 6851047-066281327,459.0.DENERAL PURPOSESPRISON FELLOWSHIP INTERNATIONAL PO BOX 1743447-066281327,459.0.DENERAL PURPOSES	3800 VERMAAS PL STE 200							
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6000 A ST LINCOLN, NE 6851023-7074428234,464.0.DEVELOPMENT DIRECTOR; DENERAL PURPOSESPLANNED PARENTHOOD OF THE HEARTLAND - PO BOX 4557 - DES MOINES, IA 5030542-072748859,739.0.SENERAL PURPOSESPLATTE INSTITUTE FOR ECONOMIC RESEARCH - 900 S 74TH PLZ - OMAHA, NE 6811420-88090605,000.0.SENERAL PURPOSESPOSSIBILITIES AFRICA PO BOX 6445 LINCOLN, NE 6850620-07038315,000.0.SENERAL PURPOSESPREGNANCY CENTER 111 PIAZZA TERR LINCOLN, NE 6851047-066281327,459.0.SENERAL PURPOSESPRISON FELLOWSHIF INTERNATIONAL PO BOX 1743447-066281327,459.0.SENERAL PURPOSES								
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HEARTLAND - PO BOX 4557 - DES MOINES, IA 5030542-072748859,739.0.SENERAL PURPOSESPLATTE INSTITUTE FOR ECONOMIC RESEARCH - 900 S 74TH PLZ - OMAHA, NE 6811420-88090605,000.0.SENERAL PURPOSESPOSSIBILITIES AFRICA PO BOX 6445 LINCOLN, NE 6850620-07038315,000.0.SENERAL PURPOSESPREGNANCY CENTER 111 PIAZZA TERR LINCOLN, NE 6851047-066281327,459.0.SENERAL PURPOSESPRISON FELLOWSHIP INTERNATIONAL PO BOX 1743447-066281327,459.0.SENERAL PURPOSES	LINCOLN, NE 68510	23-7074428		234,464.	٥.			GENERAL PURPOSES
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MOINES, IA 5030542-072748859,739.0.SENERAL PURPOSESPLATTE INSTITUTE FOR ECONOMIC RESEARCH - 900 S 74TH PLZ - OMAHA, NE 6811420-88090605,000.0.SENERAL PURPOSESPOSSIBILITIES AFRICA PO BOX 6445 LINCOLN, NE 6850620-07038315,000.0.SENERAL PURPOSESPREGNANCY CENTER 111 PIAZZA TERR LINCOLN, NE 6851047-066281327,459.0.SENERAL PURPOSESPRISON FELLOWSHIP INTERNATIONAL PO BOX 1743447-066281327,459.0.SENERAL PURPOSES	PLANNED PARENTHOOD OF THE							
PLATTE INSTITUTE FOR ECONOMIC RESEARCH - 900 S 74TH PLZ - OMAHA, NE 6811420-88090605,000.0.POSSIBILITIES AFRICA PO BOX 6445 LINCOLN, NE 6850620-07038315,000.0.PREGNANCY CENTER 111 PIAZZA TERR LINCOLN, NE 6851047-066281327,459.0.PRISON FELLOWSHIP INTERNATIONAL PO BOX 1743447-066281327,459.0.								
RESEARCH - 900 S 74TH PLZ - OMAHA, NE 6811420-88090605,000.0.SENERAL PURPOSESPOSSIBILITIES AFRICA PO BOX 6445 LINCOLN, NE 6850620-07038315,000.0.SENERAL PURPOSESPREGNANCY CENTER 111 PIAZZA TERR LINCOLN, NE 6851047-066281327,459.0.SENERAL PURPOSESPRISON FELLOWSHIP INTERNATIONAL PO BOX 1743447-066281327,459.0.SENERAL PURPOSES	MOINES, IA 50305	42-0727488		59,739.	0.			GENERAL PURPOSES
RESEARCH - 900 S 74TH PLZ - OMAHA, NE 68114       20-8809060       5,000.       0.       SENERAL PURPOSES         POSSIBILITIES AFRICA PO BOX 6445 LINCOLN, NE 68506       20-0703831       5,000.       0.       SENERAL PURPOSES         PREGNANCY CENTER 111 PIAZZA TERR LINCOLN, NE 68510       47-0662813       27,459.       0.       SENERAL PURPOSES         PRISON FELLOWSHIP INTERNATIONAL PO BOX 17434       47-0662813       27,459.       0.       SENERAL PURPOSES								
NE 6811420-88090605,000.0.SENERAL PURPOSESPOSSIBILITIES AFRICA PO BOX 6445 LINCOLN, NE 6850620-07038315,000.0.SENERAL PURPOSESPREGNANCY CENTER 111 PIAZZA TERR LINCOLN, NE 6851047-066281327,459.0.SENERAL PURPOSESPRISON FELLOWSHIP INTERNATIONAL PO BOX 1743447-066281327,459.0.SENERAL PURPOSES								
POSSIBILITIES AFRICA PO BOX 6445 LINCOLN, NE 6850620-07038315,000.0.GENERAL PURPOSESPREGNANCY CENTER 111 PIAZZA TERR LINCOLN, NE 6851047-066281327,459.0.GENERAL PURPOSESPRISON FELLOWSHIP INTERNATIONAL PO BOX 1743447-066281327,459.0.GENERAL PURPOSES		20.0000000		F 000				
PO BOX 6445       20-0703831       5,000.       0.       GENERAL PURPOSES         PREGNANCY CENTER       111 PIAZZA TERR       47-0662813       27,459.       0.       GENERAL PURPOSES         PRISON FELLOWSHIP INTERNATIONAL       PO BOX 17434       Image: Constant of the second sec	NE 68114	20-8809060		5,000.	0.			GENERAL PURPOSES
PO BOX 6445       20-0703831       5,000.       0.       GENERAL PURPOSES         PREGNANCY CENTER       47-0662813       27,459.       0.       GENERAL PURPOSES         INCOLN, NE 68510       47-0662813       27,459.       0.       GENERAL PURPOSES         PRISON FELLOWSHIP INTERNATIONAL PO BOX 17434       Image: Constant of the second seco	DOGGIBILITTIES AFDICA							
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PREGNANCY CENTER     AT-0662813     27,459.     0.       PRISON FELLOWSHIP INTERNATIONAL PO BOX 17434     Enter and a state of the state o		20-0703831		5 000	0			CENEDAL DUDDOGES
111 PIAZZA TERR       47-0662813       27,459.       0.       GENERAL PURPOSES         PRISON FELLOWSHIP INTERNATIONAL       FOR DOX 17434       C       C       C		20 0703031		5,000.	••			GENERAL TORIOSES
111 PIAZZA TERR       47-0662813       27,459.       0.       GENERAL PURPOSES         PRISON FELLOWSHIP INTERNATIONAL       FOR DOX 17434       C       C       C	PREGNANCY CENTER							
LINCOLN, NE 68510 47-0662813 27,459. 0. GENERAL PURPOSES PRISON FELLOWSHIP INTERNATIONAL PO BOX 17434								
PRISON FELLOWSHIP INTERNATIONAL PO BOX 17434		47-0662813		27 459	0			GENERAL PURPOSES
PO BOX 17434					···		1	
PO BOX 17434	PRISON FELLOWSHIP INTERNATIONAL							
	PO BOX 17434							
	WASHINGTON, DC 20041	51-0247185		25,000.	0.			GENERAL PURPOSES

Part II Continuation of Grants and Ot	her Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRISON FELLOWSHIP MINISTRIES							
PO BOX 1550							NEBRASKA PRISON PROGRAM
MERRIFIELD, VA 22116-1550	62-0988294		50,000.	0.			AND DONOR MATCH
i							
RURAL INVESTMENT CORPORATION							
PO BOX 136	47 0706710		50.000				AT GDOLONY DDOGDNY
LYONS, NE 68038	47-0796719		50,000.	0.			MICROLOAN PROGRAM
SAINT ELIZABETH FOUNDATION							
555 S 70TH ST							
LINCOLN, NE 68510	47-0625523		26,658.	0.			GENERAL PURPOSES
SALVATION ARMY							
2625 POTTER ST			56.056				
LINCOLN, NE 68503	36-2167910		56,076.	0.			GENERAL PURPOSES
SAMARITAN'S PURSE							
PO BOX 3000							
BOONE, NC 28607-3000	58-1437002		10,000.	٥.			GENERAL PURPOSES
			,				
SECOND BAPTIST CHURCH							
525 N 58TH ST							
LINCOLN, NE 68505	47-0396788		7,700.	0.			GENERAL PURPOSES
SENIORS FOUNDATION PO BOX 81904							
LINCOLN, NE 68501-1904	47-0630837		41,743.	0.			EXECUTIVE DIRECTOR; GENERAL PURPOSES
LINCOLN, NE 00501-1904	47-0030837		41,743.	0.			GENERAL PORPOSES
SEWARD COMMUNITY SCHOLARSHIP							
PO BOX 141							
SEWARD, NE 68434	47-0620453		49,184.	٥.			GENERAL PURPOSES
SHELDON ART ASSOCIATION							
PO BOX 880300							
LINCOLN, NE 68588-0300	47-6026671		21,624.	0.			GENERAL PURPOSES

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SHELDON FRIENDS OF CHAMBER MUSIC							
1935 A ST							
LINCOLN, NE 68502	36-3348024		9,054.	0.			GENERAL PURPOSES
SHERIDAN LUTHERAN CHURCH							
6955 OLD CHENEY RD							
LINCOLN, NE 68516	47-0484855		17,356.	0.			GENERAL PURPOSES
SHRINER'S HOSPITAL FOR CHILDREN							
2900 ROCKY POINT DR							
TAMPA, FL 33607	36-2193608		11,323.	0.			TWIN CITIES HOSPITAL
	30 2193000		11,010.	<b>.</b>			
SOUTH STREET TEMPLE							
2061 S 20TH ST							
LINCOLN, NE 68502	47-0498915		10,000.	٥.			RABBI EDUCATION PROGRAM
SOUTHERN HEIGHTS PRESBYTERIAN							
CHURCH - 5750 S 40TH ST - LINCOLN,							
NE 68516			11,323.	0.			FOOD FOREST
SOUTHWOOD LUTHERAN CHURCH							
PO BOX 22767							
LINCOLN, NE 68542	47-0576864		22,100.	0.			GENERAL PURPOSES
SOWERS CLUB OF NEBRASKA FOUNDATION							
1701 S 17TH ST STE 1H							
LINCOLN, NE 68502	36-3465837		6,482.	0.			GENERAL PURPOSES
HINCOLN, NE 00502	50 5405057		0,402.	••			SENERAL TORTOSES
SPECIAL OLYMPICS NEBRASKA							
9427 F ST							
OMAHA, NE 68127	47-0546346		10,263.	0.			GENERAL PURPOSES
,			,				
SPIRIT OF HOPE LUTHERAN CHURCH							
5801 NW 1ST ST STE 2							
LINCOLN, NE 68521			16,000.	٥.			GENERAL PURPOSES

#### LINCOLN COMMUNITY FOUNDATION INC Schedule I (Form 990)

47-0490169

47-0379012

1144 M ST

LINCOLN, NE 68508

ST. MONICA'S BEHAVIORAL HEALTH SERVICES FOR WOMEN - 120 WEDGEWOOD

ST. PAUL UNITED METHODIST CHURCH

DR - LINCOLN, NE 68510

				,	edule I (Form 990), Pa I	,	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SPRING CREEK PRAIRIE AUDUBON CENTER - 11700 SW 100TH ST -	13-1624102		40.744	0.			HABITAT MANAGEMENT
DENTON, NE 68339	13-1024102		40,744.	0.			PROGRAM; GENERAL PURPOS
ST. ANNE CATHOLIC CHURCH 1111 S CHERRY ST TOMBALL, TX 77375			23,250.	0.			GENERAL PURPOSES
ST. JOHN'S UNITED CHURCH OF CHRIST 706 MAIN ST							
LA POINTE, WI 54850			7,000.	0.			GENERAL PURPOSES
ST. JOSEPH CATHOLIC CHURCH 7900 TRENDWOOD DR							
LINCOLN, NE 68506	47-0580454		133,598.	0.			GENERAL PURPOSES
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 SAINT JUDE PL - MEMPHIS, TN 38105	62-0646012		118,629.	0.			GENERAL PURPOSES
ST. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD LINCOLN, NE 68520			5,092.	0.			GENERAL PURPOSES
ST. MARY MAGDALENE CATHOLIC CHURCH 527 S HOUSTON AVE							
HUMBLE, TX 77338			10,630.	0.			GENERAL PURPOSES

GENERAL PURPOSES

78,589.

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47 - 0458128Page 1

Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TABITHA FOUNDATION							
4720 RANDOLPH ST							
LINCOLN, NE 68510	47-0636199		78,252.	0.			GENERAL PURPOSES
			, -				
TABITHA INC.							
4720 RANDOLPH ST							
LINCOLN, NE 68510	47-0377998		9,754.	٥.			GENERAL PURPOSES
TEACH A KID TO FISH							
3140 N ST RM 2149							LINCOLN HEROES SATELLITE
LINCOLN, NE 68510	26-2325377		25,880.	0.			CLINIC SUPPORT
TEAMMATES MENTORING PROGRAM							
6801 O ST							
LINCOLN, NE 68510	47-0840990		50,000.	٥.			GENERAL PURPOSES
TEAMMATES MENTORING PROGRAM -							
LINCOLN - 5905 O ST - LINCOLN, NE			C 000				
68510	90-0311108		6,809.	0.			GENERAL PURPOSES
THOMAS JEFFERSON FOUNDATION INC.							
PO BOX 217							
CHARLOTTESVILLE, VA 22902	54-0505959		5,000.	0.			GENERAL PURPOSES
UNION COLLEGE							
3800 S 48TH ST							
LINCOLN, NE 68506	47-0405319		43,423.	0.			SCHOLARSHIPS
INTER WAY OF I THOOTH AND							
UNITED WAY OF LINCOLN AND LANCASTER COUNTY - 238 S 13TH ST -							2015 CAMPAIGN; GENERAL
LINCOLN, NE 68508	47-0376624		77,430.	0.			PURPOSES
			//,450.	0.			
UNITED WAY OF THE TEXAS GULF COAST							
50 WAUGH DR							
HOUSTON, TX 77007	74-1167964		6,600.	٥.			GENERAL PURPOSES

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF IOWA FOUNDATION							
PO BOX 4550							SUPPORT COLLEGE OF
IOWA CITY, IA 52244-4550	42-0796760		17,800.	0.			BUSINESS
UNIVERSITY OF NEBRASKA - KEARNEY							
OFFICE OF FINANCIAL AID							
KEARNEY, NE 68849			19,950.	0.			SCHOLARSHIPS
UNIVERSITY OF NEBRASKA - LINCOLN							
201 ADMINISTRATION BLDG							
LINCOLN, NE 68588			77,706.	0.			SCHOLARSHIPS
			, -				
UNIVERSITY OF NEBRASKA - OMAHA							
FINANCIAL AID OFFICE							
OMAHA, NE 68182			10,750.	0.			SCHOLARSHIPS
INTUEDCENT OF MEDDACKA DOADD OF							
UNIVERSITY OF NEBRASKA BOARD OF REGENTS - 3835 HOLDREGE ST -							PROSPER LINCOLN REPORT;
LINCOLN, NE 68503	47-0049123		116,655.	0.			LINCOLN INDEX AND WEBSIT
	47 0049125		110,055.				DINCOLN INDEX AND WEDDIIN
UNIVERSITY OF NEBRASKA FOUNDATION							SCHOLARSHIPS, LOVE
1010 LINCOLN MALL STE 300							LIBRARY AND FACULTY
LINCOLN, NE 68508	47-0379839		210,180.	0.			ENDOWMENTS
UNIVERSITY OF NEBRASKA MEDICAL							
CENTER - FINANCIAL AID OFFICE -							
OMAHA, NE 68195			9,250.	0.			SCHOLARSHIPS
			5,200.	<b>.</b>			
VISION MAKER MEDIA							
1800 N 33RD ST							
LINCOLN, NE 68503	47-0596952		5,838.	0.			FILM FESTIVAL SPONSORSHI
VOICES OF HOPE							
2545 N ST							CRISIS SERVICES STAFFING
LINCOLN, NE 68510	47-0726814		26,476.	0.			GENERAL PURPOSES

#### LINCOLN COMMUNITY FOUNDATION INC Schedule I (Form 990)

47-0635271

3600 O ST

LINCOLN, NE 68522

LINCOLN, NE 68510

YMCA OF LINCOLN

LINCOLN, NE 68521

Part II Continuation of Grants and Othe		Verninents and Orga		inted States (Sch	edule I (I OITH 990), Fa	1	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
VOLUNTEER PARTNERS							
211 N 14TH ST							PROSPER LINCOLN VOLUNTE
LINCOLN, NE 68508	58-2574619		15,788.	٥.			PROGRAM
WACHISKA AUDUBON SOCIETY							
4547 CALVERT ST STE 10							
LINCOLN, NE 68506	51-0229888		5,036.	0.			GENERAL PURPOSES
WASTECAP NEBRASKA							
610 J ST STE 300							
LINCOLN, NE 68508	20-1946040		5,380.	0.			GENERAL PURPOSES
WAYNE STATE COLLEGE							
FINANCIAL AID OFFICE							
WAYNE, NE 68787			12,300.	0.			SCHOLARSHIPS
WESTMINSTER PRESBYTERIAN CHURCH							
2110 SHERIDAN BLVD							FOUNDATION SUPPORT;
LINCOLN, NE 68502	47-0380471		60,821.	0.			GENERAL PURPOSES
WHOOPING CRANE TRUST							
6611 W WHOOPING CRANE DR							
WOOD RIVER, NE 68883	47-0623996		25,300.	0.			GENERAL PURPOSES
WILLARD COMMUNITY CENTER							
1245 S FOLSOM ST							CAPITAL CAMPAIGN; GENER

WYUKA HISTORICAL FOUNDATION 47-0823689 GENERAL PURPOSES 9,157. 0 NEW FACILITY CONSTRUCTION; GENERAL 570 FALLBROOK BLVD STE 210 PURPOSES 47-0376578 0 967,664.

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Schedule I (Form 990)

PURPOSES

58

42,318.

47-0458128	Page 1
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Part II Continuation of Grants and Othe							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COUNG LIFE							
PO BOX 6442							
LINCOLN, NE 68506-0442	84-0385934		13,187.	0.			GENERAL PURPOSES
YOUTH FOR CHRIST USA INC.							
SOUTHEAST NEBRASKA – 6401 PINE							
LAKE RD - LINCOLN, NE 68516	47-0543176		36,196.	0.			GENERAL PURPOSES
YOUTH FOR CHRIST USA, INC. 5730 KENWICK ST							
SAN ANTONIO, TX 78238	74-1471798		5,000.	0.			GENERAL PURPOSES

 Part III can be duplicated if additional space is needed.
 (a) Type of grant or assistance
 (b) Number of recipients
 (c) Amount of cash grant
 (d) Amount of non- cash assistance
 (f) Description of non-cash assistance

 (a) Type of grant or assistance
 (b) Number of recipients
 (c) Amount of cash grant
 (d) Amount of non- cash assistance
 (f) Description of non-cash assistance

 (a) Type of grant or assistance
 (b) Number of recipients
 (c) Amount of cash grant
 (d) Amount of non- cash assistance
 (f) Description of non-cash assistance

 (a) Type of grant or assistance
 (b) Number of recipients
 (c) Amount of cash grant
 (d) Amount of non- cash assistance
 (f) Description of non-cash assistance

 (a) Type of grant or assistance
 (c) Amount of cash grant
 (c) Amount of cash grant
 (c) Amount of cash grant (c) Amount of cash grant (c) Amount of non- cash assistance

 (a) Type of grant or assistance
 (c) Amount of cash grant (c) Amount of non- cash grant (c) Amount (c) Amount (c) Amount (c) Amount (c) Amount

**Part IV** Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

PART I, LINE 2:

Part III

THE LINCOLN COMMUNITY FOUNDATION STAFF RESEARCHES ALL CHARITIES THAT DONORS

RECOMMEND FOR GRANTS. TO QUAILFY FOR A GRANT DISTRIBUTION, A PROSPECTIVE

GRANTEE MUST BE ABLE TO SATISFY THE FOUNDATION'S DUE DILLIGENCE

REQUIREMENTS BEFORE A GRANT IS MADE. A PROSPECTIVE GRANTEE COMPLETES A

FORMAL GRANT APPLICATION, WHICH INCLUDES SUPPLYING AUDITED FINANCIAL

STATEMENTS, CURRENT 990S, BOARD OF DIRECTORS AND OFFICER LISTINGS. LINCOLN

COMMUNITY FOUNDATION ALSO USES GUIDESTAR TO DETERMINE THAT THE POTENTIAL

GRANTEE IS A QUALIFIED CHAIRTY IN GOOD STANDING. ONCE THE ORGANIZATION

Page 2

Schedule I	(Form 990)	LINCO
Part IV	Supplemental	Information

MEETS THE DUE DILLIGENCE REQUIREMENTS, THE FOUNDATION ISSUES A CHECK TO THE

ORGANIZATION.

Schedule I (Form 990)

532291 04-01-15

SC	HEDULE J	Compensation Information	I	OMB No. 1545-0047			
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	15		
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20	IJ	)	
Dena	tment of the Treasury	Attach to Form 990.		Open to			
Intern	al Revenue Service	Information about Schedule J (Form 990) and its instructions is at www.irs.gov/fo		Inspe			
Nan	ne of the organization		Employer id			mber	
		LINCOLN COMMUNITY FOUNDATION INC	47-0	45812	8		
Pa	rt I Question	s Regarding Compensation				<u> </u>	
_					Yes	No	
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	1 990,				
		line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or c	, i i i i i i i i i i i i i i i i i i i					
	Travel for com						
	Tax indemnification and gross-up payments						
		spending account Personal services (e.g., maid, chauffeur, o	cnet)				
h	If any of the house	an line to are abacked, did the exercitation follow a written policy recording normant as					
D	•	on line 1a are checked, did the organization follow a written policy regarding payment or		1b	Х		
•	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain					-	
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all directors, rs, including the CEO/Executive Director, regarding the items checked in line 1a?		2	Х		
	trustees, and onice			🔼	- 23		
3	Indicato which if a	ny, of the following the filing organization used to establish the compensation of the organiz	ation's				
5		ector. Check all that apply. Do not check any boxes for methods used by a related organization of the organizat					
		ation of the CEO/Executive Director, but explain in Part III.					
	X Compensation						
		compensation consultant $X$ Compensation survey or study					
		ther organizations X Approval by the board or compensation of	committee				
			Johnmittee				
4	During the year, did	l any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
-	organization or a re						
а	•	e payment or change-of-control payment?		4a		Х	
b		ceive payment from, a supplemental nonqualified retirement plan?				X	
с		ceive payment from, an equity-based compensation arrangement?				X	
		nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
	,						
	Only section 501(c	:)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
	contingent on the r						
а	The organization?			5a		Х	
b	Any related organiz	ation?		5b		Х	
		r 5b, describe in Part III.					
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
	contingent on the r	et earnings of:					
а	The organization?			6a		X	
		ation?				X	
		or 6b, describe in Part III.					
7	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed paymen	ts				
		nes 5 and 6? If "Yes," describe in Part III		7		X	
8	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to	the				
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X	
9	If "Yes" to line 8, di	d the organization also follow the rebuttable presumption procedure described in					
	Regulations section	1 53.4958-6(c)?		9			
LHA		eduction Act Notice, see the Instructions for Form 990.		ule J (Forn	n 990	) 2015	

532111 10-14-15

Schedule J (Form 990) 2015

47-0458128

Page 2

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(i) Base npensation	(ii) Bonus & incentive compensation	(iii) Other reportable	other deferred compensation	benefits	(B)(i)-(D)	in column (B)
		compensation				reported as deferred on prior Form 990
61,106.	0.	0.		20,621.		0.
0.	0.	0.	0.	0.	0.	0.
				Image: second	Image: section of the section of th	Image: section of the section of th

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### PART I, LINE 1A:

SOCIAL CLUB DUES WERE PAID FOR THE PRESIDENT.

SCHEDULE	Μ
(Form 990)	

### **Noncash Contributions**

OMB No. 1545-0047 15

**Open To Public** 

Inspection

ſ 21

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number 47 - 0458128

#### LINCOLN COMMUNITY FOUNDATION INC of Droporty

Pai	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de noncash contribu			<u> </u>
		applicable	items contributed	Form 990, Part VIII, line 1g	TIONCASIT CONTINU	lion ai	nount	5
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	95		FMV			
10	Securities - Closely held stock	Х	1	62,403.	INDEPENDENT	AP:	PRA	ISA
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organiz							
	for which the organization completed Form 828	83, Part IV, I	Donee Acknowledg	gement 29			V	
00-				and a Dark I. Kana di Akara			Yes	No
30a	During the year, did the organization receive by				-			
	must hold for at least three years from the date					00-		Х
Ŀ	exempt purposes for the entire holding period?	·				30a		
	If "Yes," describe the arrangement in Part II.	olicy that m	equires the review	of any non-standard contribution	utions?	24	x	
31 32a	Does the organization have a gift acceptance p Does the organization hire or use third parties of					31		
JZa			-	cit, process, or sell noncasin		32a	x	
b	If "Yes," describe in Part II.							

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

LHA	For Paperwork Reduction	Act Notice,	see the Instructions	for Form 990.

Schedule M (Form 990) (2015)

532141 08-21-15

09021102 758603 4343-000

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

#### SCHEDULE M, LINE 32B:

#### AN INDEPENDENT FINANCIAL SERVICES BROKERAGE FIRM IS USED FOR SECURITIES

#### TRANSACTIONS.

Part II

Schedule M (Form 990) (2015)

532142 08-21-15

09021102 758603 4343-000

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at WWW.irs.gov/form990.



Internal Revenue Service
Name of the organization

LINCOLN COMMUNITY FOUNDATION INC

Employer identification number 47 - 0458128

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

LINCOLN, NEBRASKA AND LANCASTER COUNTY, NEBRASKA.

FORM 990, PART VI, SECTION B, LINE 11:

THE FILING VERSION OF THE RETURN IS PROVIDED TO THE BOARD CHAIR AND THE

CHAIR OF THE AUDIT COMMITTEE. THE REST OF THE BOARD IS PROVIDED THE FILING

VERSION WITHOUT THE NAMES AND ADDRESSES OF THE CONTRIBUTORS ON SCHEDULE B.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL BOARD OF DIRECTORS ARE ASKED AT THE BEGINNING OF EACH QUARTERLY MEETING

FORM 990, PART VI, SECTION B, LINE 15:

THE HUMAN RESOURCES COMMITTEE (A BOARD COMMITTEE) MEETS ANNUALLY TO SET PAY INCREASES AS WELL AS PAY RANGES FOR ALL EMPLOYEES. THESE ARE BASED ON COMPARABILITY DATA. THE DECISIONS MADE BY THIS COMMITTEE ARE DOCUMENTED IN MEETING MINUTES.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION PUTS ITS FORM 990 AND AUDIT REPORTS FOR THREE YEARS ON THE WEBSITE FOR PUBLIC VIEWING. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICIES ARE PROVIDED TO ANYONE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

SPLIT INTEREST AGREEMENTS

ADJUSTMENT FOR AN	INTERFUND TRANSFEF	R BETWEEN LINCOLN	74,943.
LHA For Paperwork Reduction A	Schedule O (Form 990 or 990-EZ) (2015)		
09-02-15			

67

09021102 758603 4343-000

2015.04030 LINCOLN COMMUNITY FOUNDATIO 4343-001

Schedule O (Form 990 or 990-EZ) (2015) Name of the organization LINCOLN COMMUNITY FOUNDATION INC	Page Employer identification number 47-0458128
COMMUNITY FOUNDATION AND LINCOLN FOUNDATION DONOR DIRECTN	ED DEPOSITORY
FOTAL TO FORM 990, PART XI, LINE 9	187,181
FORM 990, PART XII, LINE 2C, AUDIT OVERSIGHT:	
THE POLICY HAS NOT CHANGED SINCE THE PRIOR YEAR.	
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<b>/</b>	

#### (Form 990)

### **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

#### Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

#### LINCOLN COMMUNITY FOUNDATION INC

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity			<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity

### Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity			(e) Public charity status (if section	Public charity Direct controlling tatus (if section entity		<b>g)</b> 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
LINCOLN FOUNDATION DONOR DIRECTED DEPOSITORY	GRANTS AND ALLOCATIONS TO						
- 36-3766015, 215 CENTENNIAL MALL SOUTH, STE	LOCAL NON-PROFIT						
100, LINCOLN, NE 68508	ORGANIZATIONS	NEBRASKA	501(C)(3)	LINE 7		X	
	-						
	-						

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

OMB No. 1545-0047

2015 Open to Public Inspection

Employer identification number 47 - 0458128

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Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)			
Name, address, and EIN P of related organization	Primary activity	Legal domicile (state or foreign	state or entity excluded from tax under encome end-of-ye	(related, unrelated, excluded from tax under	(related, unrelated, inco	(related, unrelated, income excluded from tax under	(related, unrelated, income excluded from tax under	income	Share of end-of-year assets	alloca		amount in box 20 of Schedule	manag partn	<sup>Il or</sup> Percentag <sup>ing</sup> ownership er?
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No			

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership	(i Sec 512(t contr ent	(i) ction (b)(13) trolled tity?
		country)		or trusty		233013			No
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Part V	Transactions With Related Organizations Complete if the organization answered	"Yes" on Form 990, Part IV, line 34, 35b, or 36.
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ote. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s N
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Σ
<b>b</b> Gift, grant, or capital contribution to related organization(s)			
c Gift, grant, or capital contribution from related organization(s)			
d Loans or loan guarantees to or for related organization(s)	1d		
e Loans or loan guarantees by related organization(s)			
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)	1h		
Exchange of assets with related organization(s)			
Lease of facilities, equipment, or other assets to related organization(s)			
Lease of facilities, equipment, or other assets from related organization(s)			
Performance of services or membership or fundraising solicitations for related organization(s)			
n Performance of services or membership or fundraising solicitations by related organization(s)			
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X	
Sharing of paid employees with related organization(s)		X	_
Reimbursement paid to related organization(s) for expenses			_
Reimbursement paid by related organization(s) for expenses			Ŧ
Other transfer of cash or property to related organization(s)			
s Other transfer of cash or property from related organization(s)	1s	X	

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	<b>(d)</b> Method of determining amount involved
LINCOLN FOUNDATION DONOR DIRECTED (1) DEPOSITORY	S	74,943.	CASH
(2)			
_(3)			
(5)			
<u>(6)</u>	71		

#### Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(h)		دم) (م)		<u>,                                     </u>	(6)	(m)	/	•	(1)	(3)	(14)
(a)	(b)	(c)	(d)	(e Are a partners 501 (c orgs	all all	(f)	(g)		ר)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners	s sec.	Share of	Share of	Dispr tior	opor- nate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing	Percentage
of entity		(state or foreign	excluded from tax under	orgs	5.?	total	end-of-year	alloca	tions?	of Schedule K-1	partner?	ownersnip
		country)	sections 512-514)	Yes	No	income	assets	Yes	No	(Form 1065)	Yes NO	
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Provide additional information for responses to questions on Schedule R (see instructions).

532165 09-08-15