PUBLIC DISCLOSURE COPY

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service 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.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A	For the	2023 calend	dar year, or tax year beginning	, 20	23, and end	ing			, 20				
В	Check if a	applicable:	C Name of organization LINCOLN	I COMMUNITY FOUNDATION	INC		D	Employ	yer identification num	ber			
	Address of	change	Doing business as						47-0458128				
	Name cha	ange	Number and street (or P.O. box if	mail is not delivered to street addre	ess)	Room/suite	E	Telepho	one number				
	Initial retu	rn	215 CENTENNIAL MALL S ST	E 100					(402) 474-2345				
	Final retur	n/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal co	de								
	Amended	return	LINCOLN, NE 68508-1885				G	Gross r	receipts \$ 65,617	,224			
	Application	n pending	F Name and address of principal off	icer: ALEC GORYNSKI		H(a) Is	this a group	oup return for subordinates? Yes No					
			SAME AS C ABOVE			1				No			
ī	Tax-exem	pt status:	✓ 501(c)(3)) (insert no.)	1) or 527	If	"No," atta	ach a list	h a list. See instructions.				
J	Website:	WWW.LC	F.ORG		•	H(c) G	Group exer	mption n	number				
ĸ	Form of or	ganization:	Corporation Trust Associa	tion Other	L Year of for	mation: 19	955 M	1 State o	of legal domicile: N	E			
Р	art I	Summai	ry										
	1 1		cribe the organization's miss	ion or most significant activ	ities: INSP	IRING OUR	COMMU	JNITY :	TO GIVE, ACT				
e		AND LEAD.	-	3									
au	-												
eru	2	Check this	box if the organization d	iscontinued its operations o	r disposed	of more th	nan 25%	6 of its	net assets.				
Š	1		voting members of the gove		-			3		27			
æ			independent voting member					4		27			
ies			per of individuals employed in				[5		21			
Activities & Governance			per of volunteers (estimate if	-	-		[6		34			
Act			ated business revenue from	3,			1	7a	18,24				
	1		ed business taxable income	, ,,			1	7b	15,4				
			ior Year		Current Year								
•	8 (Contributio	ons and grants (Part VIII, line	1h)			25,401	1,099	32,373	3,317			
Revenue	1		ervice revenue (Part VIII, line	2,702	6	5,261							
eve		-	: income (Part VIII, column (A	σ,			6,018	3,841	5,880	,908			
ď			nue (Part VIII, column (A), line				148	3,545	174	,935			
	1		ue—add lines 8 through 11 (n		•		31,581	1,187	38,435	,421			
		Grants and similar amounts paid (Part IX, column (A), lines 1–3)							22,388				
	14	Benefits pa	aid to or for members (Part IX										
ø	4- 4		her compensation, employee				1,824	1,968	2,029	,872			
Expenses	16a	Profession	al fundraising fees (Part IX, c	olumn (A), line 11e)				0		0			
be	b -	Total fundr	aising expenses (Part IX, col	umn (D), line 25)	636,922								
ш	17 (Other expe	enses (Part IX, column (A), lin	es 11a-11d, 11f-24e)			3,371	1,868	3,316	,107			
	18	Total expe	nses. Add lines 13-17 (must	equal Part IX, column (A), li	ne 25) .		23,989	9,472	27,734	,589			
		Revenue le	ess expenses. Subtract line 1	8 from line 12			7,591	1,715	10,700	,832			
or	3					Beginning	of Current	t Year	End of Year				
sets	20	Total asset	s (Part X, line 16)				185,840	0,105	211,371	,387			
Net Assets or Fund Balances	21	Total liabili	ties (Part X, line 26)				1,107	7,660	10,326	,506			
۽	22 I	Net assets	or fund balances. Subtract li	ine 21 from line 20			184,732	2,445	201,044	,881			
	art II	Signatu	re Block										
			I declare that I have examined this						ny knowledge and belie	ef, it is			
tru	ie, correct,	and complete	e. Declaration of preparer (other than	officer) is based on all information	of which prepare	arer has any k	knowledge	9.					
Si	gn	Signature	of officer				Date						
He	ere	SCOTT L	AWSON, VICE PRESIDENT-FIN	NANCE									
		Type or pr	int name and title										
Pa		Print/Type	preparer's name	Preparer's signature		Date	С	heck] if PTIN				
	nu eparer	I KRISTINI TVNIONI					Se	elf-empl	oyed P01063388	3			
	eparer se Only	L Lives's see	ne FORVIS MAZARS, LLP				Firm's EIN 44-01602						
_	————	Firm's address 1248 O STREET STE 1040, LINCOLN, NE 68508-1461 Phon							(402) 473-7600				
Ма	y the IR	S discuss t	his return with the preparer s	shown above? See instructi	ons		<u> </u>		. 🗸 Yes 🗌	No			
For	Paperw	ork Reduct	ion Act Notice, see the separa	te instructions.	Cat.	No. 11282Y			Form 990 ((2023)			

Part			ce Accomplishments a response or note to any line in this	s Part III	
1	Briefly describe	the organization's m COMMUNITY TO GIVE	ission:		
2			significant program services during the		he Yes V No
3		pe these new services zation cease conduc	s on Schedule O. cting, or make significant changes i	n how it conducts, any progra	am
	services? If "Yes," describ	e these changes on			☐ Yes ☑ No
4	expenses. Sect	ion 501(c)(3) and 501	n service accomplishments for each of (c)(4) organizations are required to reny, for each program service reported.	port the amount of grants and a	
4a	(Code: GRANTS AND A) (Expenses \$	26,089,611 including grants of \$ -PROFIT CHARITABLE ORGANIZATIONS		6,261)
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	(Codo:	\/Evpansos \$	including grants of \$) (Revenue \$	
40	(Code:) (Expenses \$) (nevertue φ	/
4d	(Expenses \$	services (Describe on includir	n Schedule O.) ng grants of \$) (Reven)	

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Part 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	,	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		_
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? <i>If "Yes," complete Schedule C, Part II</i>	4		,
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		_
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	_	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7	•	_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		_
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10	_	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	,	
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		_
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? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		_
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		~
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11e	<i>v</i>	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	~	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	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 "Yes," complete Schedule F, Parts I and IV	14b		,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		,
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		,
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		~
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		~
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	~	
			202	

Part	V Checklist of Required Schedules (continued)		•	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	~	
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 Schedule J	00		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	23	✓	
	through 24d and complete Schedule K. If "No," go to line 25a	24a		>
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? <i>If "Yes," complete Schedule L, Part I</i>	25a		/
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		V
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
00	persons? If "Yes," complete Schedule L, Part III	27		\
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		>
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		>
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		٧
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	~	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		V
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
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		>
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? <i>If "Yes," complete Schedule R, Part I</i>	33		V
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	_	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	~	
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		>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		\ \
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		\ \ \
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	~	
Part		J0	•	
	Check if Schedule O contains a response or note to any line in this Part V		 Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 114		169	140
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	~	

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Form 990 (2023)

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 21			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b	~	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
b	If "Yes," enter the name of the foreign country			
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	_		
a	If "Yes," indicate the number of Forms 8282 filed during the year	7c		~
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		~
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	9b		~
а	Initiation fees and capital contributions included on Part VIII, line 12			
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			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		>
_b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	_ ـ ـ		
	excess parachute payment(s) during the year?	15		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.	10		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year . . . 27 1a 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 on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 1b 27 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 1 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? 13 ~ 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . 1 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ✓ Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. SCOTT LAWSON VP FINANCE, 215 CENTENNIAL MALL SOUTH STE 100, LINCOLN, NE 68508, (402) 474-2345

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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 the 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 reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

Check this box if neither	the organization nor	any related	d organization co	ompensat	ted any current o	officer, director,	or trustee.

(A) Name and title	(B) Average hours per week	(do n box, office	ot ch unles er and	Pos neck ss pe d a d	Position eck more than one sperson is both an a director/trustee)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) ALEC GORYNSKI	40.0									
PRESIDENT	0.0			~				243,936	0	30,753
(2) SCOTT LAWSON	40.0									
VICE PRESIDENT-FINANCE	0.0			~				137,133	0	7,629
(3) RICHARD DEBUSE	40.0									
VICE PRES-DEVELOPMENT	0.0			~				128,016	0	6,936
(4) TRACY EDGERTON	40.0									
VICE PRES-DEVELOPMENT	0.0			~				117,126	0	6,896
(5) LINDA MAJOR	1.0									
CORPORATE SECRETARY	0.0	~		~				0	0	0
(6) MARILYN MOORE	3.0									
BOARD CHAIR	0.0	~		~				0	0	0
(7) MARK HESSER	3.0									
BOARD VICE CHAIR	0.0	~		~				0	0	0
(8) RYAN BECKMAN	1.0									
TREASURER	0.0	~		~				0	0	0
(9) AARON DAVIS	1.0									
BOARD MEMBER	0.0	~						0	0	0
(10) AARON HILKEMANN	1.0									
BOARD MEMBER	0.0	~						0	0	0
(11) BEN KISER	1.0									
BOARD MEMBER	0.0	~						0	0	0
(12) CONNIE EDMOND	1.0									
BOARD MEMBER	0.0	~						0	0	0
(13) DAN MARVIN	1.0									
BOARD MEMBER	0.0	~						0	0	0
(14) DIANE TEMME STINTON	1.0									
BOARD MEMBER	0.0	~						0	0	0

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Part VII Section A. Officers, Directors, 7	rustees,	Key l	Em	plo	yee	s, an	d F	lighest Compe	nsated Empl	yees (contin	าued)
				(0	C)						
(A)	(B)			Pos	ition			(D)	(E)	(E)	
(A)	(B)	(do r	ot ch			e than o	one	(D)	(E)	(F)	
Name and title	Average hours					is both		Reportable compensation	Reportable compensation	Estimated am of other	ount
	per week		_	_	_	or/trust	—	from the	from related	compensati	ion
	(list any	Indi or c	Inst	Officer	o	High	Former	organization (W-2/	,	/ from the	
	hours for	vid lire	茸	cer	en	hes	mei	1099-MISC/	1099-MISC/	organization	
	related organizations	or a	jon		힏	ee co		1099-NEC)	1099-NEC)	related organiza	ations
	below	Individual trustee or director	4		Key employee	l mg					
	dotted line)	tee	Institutional trustee			ens					
			ď			Highest compensated employee					
(15) ERIC BUCHANAN	1.0					_					
BOARD MEMBER	0.0	~						0	(0
								0	(<u>'</u>	
(16) JASMINE KINGSLEY	1.0							_	_		
BOARD MEMBER	0.0	~						0	(4	0
(17) JUAN CARLOS HUERTAS	1.0										
BOARD MEMBER	0.0	~						0	()	0
(18) KILE JOHNSON	1.0										
BOARD MEMBER	0.0	~						0	()	0
(19) KIM ROBAK	1.0										
BOARD MEMBER	0.0	1						0	(,	0
								0		'	
(20) LAUREN PUGLIESE	1.0										
BOARD MEMBER	0.0	~						0	(4	0
(21) MAKENZIE RATH	1.0										
BOARD MEMBER	0.0	~						0	()	0
(22) MARCO BARKER	1.0										
BOARD MEMBER	0.0	~						0	()	0
(23) MEG LAUERMAN	1.0										
BOARD MEMBER	0.0	1						0	(,	0
								0		'	
(24) MICHAEL FERRIS	1.0								,		•
BOARD MEMBER	0.0	~						0	(<u>'</u>	0
(25) (SEE STATEMENT)											
1b Subtotal								626,211	(5	2,214
c Total from continuation sheets to Part	VII, Sectio	n A						0	()	0
d Total (add lines 1b and 1c)								626,211	(5	2,214
2 Total number of individuals (including but	not limited	to th	nose	e list	ted	above	e) w	ho received mor	e than \$100,00	0 of	
reportable compensation from the organi	zation						•	4			
								· · · · · · · · · · · · · · · · · · ·		Yes	No
3 Did the organization list any former of	officer dire	octor	tru	ict_	ا م	(0)/ 0	mnl	ovee or highes	t compansate		110
employee on line 1a? If "Yes," complete s								oyee, or riighes	si compensate		
							•			3	-
4 For any individual listed on line 1a, is the											
organization and related organizations	greater th	an \$	150,	JUUL)'?	t "Ye	s,"	complete Sched	dule J for suc	n	
individual										4 🗸	
5 Did any person listed on line 1a receive of	r accrue co	ompe	nsa	tion	fro	m any	un un	related organizat	tion or individua	al le	
for services rendered to the organization	? If "Yes," c	ompi	lete	Sch	hedi	ule J t	or s	such person .		5	~
Section B. Independent Contractors											
1 Complete this table for your five high	nest compe	ensat	ed	inde	ene	ndent	CC	ntractors that r	eceived more	than \$100.00	00 of
compensation from the organization. Rep											
- compensation from the enganization from							. , o	ar origing with or	Trialini and orga		
(A)	****							(B)	da a a	(C)	
Name and business add	ress							Description of serv	rices	Compensation	
NONE											
2 Total number of independent contractor	rs (includir	na hi	ıt n	ot	limit	ted to	th	ose listed abov	e) who		
received more than \$100,000 of compens								0	.,		
		- •	J-11.					U		Form 990	(2222)

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Form 990 (2023) Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spor	se or note to ar	ny line in this Pa	ırt VIII		🗆
					•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Š, Š	1a	Federated campaign	ns .		1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	. •			1b					
ည် ဥ	С	Fundraising events			1c					
rts,	d	Related organization			1d					
	е	Government grants			1e					
ns,	f	All other contribution								
e Si		and similar amounts no	ot incl	uded above	1f	32,373,317				
g £	g	Noncash contribution	ns in	cluded in						
a d	_	lines 1a-1f			1g	\$ 16,833,614				
a Co	h	Total. Add lines 1a-	-1f .			•	32,373,317			
						Business Code				
e S	2a	LCF PROFESSIONAL	. FEE	S		900099	6,261	6,261		
Program Service Revenue	b						,			
gram Ser Revenue	С									
E Š	d									
gra Re	e									
Sr	f	All other program se	ervice	revenue			0	0	0	0
-	g	Total. Add lines 2a-					6,261		-	
	3	Investment income					-, -			
		other similar amoun					5,145,304			5,145,304
	4	Income from investn	nent o	of tax-exem	not ba	and proceeds				· · · · · ·
	5	D 111								
		[(i) Rea		(ii) Personal				
	6a	Gross rents	6a	30	6,515					
	b	Less: rental expenses	6b		9,574					
	C	Rental income or (loss)	6c		6,941	0				
	d	Net rental income of		1			76,941			76,941
	7a	Gross amount from	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(i) Securit		(ii) Other	- 7-			-,-
		sales of assets		.,						
		other than inventory	7a	27,68	7,833					
Φ	b	Less: cost or other basis								
Z		and sales expenses .	7b	26,95	2,229					
Revenue	С	Gain or (loss)	7c	73	5,604	0				
	d	Net gain or (loss)					735,604			735,604
Other	8a	Gross income from								
ნ		events (not including		3						
		of contributions rep		d on line						
		1c). See Part IV, line	18		8a					
	b	Less: direct expense	es .		8b					
	С	Net income or (loss)	from	n fundraisin	g eve	ents				
	9a	Gross income f								
		activities. See Part I	V, lin	e 19 .	9a					
	b	Less: direct expense	es .		9b					
	С	Net income or (loss)			tivitie	es				
	10a	Gross sales of in		ory, less						
		returns and allowand			10a					
	b	Less: cost of goods			10b					
	С	Net income or (loss)	from	sales of in	vento	ory				
S _D						Business Code				
eo e	11a	MISCELLANEOUS RE		UE		900099	79,749			79,749
Miscellaneous Revenue	b	PARTNERSHIP INCO	ME			900099	18,245		18,245	
Sel.	С									
Ais F	d	All other revenue					0	0	0	0
_	е	Total. Add lines 11a					97,994			
	12	Total revenue. See	instr	uctions .			38,435,421	6,261	18,245	6,037,598

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

	Check if Schedule O contains a response or note to any line in this Part IX											
Do no	ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)							
	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses							
1	Grants and other assistance to domestic organizations		одреневе	general expenses	одреневе							
	and domestic governments. See Part IV, line 21 .	21,894,110	21,894,110									
2	Grants and other assistance to domestic	21,001,110	21,001,110									
	individuals. See Part IV, line 22	494,500	494,500									
3	Grants and other assistance to foreign	10 1,000	10 1,000									
•	organizations, foreign governments, and											
	foreign individuals. See Part IV, lines 15 and 16											
4	Benefits paid to or for members											
5	Compensation of current officers, directors,											
Ū	trustees, and key employees	670.405	007.050	404.070	040.000							
6		678,425	267,853	194,276	216,296							
6	Compensation not included above to disqualified											
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)											
7	Other salaries and wages	991,193	401,540	354,114	235,539							
8	Pension plan accruals and contributions (include											
	section 401(k) and 403(b) employer contributions)	93,562	74,850	14,034	4,678							
9	Other employee benefits	155,787	52,084	57,968	45,735							
10	Payroll taxes	110,905	42,255	37,708	30,942							
11	Fees for services (nonemployees):											
а	Management	0	0	0	0							
b	Legal	7,306	0	7,306	0							
С	Accounting	46,923	0	46,923	0							
d	Lobbying	0	0	0	0							
е	Professional fundraising services. See Part IV, line 17	0			0							
f	Investment management fees	135,263	0	135,263	0							
g	Other. (If line 11g amount exceeds 10% of line 25, column	23, 23	-	22, 22								
_	(A), amount, list line 11g expenses on Schedule O.)	18,521	0	18,521	0							
12	Advertising and promotion	185,598	110,237	28,028	47,333							
13	Office expenses	147,640	54,385	59,778	33,477							
14	Information technology	0	0	0	0							
15	Royalties	0	0	0	0							
16	Occupancy	24,890	21,758	2,290	842							
17	Travel	0	0	0	0							
18	Payments of travel or entertainment expenses	U	U	U	<u> </u>							
.0	for any federal, state, or local public officials	0	0	0	0							
40	Conferences, conventions, and meetings .	0	0	0	0							
19	, ,			-								
20	Interest	0	0	0	0							
21	Payments to affiliates	142.405	124 912	0	6.672							
22	Depreciation, depletion, and amortization .	142,495	124,812	11,011	6,672							
23	Insurance	23,652	8,988	9,132	5,532							
24	Other expenses. Itemize expenses not covered											
	above. (List miscellaneous expenses on line 24e. If											
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)											
	, , , , , , , , , , , , , , , , , , , ,											
а	FISCAL SPONSORSHIPS	2,428,315	2,428,315	0	0							
b	ANNUITY DISTRIBUTION	67,801	67,801	0	0							
С	STAFF DEVELOPMENT	42,224	16,045	16,303	9,876							
d	MISSION INITIATIVES	23,672	23,672	0	0							
е	All other expenses	21,807	6,406	15,401	0							
25	Total functional expenses. Add lines 1 through 24e	27,734,589	26,089,611	1,008,056	636,922							
26	Joint costs. Complete this line only if the			\Box								
	organization reported in column (B) joint costs from a combined educational campaign and											
	fundraising solicitation. Check here if											
	following SOP 98-2 (ASC 958-720)											
	<u>.</u>				Form 990 (2023)							

Part X Balance Sheet

	(A) Beginning of year		(B) End of year
non interest heaving		1	End of year
—non-interest-bearing	2,507,167	2	31,110,386
	33,240,933	3	
ges and grants receivable, net	6,530,813	4	6,465,528
unts receivable, net	3,322	4	3,446
ee, key employee, creator or founder, substantial contributor, or 35% colled entity or family member of any of these persons			
s and other receivables from other disqualified persons (as defined		5	0
r section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	C
s and loans receivable, net	1,063,521	7	1,159,504
tories for sale or use		8	
aid expenses and deferred charges		9	
, buildings, and equipment: cost or other complete Part VI of Schedule D 10a 7,317,526			
accumulated depreciation 10b 4,449,504	2,612,708	10c	2,868,022
tments-publicly traded securities	135,407,581	11	165,329,731
tments-other securities. See Part IV, line 11	2,206,000	12	2,206,000
tments-program-related. See Part IV, line 11	112,434	13	123,946
gible assets	·	14	
r assets. See Part IV, line 11	2,155,626	15	2,104,824
l assets. Add lines 1 through 15 (must equal line 33)	185,840,105	16	211,371,387
unts payable and accrued expenses	874,279	17	837,548
ts payable	42,050	18	145,300
rred revenue	0	19	9,192,660
exempt bond liabilities		20	· ·
ow or custodial account liability. Complete Part IV of Schedule D.		21	
s and other payables to any current or former officer, director, ee, key employee, creator or founder, substantial contributor, or 35%			
olled entity or family member of any of these persons	0	22	C
red mortgages and notes payable to unrelated third parties		23	
cured notes and loans payable to unrelated third parties		24	
r liabilities (including federal income tax, payables to related third es, and other liabilities not included on lines 17-24). Complete Part X			
hedule D	191,331	25	150,998
I liabilities. Add lines 17 through 25	1,107,660	26	10,326,506
nizations that follow FASB ASC 958, check here complete lines 27, 28, 32, and 33.			
ssets without donor restrictions	175,434,116	27	191,714,027
ssets with donor restrictions	9,298,329	28	9,330,854
nizations that do not follow FASB ASC 958, check here complete lines 29 through 33.			
al stock or trust principal, or current funds		29	
		30	
-	184,732,445	32	201,044,881
	185,840,105	33	211,371,387
in ne n	stock or trust principal, or current funds	or capital surplus, or land, building, or equipment fund ed earnings, endowment, accumulated income, or other funds	or capital surplus, or land, building, or equipment fund

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Part	XI Reconciliation of Net Assets										
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			~						
1	Total revenue (must equal Part VIII, column (A), line 12)		;	38,43	5,421						
2	Total expenses (must equal Part IX, column (A), line 25)		:	27,73	4,589						
3	Revenue less expenses. Subtract line 2 from line 1			10,70	0,832						
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		18	84,73	2,445						
5	Net unrealized gains (losses) on investments										
6	6 Donated services and use of facilities										
7	Investment expenses				0						
8	Prior period adjustments		(7,642	2,131)						
9	Other changes in net assets or fund balances (explain on Schedule O)			(16	5,484)						
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line										
	32, column (B))		2	01,04	4,881						
Part	XII Financial Statements and Reporting										
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	_								
		_	_	Yes	No						
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.										
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2	2a		~						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled reviewed on a separate basis, consolidated basis, or both.	or									
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis										
b	Were the organization's financial statements audited by an independent accountant?	. 2	2b	~							
	If "Yes," check a box below to indicate whether the financial statements for the year were audited or	ı a 📗									
	separate basis, consolidated basis, or both.										
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis										
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight										
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	•							
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	on									
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in tuniform Guidance, 2 C.F.R. Part 200, Subpart F?		Ba		>						
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo trequired audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	I	Bb								

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Part VII

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

(A) Name and Title	(A) Name and Title (B) Average hours per week (list any hours for related		(C) Position (Check all that apply)					(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(25) MIKE BOYLE	1.0	/						0	0	0	
BOARD MEMBER	0.0	•						0	0	0	
(26) PAM HUNZEKER	1.0	/						0	0		
BOARD MEMBER	0.0	•							O	•	O
(27) PREETA BANSAL	1.0	/						0	0	0	
BOARD MEMBER	0.0	•						O	0	U	
(28) RONNIE GREEN	1.0	/						0	0	0	
BOARD MEMBER	0.0	•						O	0	U	
(29) SANDRA WASHINGTON	1.0	/						0	0	0	
BOARD MEMBER	0.0	•						0	0	O	
(30) STEVE SCHAFFER	1.0	/						0	0	0	
BOARD MEMBER	0.0	•						0	0	U	
(31) SUSIE KEISLER-MUNRO	1.0	/						0	0	0	
BOARD MEMBER	0.0	•						0	0		

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

OMB No. 1545-0047

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.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Employer identification number Name of the organization LINCOLN COMMUNITY FOUNDATION INC 47-0458128 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33¹/₈% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12a, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (iii) Type of organization (v) Amount of monetary (i) Name of supported organization (ii) EIN (iv) Is the organization (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

47-0458128

Schedule A (Form 990) 2023 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 **(e)** 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . 25,267,885 26,285,064 46,162,683 25,401,099 32,373,317 155,490,048 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 The value of services or facilities furnished by a governmental unit to the organization without charge 0 **Total.** Add lines 1 through 3 25.267.885 26.285.064 46.162.683 25.401.099 32.373.317 155.490.048 4 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) 37,768,547 **Public support.** Subtract line 5 from line 4 117,721,501 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 **(e)** 2023 (f) Total 7 Amounts from line 4 25,267,885 26,285,064 46,162,683 25,401,099 32,373,317 155,490,048 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 3,720,118 2,588,071 3,729,187 3,335,531 5,451,819 18,824,726 9 Net income from unrelated business activities, whether or not the business is regularly carried on 18,245 18,245 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 91,855 41,980 50,047 101,993 365,624 79,749 174,698,643 **Total support.** Add lines 7 through 10 11

12	Gross receipts from related activities, etc. (see instructions)	12	18,9	63
13	First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year	ar as	a section 501(c)(3)	
	organization, check this box and stop here			
Secti	on C. Computation of Public Support Percentage			
14	Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	67.39	%
15	Public support percentage from 2022 Schedule A, Part II, line 14	15	69.19	%
16a	331/3% support test—2023. If the organization did not check the box on line 13, and line 14 is 33 box and stop here. The organization qualifies as a publicly supported organization			V
b	331/3% support test—2022. If the organization did not check a box on line 13 or 16a, and line 15 in this box and stop here. The organization qualifies as a publicly supported organization			
17a	10%-facts-and-circumstances test—2023. If the organization did not check a box on line 13, 16 10% or more, and if the organization meets the facts-and-circumstances test, check this box ar Part VI how the organization meets the facts-and-circumstances test. The organization qualifies organization	nd st as a	op here. Explain in publicly supported	
b	10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies organization	and as a	stop here . Explain publicly supported	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, instructions	chec	k this box and see	

Schedule A (Form 990) 2023 Page **3**

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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.)

Secti	on A. Public Support	411401 1110 10	010 110104 2011	on, piedee et	ompioto i air	,	
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(*)		(3)		(1)	
2	Gross receipts from admissions, merchandise sold or services performed, 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 business under section 513						
4	Tax revenues levied for the organization'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 7a	Total. Add lines 1 through 5 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						
с 8	Add lines 7a and 7b						
Secti	on B. Total Support		•		•	•	
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	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						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on 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.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop he	•	s first, second		-		
Secti	on C. Computation of Public Suppor	t Percentag	е				
15	Public support percentage for 2023 (line 8	, ,,,	•	, ,,,			%
16	Public support percentage from 2022 Sch					16	<u>%</u>
	on D. Computation of Investment In						
17	Investment income percentage for 2023 (-			<u>%</u>
18	Investment income percentage from 2022						% and line
19a	33 ¹ /3% support tests—2023. If the organ 17 is not more than 33 ¹ /3%, check this box						
h	33 ¹ /3% support tests—2022. If the organiz	_	_	-		_	_
b	line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions . \Box

Schedule A (Form 990) 2023 Page 4

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Se

Secti	on A. All Supporting Organizations			
			Yes	No
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.	1		
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).			
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	2 3a		
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.	3b		
С	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.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
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.	4b		
С	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.			
_		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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			
b	was accomplished (such as by amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already	5a		
	designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? 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 .	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
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 .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined on 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 .	9c		
10a	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
L-	supporting organizations)? If "Yes," answer line 10b below.	10a		
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.)	10b		

Schedule A (Form 990) 2023 Page 5

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Part	Supporting Organizations (continued)			
			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 on lines 11b and 11c below, the governing body of a supported organization?			
		11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
01:	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations		V	NI -
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, 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? <i>If "Yes," explain in Part</i>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on 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		
Secti	on 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?	_		
0		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				
3	By reason of the relationship described on line 2, above, 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		
Secti	on 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 year (see i	nstru	ctions	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			-
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	see in	struct	ions).
2	Activities Test. Answer lines 2a and 2b 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 on line 2a, above, 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 activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2023 Page **6**

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	izations	
1	\Box Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	
Sect	tion 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	tion 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 Part VI):			
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 0.015 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 0.035.	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 0.85 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-function	allv i	integrated Type III suppo	rting organization

Schedule A (Form 990) 2023

(see instructions).

Schedule A (Form 990) 2023 Page **7**

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continue	ed)	Page I
	ion D-Distributions	,			Current Year
1 2	Amounts paid to supported organizations to accomplish a Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity		orted	1 2	
3	Administrative expenses paid to accomplish exempt purp	ooses of supported orga	nizations	3	
5	Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required-		VI)	5	
6 7 8	Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which		nonsive	7	
9	(provide details in Part VI). See instructions. Distributable amount for 2023 from Section C, line 6			8	
10	Line 8 amount divided by line 9 amount			10	
	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2023		(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2019				
b	Excess from 2020				
С	Excess from 2021				
d	Excess from 2022				
_	F f 0000				

Schedule A (Form 990) 2023

Excess from 2023

Schedule A (Form 990) 2023 Page 8

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part VI

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Return Reference - Identifier				Explanation			
SCHEDULE A, PART II,	Description	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
LINE 10 - OTHER INCOME	(1) OTHER INCOME	91,855	41,980	50,047	101,993	79,749	365,624
	Total	91,855	41,980	50,047	101,993	79,749	365,624

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

LINCOLN COMMUNITY FOUNDATION INC 47-0458128 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ✓ 501(c)() (enter number) organization 3 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule**. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Cat. No. 30613X

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization
LINCOLN COMMUNITY FOUNDATION INC

Employer identification number

47-0458128

raiti	Contributors (see instructions). Ose duplicate cop	bles of Part Fill additional space is i	leeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$ \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 712,500	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 2,159,978	Person

Name of organization
LINCOLN COMMUNITY FOUNDATION INC

Employer identification number

47-0458128

(a) Nic		(5)	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	PUBLICLY TRADED COMMON STOCK		
		\$ 7,042,140	12/18/2023
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	PUBLICLY TRADED COMMON STOCK		
		\$ 3,668,400	09/12/2023
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	PUBLICLY TRADED COMMON STOCK		
		\$ 2,159,978	08/18/2023
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ \ \\$ \ \	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Schedule B (Form 990) (2023)

Name of organization
LINCOLN COMMUNITY FOUNDATION INC
47-0458128

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed.						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		nship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	Transferee's name, address, a	(e) Transfer of gift and ZIP + 4 Relation	nship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_	Transferee's name, address, a	(e) Transfer of gift and ZIP + 4 Relatio	nship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Relationship of transferor to transferee

SCHEDULE D (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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number LINCOLN COMMUNITY FOUNDATION INC 47-0458128 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year O 21.273.984 2 Aggregate value of contributions to (during year) . 0 15.255.210 3 Aggregate value of grants from (during year) . . 0 4 Aggregate value at end of year 95.246.234 0 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ✓ Yes □ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ✓ Yes
☐ No Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included on line 2a . 2c Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. Assets included in Form 990, Part X

Schedule D (Form 990) 2023

Part	Organizations Maintaining	Collections of	Art, Historical	Treasures	, or Ot	her Similar Ass	sets (continued)
3	Using the organization's acquisition, collection items (check all that apply).		ner records, che	ck any of th	e follow	ving that make si	gnificant use of its
а	☐ Public exhibition		d 🗌 Loar	or exchang	e progr	am	
b	Scholarly research		e 🗌 Othe	r			
C	Preservation for future generations						
4	Provide a description of the organiza XIII.	tion's collections a	and explain how	they further	the org	anization's exem	pt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather						r □ Yes □ No
Part	IV Escrow and Custodial Arra	angements					
	Complete if the organization 990, Part X, line 21.	answered "Yes'	' on Form 990,	Part IV, line	e 9, or	reported an am	ount on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?		-				t Yes No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the following	table.			
						An	nount
С	Beginning balance				1c	:	
d	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amou					•	
	If "Yes," explain the arrangement in P	art XIII. Check here	e if the explanation	on has been	provide	ed in Part XIII .	<u> \square</u>
Par							
	Complete if the organization			1		(D = 1	1
	B : : ()	(a) Current year	(b) Prior year	(c) Two year		(d) Three years back	
1a	Beginning of year balance	87,178,679	108,118,59	+	45,657	83,371,868	
b	Contributions	1,316,478	3,411,943	10,0	15,119	2,510,781	2,227,192
С	Net investment earnings, gains, and losses	4.054.040	(47,400,004	104	00.407	0.005.500	40.770.000
		4,954,318	(17,463,931		00,407	6,005,589	
d	Grants or scholarships	1,469,104	5,387,937	3,0	00,051	3,263,268	2,802,780
е	Other expenditures for facilities and programs	0	166,954		500	625,536	557,697
f	Administrative expenses	1,366,655	1,333,033		42,041	1,153,777	_
g	End of year balance	90,613,716	87,178,679		18,591	86,845,657	+
2	Provide the estimated percentage of						00,071,000
a	Board designated or quasi-endowme	•	•	g, column (a	ijj ricia e		
b	Permanent endowment 0.00						
c	Term endowment 0.00 %						
•	The percentages on lines 2a, 2b, and	2c should equal 10	00%.				
3a	Are there endowment funds not in th			nat are held	and ad	ministered for the	e
	organization by:		· ·				Yes No
	(i) Unrelated organizations?						3a(i) 🗸
	(ii) Related organizations?						3a(ii) ✓
b	If "Yes" on line 3a(ii), are the related of	rganizations listed	as required on S	Schedule R?			3b
4	Describe in Part XIII the intended uses	s of the organization	n's endowment	funds.			
Part	, , ,						
	Complete if the organization	answered "Yes"	' on Form 990,	Part IV, line	e 11a. S	See Form 990,	Part X, line 10.
	Description of property	(a) Cost or oth (investment)	1 ' '	or other basis other)		Accumulated epreciation	(d) Book value
1a	Land		0	641,294			641,294
b	Buildings		0	6,324,156		4,121,979	2,202,177
С	Leasehold improvements		0	0		0	0
d	Equipment		0	352,076		327,525	24,551
е	Other		0	0		0	0
Total.	Add lines 1a through 1e. (Column (d) r	nust equal Form 99	90, Part X, line 10	Oc, column (l	B))	<u> </u>	2,868,022

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 Page 3

Part VII	Investments – Other Securities			·
	Complete if the organization answered "Yes" on For	rm 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(-,	od of valuation: of-year market value
(1) Financial	derivatives			
(2) Closely h	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	mn (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments – Program Related	000 Doubly lin	- 11- C F	000 David V lina 10
	Complete if the organization answered "Yes" on For			<u> </u>
	(a) Description of investment	(b) Book value	, ,	od of valuation: of-year market value
(1)				
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered "Yes" on For	rm 990, Part IV, lin	e 11d. See Form	990, Part X, line 15.
	(a) Description	•		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(1)			
	mn (b) must equal Form 990, Part X, line 15, col. (B))			
Part X	Other Liabilities Complete if the organization answered "Yes" on For	rm 990. Part IV. lin	e 11e or 11f. See	Form 990. Part X.
	line 25.	, , , , , , , , , , , , , , , , , , , ,		, ,
1.	(a) Description of liability			(b) Book value
(1) Federal in	ncome taxes			
(2) ANNUIT	IES PAYABLE			150,998
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	, , , , , ,			150,998
	r uncertain tax positions. In Part XIII, provide the text of the footn			
organization'	s liability for uncertain tax positions under FASB ASC 740. Check	k here if the text of the	e footnote has been p	provided in Part XIII .

Schedule D (Form 990) 2023

Part	XI Reconciliation of Revenue per Audited Financial Stateme			Return	
	Complete if the organization answered "Yes" on Form 990, I				
1	Total revenue, gains, and other support per audited financial statements			1	51,783,467
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1		
a	Net unrealized gains (losses) on investments	2a	13,270,219		
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	231,335	0-	40 504 554
e	Add lines 2a through 2d			2e	13,501,554
3	Subtract line 2e from line 1			3	38,281,913
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	40	125.062		
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4a 4b	135,263 18,245		
b	A 1.111			4c	153,508
5	Total revenue. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line</i>			5	38,435,421
Part					
ı art	Complete if the organization answered "Yes" on Form 990, I			, netun	•
1	Total expenses and losses per audited financial statements	arti	v, iiio iza.	1	27,828,900
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	27,020,300
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
C	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	229,574		
e	Add lines 2a through 2d			2e	229,574
3	Subtract line 2e from line 1			3	27,599,326
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	İ			,,.
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	135,263		
b	Other (Describe in Part XIII.)	4b	0	-	
С	,			-	
Ü	Add lines 4a and 4b			4c	135,263
5	Add lines 4a and 4b			4c 5	135,263 27,734,589
5					
5 Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	<u> </u>	5	27,734,589
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line
5 Part Provid 2; Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and tXI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	e <i>18.)</i> d 4; P		5 ; Part V, I	27,734,589 ine 4; Part X, line

Part XIII

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.

Return Reference - Identifier	Explanation	
SCHEDULE D, PART XI, LINE 2(D) - OTHER REVENUES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS RENTAL EXPENSES	(b) Amount 1,761 229,574
SCHEDULE D, PART XI, LINE 4(B) - OTHER REVENUE	(a) Description PARTNERSHIP INCOME	(b) Amount 18,245
SCHEDULE D, PART XII, LINE 2(D) - OTHER EXPENSES IN AUDITED FINANCIAL STATEMENTS NOT IN FORM 990	(a) Description RENTAL EXPENSES	(b) Amount 229,574

Part XIII

Supplemental Information. 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.

Return Reference - Identifier	Explanation
	ENDOWMENT FUNDS WILL BE USED TO FUND GRANTS TO NONPROFIT ORGANIZATIONS AND SCHOLARSHIPS TO DESERVING STUDENTS.
LINE 2 - LIABILITY FOR	MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740. BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS.

SCHEDULE I (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Employer identification number

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

LINCOLN COMMUNITY FOUNDATION	INC						47-0458128
Part I General Information	on Grants and	l Assistance				'	
1 Does the organization mainta			_			_	
the selection criteria used to a	•						· · · 🗹 Yes 🗌 No
2 Describe in Part IV the organi.	<u>'</u>						
Part II Grants and Other As Part IV, line 21, for any							wered "Yes" on Form 990
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ABENDMUSIK							
2000 D ST, LINCOLN, NE, 68502-1661	36-3094958	501(C)(3)	114,679				GENERAL PURPOSES
(2) ACLU OF NEBRASKA							
134 S 13TH ST STE 1010, LINCOLN, NE, 68508	23-7259984	501(C)(3)	50,756				GENERAL PURPOSES
(3) AFRICAN INLAND MISSION PO BOX 3611, PEACHTREE CITY, GA, 30269	11-1873101	501(C)(3)	18,000				GENERAL PURPOSES
(4) AGING PARTNERS							
600 S 70TH ST, BLDG 2, LINCOLN, NE, 68508-3611		GOVT	28,180				GENERAL PURPOSES
(5) AGS GAMMA CHAPTER FOUNDATION INC							
1972 W CAMINO REAL ST, COLUMBUS, NE, 68601	87-1423289	501(C)(3)	12,000				(SEE STATEMENT)
(6) AKSARBEN FOUNDATION							
2120 S 72ND ST STE 800, OMAHA, NE, 68124	47-0447496	501(C)(3)	7,500				GENERAL PURPOSES
(7) (SEE STATEMENT)	13-1788491	501(C)(3)	25,500				GENERAL PURPOSES
(8) (SEE STATEMENT)							
	53-0196605	501(C)(3)	27,700				GENERAL PURPOSES
(9) ANGELS THEATER COMPANY							
PO BOX 6703, LINCOLN, NE, 68506	47-0842314	501(C)(3)	5,664				GENERAL PURPOSES
(10) AOPA FOUNDATION							
421 AVIATION WAY, FREDERICK, MD, 21701	20-8817225	501(C)(3)	10,000				GENERAL PURPOSES
(11) ARC OF LINCOLN							
PO BOX 57002, LINCOLN, NE, 68505	47-0498629	501(C)(3)	26,071				GENERAL PURPOSES
(12) (SEE STATEMENT)							
2 Enter total number of section	501(c)(3) and go	vernment organiz	ations listed in the l	line 1 table			375
3 Enter total number of other or		_					0
For Paperwork Reduction Act Notice, s	see the Instruction	ns for Form 990.		С	at. No. 50055P		Schedule I (Form 990) 2023

Schedule I (Form 990) 2023

CHOLARSHIPS 222 494,500 V Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. TATEMENT)	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of noncash assista
Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.		recipients	cash grant	noncash assistance	FMV, appraisal, other)	
	CHOLARSHIPS	222	494,500			
	Supplemental Information, Pro	vide the information re	equired in Part L line	e 2: Part III. colum	n (b): and any other addition	onal information

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(12) ARTS FOR THE SOUL MUSIC & FINE ARTS 840 S 17TH ST, LINCOLN, NE, 68508	47-0391514	501(C)(3)	6,471				GENERAL PURPOSES
(13) ASHLAND AREA FOUNDATION 1442 SILVER ST, ASHLAND, NE, 68003	47-0773235	501(C)(3)	100,000				PEFORMING ARTS CAMPAIGN
(14) ASIAN COMMUNITY AND CULTURAL CENTER 144 N 44TH ST STE A, LINCOLN, NE, 68503	47-0807501	501(C)(3)	34,715				GENERAL PURPOSES
(15) ATLAS LINCOLN PO BOX 23181, LINCOLN, NE, 68542	82-4577579	501(C)(3)	23,244				GENERAL PURPOSES
(16) AUTISM CENTER OF NEBRASKA 6500 HOLDREGE ST, LINCOLN, NE, 68505	20-5178247	501(C)(3)	5,157				GENERAL PURPOSES
(17) AUTUMN HOUSE FOUNDATION 131 NW 14TH ST STE 5, LINCOLN, NE, 68528	45-4023265	501(C)(3)	5,272				GENERAL PURPOSES
(18) BARNABAS COMMUNITY PO BOX 80146, LINCOLN, NE, 68501	82-1591814	501(C)(3)	19,741				GENERAL PURPOSES
(19) BEATRICE EDUCATIONAL FOUNDATION INC 320 N 5TH ST, BEATRICE, NE, 68310-2957	47-0713910	501(C)(3)	7,521				SCHOLARSHIPS, GENERAL PURPOSES
(20) BELMONT COMMUNITY CENTER 3335 N 12TH ST, LINCOLN, NE, 68521-2106	47-0376893	501(C)(3)	10,546				GENERAL PURPOSES
(21) BEMIS CENTER FOR CONTEMPORARY ARTS 724 S 12TH ST, OMAHA, NE, 68102-3202	47-0653927	501(C)(3)	6,000				GENERAL PURPOSES
(22) BIG BROTHERS BIG SISTERS LINCOLN 2124 Y ST FLAT 210, LINCOLN, NE, 68503	47-0466144	501(C)(3)	42,526				GENERAL PURPOSES
(23) BIKELNK 245 N 3RD ST, LINCOLN, NE, 68508	81-1307723	501(C)(3)	5,518				GENERAL PURPOSES
(24) BISHOP MOORE CATHOLIC HIGH SCHOOL 3901 EDGEWATER DR, ORLANDO, FL, 32804	26-0879378	501(C)(3)	12,500				SCHOLARSHIPS, GENERAL PURPOSES
(25) BLESSED SACRAMENT CATHOLIC CHURCH 1720 LAKE ST, LINCOLN, NE, 68502-3736	47-0415802	501(C)(3)	83,872				COMMUNITY OF HOPE, GENERAL PURPOSES
(26) BOY SCOUTS OF AMERICA - CORNHUSKER COUNCIL PO BOX 269, WALTON, NE, 68461-0269	47-0378985	501(C)(3)	50,071				GENERAL PURPOSES
(27) BOYS AND GIRLS CLUB OF LINCOLN/LANCASTER COUNTY 620 N 48TH ST STE 101, LINCOLN, NE, 68504	20-8677226	501(C)(3)	21,473				GENERAL PURPOSES
(28) BOYS TOWN NATIONAL HEADQUARTERS BOYS TOWN NATIONAL HEADQUARTERS, PO BOX 8000, BOYS TOWN, NE, 68010-8000	47-0376606	501(C)(3)	21,200				GENERAL PURPOSES
(29) BRANCHED OAK OBSERVATORY 14300 NW 98TH ST, RAYMOND, NE, 68428	47-4467998	501(C)(3)	5,086				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(30) BRAVE ANIMAL RESCUE PO BOX 21864, LINCOLN, NE, 68542	85-1768077	501(C)(3)	8,862				GENERAL PURPOSES
(31) BRAVEBE CHILD ADVOCACY CENTER 5025 GARLAND ST, LINCOLN, NE, 68504- 2904	47-0793765	501(C)(3)	92,572				GENERAL PURPOSES
(32) BRIDGE BEHAVIORAL HEALTH 721 K ST, LINCOLN, NE, 68508-2949	47-0656110	501(C)(3)	24,826				GENERAL PURPOSES
(33) BRIDGES TO HOPE 3107 S 6TH ST STE 107, LINCOLN, NE, 68502-4351	26-4471102	501(C)(3)	68,136				TINY VILLAGE, GENERAL PURPOSES
(34) BRIGHT LIGHTS 5561 S 48TH ST STE 220, LINCOLN, NE, 68516-4109	47-0708499	501(C)(3)	21,097				SCHOLARSHIPS, GENERAL PURPOSES
(35) BRYAN FOUNDATION 1600 S 48TH ST, LINCOLN, NE, 68506-1283	23-7005720	501(C)(3)	41,558				GENERAL PURPOSES AND SCHOLARSHIPS
(36) CAMP SONSHINE 13440 S 25TH ST, ROCA, NE, 68430-4112	87-0785556	501(C)(3)	11,000				GENERAL PURPOSES
(37) CAPITAL HUMANE SOCIETY 2320 PARK BLVD, LINCOLN, NE, 68502-3327	47-0376622	501(C)(3)	167,410				GENERAL PURPOSES
(38) CAPITOL CITY CHRISTIAN CHURCH 7800 HOLDREGE ST, LINCOLN, NE, 68505	47-0535364	501(C)(3)	7,200				GENERAL PURPOSES
(39) CASA FOR LANCASTER COUNTY 1141 H ST STE C, LINCOLN, NE, 68508-3256	47-0833799	501(C)(3)	17,373				GENERAL PURPOSES
(40) CAT HOUSE 3633 O ST, LINCOLN, NE, 68510	47-0823296	501(C)(3)	46,096				GENERAL PURPOSES
(41) CATHEDRAL OF THE RISEN CHRIST CHURCH 3500 SHERIDAN BLVD, LINCOLN, NE, 68506- 6127	47-0438599	501(C)(3)	11,135				GENERAL PURPOSES
(42) CATHOLIC DIOCESE OF LINCOLN 3400 SHERIDAN BLVD, LINCOLN, NE, 68506- 6125	47-0825444	501(C)(3)	5,525				GENERAL PURPOSES
(43) CATHOLIC DIOCESE OF SALT LAKE CITY 27 C ST E, SALT LAKE CITY, UT, 84103	51-0223171	501(C)(3)	30,000				GENERAL PURPOSES
(44) CATHOLIC SOCIAL SERVICES 2241 O ST, LINCOLN, NE, 68510-1122	47-0751554	501(C)(3)	16,716				GENERAL PURPOSES
(45) CAUSE COLLECTIVE 1645 N ST STE A, LINCOLN, NE, 68508-1824	36-3470618	501(C)(3)	41,740				NETWORK FOR GOOD, GENERAL PURPOSES
(46) CEDARS 6601 PIONEERS BLVD STE 2, LINCOLN, NE, 68506-5260	47-6024881	501(C)(3)	463,215				GENERAL PURPOSES
(47) CEDARS YOUTH SERVICES 6601 PIONEERS BLVD STE 1, LINCOLN, NE, 68506-5260	47-0551975	501(C)(3)	30,924				GENERAL PURPOSES
(48) CENTENNIAL SCHOOL FOUNDATION PO BOX 187, UTICA, NE, 68456-0187	47-0738621	501(C)(3)	11,335				SCHOLARSHIPS, GENERAL PURPOSES
(49) CENTER FOR LEGAL IMMIGRATION ASSISTANCE 3047 N 70TH ST, LINCOLN, NE, 68507-2102	27-2661395	501(C)(3)	31,775				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(50) CENTER FOR PEOPLE CENTER FOR PEOPLE, 3901 N 27TH ST UNIT 1, LINCOLN, NE, 68521-4177	06-1669552	501(C)(3)	425,736				GENERAL PURPOSES
(51) CENTER FOR RURAL AFFAIRS 145 MAIN ST, PO BOX 136, LYONS, NE, 68038-0136	47-0553823	501(C)(3)	55,569				REAP, GENERAL PURPOSES
(52) CENTERPOINTE 2022 S 11TH ST, LINCOLN, NE, 68502	47-0550702	501(C)(3)	98,175				GENERAL PURPOSES
(53) CENTRAL PRESBYTERIAN CHURCH 593 PARK AVE, NEW YORK, NY, 10065	13-1628154	501(C)(3)	20,000				GENERAL PURPOSES
(54) CHILDREN'S HOME PROJECT PO BOX 8066, CHANDLER, AZ, 85246	46-1065421	501(C)(3)	11,625				GENERAL PURPOSES
(55) CHILDREN'S NEBRASKA FOUNDATION ATTN.: JANE PHILLIPS, DIRECTOR OF DEVELOPMENT, 8404 INDIAN HILLS DR STE 650, OMAHA, NE, 68114	47-6105603	501(C)(3)	52,353				YOUTH BUILDING, GENERAL PURPOSES
(56) CHRIST LINCOLN A LUTHERAN MINISTRY 4325 SUMNER ST, LINCOLN, NE, 68506- 1165	47-0519511	501(C)(3)	106,555				GENERAL PURPOSES
(57) CHRIST LINCOLN SCHOOLS 4325 SUMNER ST, LINCOLN, NE, 68506- 1165	47-0519511	501(C)(3)	101,000				SCHOLARSHIPS, GENERAL PURPOSES
(58) CHRIST PLACE CHURCH 1111 OLD CHENEY RD, LINCOLN, NE, 68512	47-0601645	501(C)(3)	32,500				GENERAL PURPOSES
(59) CHRIST UNITED METHODIST CHURCH 4530 A ST, LINCOLN, NE, 68510-4818	47-0402878	501(C)(3)	9,100				GENERAL PURPOSES
(60) CHURCH OF THE HOLY TRINITY 6001 A ST, LINCOLN, NE, 68510-5006		501(C)(3)	15,250				GENERAL PURPOSES
(61) CHURCH OF THE RESURRECTION 13720 ROE BLVD, OVERLAND PARK, KS, 66224	48-1107898	501(C)(3)	5,612				GENERAL PURPOSES
(62) CITADEL FOUNDATION 171 MOULTRIE ST, CHARLESTON, SC, 29409	57-6020493	501(C)(3)	7,000				SCHOLARSHIPS, GENERAL PURPOSES
(63) CITY IMPACT 1035 N 33RD ST, LINCOLN, NE, 68503-1909	47-0800906	501(C)(3)	32,300				GENERAL PURPOSES
(64) CITY OF LINCOLN - PARKS & RECREATION DEPARTMENT 3131 O ST STE 300, LINCOLN, NE, 68510	47-6006256	501(C)(3)	17,416				GENERAL PURPOSES
(65) CITY OF LINCOLN - POLICE DEPARTMENT 575 S 10TH ST, LINCOLN, NE, 68508-2810		GOVT	7,318				GENERAL PURPOSES
(66) CITY OF LINCOLN - URBAN DEVELOPMENT 555 S 10TH ST STE 205, LINCOLN, NE, 68508		GOVT	30,750				GENERAL PURPOSES
(67) CITYLIGHT LINCOLN CHURCH 2820 O ST, LINCOLN, NE, 68510		501(C)(3)	5,468				GENERAL PURPOSES
(68) CIVIC NEBRASKA 530 S 13TH ST STE 100, LINCOLN, NE, 68508	27-2204391	501(C)(3)	46,383				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(69) CLINIC WITH A HEART 1701 S 17TH ST STE 4G, LINCOLN, NE, 68502-2641	20-2850139	501(C)(3)	143,113				GENERAL PURPOSES
(70) COLORADO CHRISTIAN UNIVERSITY SERVICE CENTRAL, 8787 W ALAMEDA AVE, LAKEWOOD, CO, 80226	84-0442429	501(C)(3)	25,000				PRESIDENTS WEEKEND
(71) COMMUNITY ACTION PARTNERSHIP OF LANCASTER & SAUNDERS CNTYS 210 O ST, LINCOLN, NE, 68508-2322	47-0491162	501(C)(3)	210,646				GENERAL PURPOSES
(72) COMMUNITY CROPS 501 S 7TH ST, LINCOLN, NE, 68508	47-0376584	501(C)(3)	24,939				GENERAL PURPOSES
(73) COMPASSION INTERNATIONAL INCORPORATED SPONSORSHIP PROCESSING, 12290 VOYAGER PKWY, COLORADO SPRINGS, CO, 80921-3694	36-2423707	501(C)(3)	10,891				GENERAL PURPOSES
(74) CONCORDIA UNIVERSITY 800 N COLUMBIA AVE, SEWARD, NE, 68434- 1500	47-0378777	501(C)(3)	12,700				ATHLETICS, SCHOLARSHIPS
(75) CRU ATTN: CONTRIBUTIONS, PO BOX 628222, ORLANDO, FL, 32862-8222	95-6006173	501(C)(3)	9,900				GENERAL PURPOSES
(76) CULTURAL CENTERS OF LINCOLN 2617 Y ST, LINCOLN, NE, 68503	86-1250651	501(C)(3)	20,357				GENERAL PURPOSES
(77) DESERT HILLS BAPTIST CHURCH 4401 S NELLIS BLVD, LAS VEGAS, NV, 89121-3101		501(C)(3)	20,000				GENERAL PURPOSES
(78) DIMENSIONS EDUCATION PROGRAMS DIMENSIONS EDUCATION PROGRAMS, 7700 A ST, LINCOLN, NE, 68510	31-1511625	501(C)(3)	40,547				EARLY CHILDHOOD EDUCATION
(79) DISTRUPTING TRAFFICK 220 S 17TH ST STE 20, LINCOLN, NE, 68508	82-3250041	501(C)(3)	5,252				GENERAL PURPOSES
(80) DOANE UNIVERSITY-CRETE 1014 BOSWELL AVE, CRETE, NE, 68333- 2426	47-0377991	501(C)(3)	66,341				CAMPAIGN, SCHOLARSHIPS
(81) DOCTORS WITHOUT BORDERS USA PO BOX 5030, HAGERSTOWN, MD, 21741- 5030	13-3433452	501(C)(3)	112,362				GENERAL PURPOSES
(82) DOLLY'S LEGACY ANIMAL RESCUE PO BOX 23122, LINCOLN, NE, 68542-3122	47-1262338	501(C)(3)	8,215				GENERAL PURPOSES
(83) DOMESTIPUPS 141 HARWOOD CT, LINCOLN, NE, 68502	47-0836148	501(C)(3)	28,493				GENERAL PURPOSES
(84) DR. SUSAN LA FLESCHE PICOTTE CENTER PO BOX 36, WALTHILL, NE, 68067	47-0746797	501(C)(3)	115,619				BUILDING RENOVATION
(85) DRESSAGE FOUNDATION 1314 O ST STE 305, LINCOLN, NE, 68508- 1517	36-3670953	501(C)(3)	19,529				GENERAL PURPOSES
(86) DUCKS UNLIMITED 1 WATERFOWL WY, MEMPHIS, TN, 38120- 2351	13-5643799	501(C)(3)	10,000				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(87) EAST BUTLER PUBLIC SCHOOLS FOUNDATION 212 S MADISON ST, PO BOX 36, BRAINARD, NE, 68626-0036	36-3431235	501(C)(3)	34,004				SCHOLARSHIPS
(88) EASTMONT FOUNDATION 6315 O ST, LINCOLN, NE, 68510-2200	91-1767080	501(C)(3)	62,062				GENERAL PURPOSES
(89) ECHO COLLECTIVE 2124 Y ST STE 131, LINCOLN, NE, 68503- 2407	85-3689236	501(C)(3)	17,863				GENERAL PURPOSES
(90) EDUCARE OF LINCOLN 3435 N 14TH ST, LINCOLN, NE, 68521-2126	46-0568146	501(C)(3)	35,695				GENERAL PURPOSES
(91) EL CENTRO DE LAS AMERICAS 210 O ST, LINCOLN, NE, 68508-2322	47-0658284	501(C)(3)	24,288				GENERAL PURPOSES
(92) EMMAUS INSTITUTE FOR BIBLICAL STUDIES 3601 CALVERT ST STE 23, LINCOLN, NE, 68506-5797	83-1313821	501(C)(3)	5,500				GENERAL PURPOSES
(93) EPONA HORSE RESCUE 20000 SW 114TH ST, CRETE, NE, 68333- 3300	20-1398014	501(C)(3)	10,045				GENERAL PURPOSES
(94) EYE CARE FOR KIDS 2630 E MOHAWK LN SUITE 136, PHOENIX, AZ, 85050	81-0788245	501(C)(3)	25,000				GENERAL PURPOSES
(95) FAITH BIBLE CHURCH 6201 S 84TH ST, LINCOLN, NE, 68516-3812		501(C)(3)	24,000				GENERAL PURPOSES
(96) FAITH LUTHERAN CHURCH (LINCOLN, NE) 8701 ADAMS ST, LINCOLN, NE, 68507		501(C)(3)	5,200				GENERAL PURPOSES
(97) FAITH OF OUR FATHERS LUTHERAN CHURCH 15580 E ST, ROCA, NE, 68430-4701		501(C)(3)	12,000				GENERAL PURPOSES
(98) FELLOWSHIP OF CHRISTIAN ATHLETES 5801 S 58TH ST STE C, LINCOLN, NE, 68516	44-0610626	501(C)(3)	33,493				GENERAL PURPOSES
(99) FIDELITY CHARITABLE GIFT FUND GIVING ACCOUNTS, PO BOX 770001, CINCINNATI, OH, 45277-0053	11-0303001	501(C)(3)	216,213				FUND TRANSFER
(100) FIRST FREE CHURCH 3280 S 84TH ST, LINCOLN, NE, 68506	47-0492345	501(C)(3)	39,300				GENERAL PURPOSES
(101) FIRST LUTHERAN CHURCH (LINCOLN, NE) 1551 S 70TH ST, LINCOLN, NE, 68506	47-0464447	501(C)(3)	17,960				GENERAL PURPOSES
(102) FIRST MENNONITE CHURCH (BEATRICE, NE) 6714 W STATE HWY 4, BEATRICE, NE, 68310		501(C)(3)	27,700				GENERAL PURPOSES
(103) FIRST PLYMOUTH CONGREGATIONAL CHURCH 2000 D ST, LINCOLN, NE, 68502-1661	47-0376589	501(C)(3)	143,892				BUILDING, ORGAN, MUSIC, MEDICAL DEBT, GENERAL
(104) FIRST PRESBYTERIAN CHURCH (LINCOLN, NE) 840 S 17TH ST, LINCOLN, NE, 68508-3499		501(C)(3)	13,260				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(105) FIRST STREET BIBLE CHURCH 100 W F ST, LINCOLN, NE, 68508-2944		501(C)(3)	48,000				GENERAL PURPOSES
(106) FIRST UNITED METHODIST CHURCH (COLUMBUS, NE) 2710 14TH ST, COLUMBUS, NE, 68601		501(C)(3)	11,600				GENERAL PURPOSES
(107) FIRST UNITED METHODIST CHURCH (LINCOLN, NE) 2723 N 50TH ST, LINCOLN, NE, 68504-2765		501(C)(3)	17,121				GENERAL PURPOSES
(108) FIRST UNITED METHODIST CHURCH (WAVERLY, NE) 14410 FOLKESTONE ST, WAVERLY, NE, 68462-1539		501(C)(3)	8,550				GENERAL PURPOSES
(109) FLATWATER FREE PRESS 151 N 8TH ST STE 500, LINCOLN, NE, 68508	86-3968316	501(C)(3)	20,555				GENERAL PURPOSES
(110) FLATWATER SHAKESPEARE COMPANY PO BOX 84935, LINCOLN, NE, 68501-4935	20-1712203	501(C)(3)	12,764				GENERAL PURPOSES
(111) FOOD BANK FOR THE HEARTLAND 10525 J ST, OMAHA, NE, 68127-1021	47-0637701	501(C)(3)	5,150				GENERAL PURPOSES
(112) FOOD BANK OF LINCOLN 1221 KINGBIRD RD, LINCOLN, NE, 68521	47-0640293	501(C)(3)	475,503				GENERAL PURPOSES
(113) FOOD FORT 2124 Y ST FLAT 130, LINCOLN, NE, 68503	81-4736864	501(C)(3)	26,309				GENERAL PURPOSES
(114) FOSTER CARE CLOSET OF NEBRASKA 643 S 25TH ST STE 8, LINCOLN, NE, 68510- 3060	26-0595115	501(C)(3)	39,619				GENERAL PURPOSES
(115) FOUNDATION FOR LINCOLN CITY LIBRARIES 136 S 14TH ST, LINCOLN, NE, 68508-1801	47-6032744	501(C)(3)	44,145				GENERAL PURPOSES
(116) FOUNDATION FOR LINCOLN PUBLIC SCHOOLS PO BOX 82889, LINCOLN, NE, 68501-2889	36-3490560	501(C)(3)	116,802				ATHLETICS, TRANSPORTATION, MEMORIAL SCHOLARSHIPS
(117) FOUNDRY COMMUNITY FOUNDRY COMMUNITY, 211 N 14TH ST, LINCOLN, NE, 68508-1616	47-1812040	501(C)(3)	9,851				GENERAL PURPOSES
(118) FRESH START 6433 HAVELOCK AVE, LINCOLN, NE, 68507- 1332	36-3785810	501(C)(3)	57,331				GENERAL PURPOSES
(119) FRIEND CHRISTIAN ASSEMBLY FRIEND CHRISTIAN ASSEMBLY, 4909 E BUCKEYE RD, MADISON, WI, 53716-1864	36-4415111	501(C)(3)	50,000				GENERAL PURPOSES
(120) FRIENDS OF LIED PO BOX 880151, LINCOLN, NE, 68588-0151	47-0727188	501(C)(3)	89,240				GENERAL PURPOSES
(121) FRIENDS OF OPERA-UNIVERSITY OF NEBRASKA-LINCOLN 1001 HIGH PLAINS RD, LINCOLN, NE, 68512	47-0842288	501(C)(3)	11,250				GENERAL PURPOSES
(122) FRIENDS OF THE MARY RIEPMA ROSS MEDIA ARTS CENTER PO BOX 880253, LINCOLN, NE, 68588-0253	47-0638642	501(C)(3)	8,855				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(123) FRIENDS OF THE UNIVERSITY OF NEBRASKA STATE MUSEUM UNIVERSITY OF NEBRASKA-LINCOLN, 307 MORRILL HALL, LINCOLN, NE, 68588	47-0658163	501(C)(3)	10,584				GENERAL PURPOSES
(124) FRIENDS OF WILDERNESS PARK 1919 PROSPECT ST, LINCOLN, NE, 68502	47-0811785	501(C)(3)	6,509				GENERAL PURPOSES
(125) FRIENDSHIP HOME PO BOX 85358, LINCOLN, NE, 68501-5358	47-0619855	501(C)(3)	173,984				GENERAL PURPOSES
(126) FRONT PORCH INVESTMENTS 1120 S 101ST ST STE 320, OMAHA, NE, 68124	87-1820951	501(C)(3)	10,000				HOUSING
(127) GIRL SCOUTS SPIRIT OF NEBRASKA 8230 BEECHWOOD DR, LINCOLN, NE, 68510-2616	47-0432299	501(C)(3)	28,847				GENERAL PURPOSES
(128) GIRLS ON THE RUN OF NEBRASKA 4600 VALLEY RD STE 321, LINCOLN, NE, 68510-4844	20-0491131	501(C)(3)	5,161				GENERAL PURPOSES
(129) GLOBAL SCHOLARS PO BOX 12147, OVERLAND PARK, KS, 66282	56-1627401	501(C)(3)	7,600				GENERAL PURPOSES
(130) GLOBAL SERVE INTERNATIONAL 2102 SW 47TH ST, CAPE CORAL, FL, 33914	82-1585100	501(C)(3)	6,000				GENERAL PURPOSES
(131) GOOD NEIGHBOR COMMUNITY CENTER 2617 Y ST, LINCOLN, NE, 68503-1750	20-0391739	501(C)(3)	44,394				GENERAL PURPOSES
(132) GRACE CENTRAL CHURCH 344 N 115TH ST, OMAHA, NE, 68154	23-7366967	501(C)(3)	20,000				GENERAL PURPOSES
(133) GREATER LINCOLN CHAMBER FOUNDATION 1128 LINCOLN MALL STE 100, LINCOLN, NE, 68508-2878	31-1597948	501(C)(3)	41,531				WOMENS CONFERENCE
(134) HABITAT FOR HUMANITY LINCOLN 4615 ORCHARD ST, LINCOLN, NE, 68503	47-0714576	501(C)(3)	147,514				AFFORDABLE HOUSING
(135) HARBERT COMMUNITY CHURCH PO BOX 197, HARBERT, MI, 49115	23-7097779	501(C)(3)	17,000				GENERAL PURPOSES
(136) HARBOR MINISTRIES PO BOX 21984, LINCOLN, NE, 68542-1984	20-4894998	501(C)(3)	42,000				GENERAL PURPOSES
(137) HASTINGS COLLEGE FOUNDATION 1001 N 6TH AVE, HASTINGS, NE, 68901	51-0247972	501(C)(3)	27,250				TURNAROUND PROGRAM, SCHOLARSHIPS
(138) HAWAI'I COMMUNITY FOUNDATION 827 FORT STREET MALL, HONOLULU, HI, 96813	99-0261283	501(C)(3)	6,100				GENERAL PURPOSES
(139) HEALING HEART THERAPY DOGS 15855 BOBWHITE TRL, CRETE, NE, 68333	86-1126775	501(C)(3)	6,029				GENERAL PURPOSES
(140) HEARTLAND CANCER FOUNDATION PO BOX 5203, LINCOLN, NE, 68505	20-5952202	501(C)(3)	6,098				GENERAL PURPOSES
(141) HEARTS UNITED FOR ANIMALS PO BOX 286, AUBURN, NE, 68305-0286	47-0773858	501(C)(3)	27,604				GENERAL PURPOSES
(142) HICKMAN PRESBYTERIAN CHURCH PO BOX 468, HICKMAN, NE, 68372-0468		501(C)(3)	5,700				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(143) HISTORY NEBRASKA FOUNDATION PO BOX 81883, LINCOLN, NE, 68501	84-4052258	501(C)(3)	6,406				GENERAL PURPOSES
(144) HOPE COMMUNITY CHURCH 4700 S FOLSOM ST, LINCOLN, NE, 68523- 9331		501(C)(3)	18,000				GENERAL PURPOSES
(145) HOPESPOKE 2444 O ST, LINCOLN, NE, 68510-1125	47-0398819	501(C)(3)	59,732				GENERAL PURPOSES
(146) HORIZONS COMMUNITY CHURCH 3200 GRAINGER PARKWAY, LINCOLN, NE, 68516		501(C)(3)	8,250				GENERAL PURPOSES
(147) HUB 1037 S 12TH ST, LINCOLN, NE, 68508-3529	20-8008617	501(C)(3)	14,878				GENERAL PURPOSES
(148) HUMANITIES NEBRASKA 215 CENTENNIAL MALL S STE 330, LINCOLN, NE, 68508-1836	23-7359778	501(C)(3)	34,033				GENERAL PURPOSES
(149) IN TOUCH MINISTRIES INC. PO BOX 7900, ATLANTA, GA, 30357-0900	58-1495310	501(C)(3)	15,000				GENERAL PURPOSES
(150) INDIAN CENTER 1100 MILITARY RD, LINCOLN, NE, 68508- 1089	47-0531887	501(C)(3)	11,900				GENERAL PURPOSES
(151) I'VE GOT A NAME PO BOX 6181, LINCOLN, NE, 68506	36-4694120	501(C)(3)	57,168				GENERAL PURPOSES
(152) JACOB'S WELL PO BOX 82852, LINCOLN, NE, 68501-2852	26-4503142	501(C)(3)	20,045				GENERAL PURPOSES
(153) JAZZ IN JUNE JAZZ IN JUNE, 151 PREM S. PAUL RESEARCH CENTER, 2200 VINE ST, LINCOLN, NE, 68583-0861	47-0049123	501(C)(3)	21,077				GENERAL PURPOSES
(154) JEWISH FEDERATION OF LINCOLN PO BOX 67218, LINCOLN, NE, 68508	47-0388144	501(C)(3)	28,783				GENERAL PURPOSES
(155) JOSHUA COLLINGSWORTH MEMORIAL FOUNDATION 8445 EXECUTIVE WOODS DR, LINCOLN, NE, 68512	26-3091147	501(C)(3)	12,583				GENERAL PURPOSES
(156) JULLIA ROSE FOUNDATION 17880 KNOTTING HILLS DR, LINCOLN, NE, 68527	81-4899149	501(C)(3)	5,413				GENERAL PURPOSES
(157) JUNIOR ACHIEVEMENT OF LINCOLN 300 S 68TH ST PL STE 110, LINCOLN, NE, 68510-2516	47-0535692	501(C)(3)	41,302				GENERAL PURPOSES
(158) JUNIPER REFUGE PO BOX 21805, LINCOLN, NE, 68542	81-5435531	501(C)(3)	13,494				GENERAL PURPOSES
(159) JUSTICE IN ACTION 1309 R ST, LINCOLN, NE, 68508	88-2109882	501(C)(3)	14,510				GENERAL PURPOSES
(160) KNIGHTS BAND BOOSTERS PO BOX 6566, LINCOLN, NE, 68506-0566	47-2405379	501(C)(3)	7,300				GENERAL PURPOSES
(161) KZUM RADIO 89.3 / SUNRISE COMMUNICATIONS 3534 S 48TH ST STE 6, LINCOLN, NE, 68506- 6425	23-7267850	501(C)(3)	60,875				GENERAL PURPOSES

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(162) LANCASTER COUNTY 555 S 10TH ST RM 100, LINCOLN, NE, 68508-2803		GOVT	25,000				CONVENTION CENTER
(163) LANCASTER YOUTH SOFTBALL ASSOCIATION PO BOX 5744, LINCOLN, NE, 68505-0744	36-3313153	501(C)(3)	11,855				GENERAL PURPOSES
(164) LARKSONG WRITERS PLACE 6421 EASTSHORE DR, LINCOLN, NE, 68516	85-3987366	501(C)(3)	7,357				GENERAL PURPOSES
(165) LAUNCH GLOBAL PO BOX 679913, DALLAS, TX, 75267-9913	20-3826376	501(C)(3)	15,000				GENERAL PURPOSES
(166) LAUNCH LEADERSHIP 211 N 14TH ST, LINCOLN, NE, 68508-1616	46-2037620	501(C)(3)	52,921				GENERAL PURPOSES
(167) LEADERSHIP LINCOLN 2124 Y ST STE 107, LINCOLN, NE, 68503	47-0685407	501(C)(3)	13,154				GENERAL PURPOSES
(168) LEAGUE OF HUMAN DIGNITY 1701 P ST, LINCOLN, NE, 68508-1799	23-7180481	501(C)(3)	9,938				GENERAL PURPOSES
(169) LEGAL AID OF NEBRASKA 947 O ST STE 301, LINCOLN, NE, 68508	47-0483506	501(C)(3)	16,169				GENERAL PURPOSES
(170) LHS DRAMA BOOSTERS 2229 J ST, LINCOLN, NE, 68510	83-2906756	501(C)(3)	5,890				GENERAL PURPOSES
(171) LIGHTHOUSE 2601 N ST, LINCOLN, NE, 68510-1334	36-3656310	501(C)(3)	84,721				GENERAL PURPOSES
(172) LINCOLN ANIMAL AMBASSADORS PO BOX 67072, LINCOLN, NE, 68506-7072	27-3018037	501(C)(3)	9,946				GENERAL PURPOSES
(173) LINCOLN ARTS COUNCIL 211 N 14TH ST, LINCOLN, NE, 68508	47-6046691	501(C)(3)	30,754				GENERAL PURPOSES
(174) LINCOLN BEREAN CHURCH LINCOLN BEREAN CHURCH, 6400 S 70TH ST, LINCOLN, NE, 68516-3763	47-0677716	501(C)(3)	150,550				GENERAL PURPOSES
(175) LINCOLN BIKE KITCHEN 1635 S 1ST ST STE 1, LINCOLN, NE, 68502- 1909	45-5369537	501(C)(3)	25,339				GENERAL PURPOSES
(176) LINCOLN BOTANICAL GARDEN 2416 SEWELL ST, LINCOLN, NE, 68502	82-5337828	501(C)(3)	13,372				GENERAL PURPOSES
(177) LINCOLN CALLING 211 N 14TH ST, LINCOLN, NE, 68508	47-6046691	501(C)(3)	6,459				GENERAL PURPOSES
(178) LINCOLN CHILDREN'S MUSEUM 1420 P ST, LINCOLN, NE, 68508-1635	47-0716636	501(C)(3)	27,013				GENERAL PURPOSES
(179) LINCOLN CHILDREN'S ZOO 1222 S 27TH ST, LINCOLN, NE, 68502-1832	47-0482255	501(C)(3)	136,174				ZOO LIGHTS, MEMORIALS, GENERAL PURPOSES
(180) LINCOLN CHRISTIAN SCHOOL FOUNDATION 5801 S 84TH ST, LINCOLN, NE, 68516-3804	47-0706907	501(C)(3)	6,500				SCHOLARSHIPS, GENERAL PURPOSES
(181) LINCOLN COMMUNITY PLAYHOUSE PO BOX 6426, LINCOLN, NE, 68506-0426	47-0355388	501(C)(3)	66,483				GENERAL PURPOSES
(182) LINCOLN COUNCIL ST. VINCENT DE PAUL PO BOX 30145, LINCOLN, NE, 68503-0145	20-8997157	501(C)(3)	23,000				GENERAL PURPOSES
(183) LINCOLN EAST BAND BOOSTERS 1000 S 70TH ST, LINCOLN, NE, 68510	47-0792052	501(C)(3)	7,395			_	GENERAL PURPOSES

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(184) LINCOLN FRIENDS OF CHAMBER MUSIC PO BOX 82882, LINCOLN, NE, 68501	36-3348024	501(C)(3)	10,023				GENERAL PURPOSES
(185) LINCOLN HOUSING AUTHORITY 5700 R ST, LINCOLN, NE, 68505	47-6007170	501(C)(3)	110,000				AFFORDABLE HOUSING
(186) LINCOLN HOUSING CHARITIES 5700 R ST, LINCOLN, NE, 68505	30-0094633	501(C)(3)	11,521				GENERAL PURPOSES
(187) LINCOLN INDIAN CENTER 1100 MILITARY RD, LINCOLN, NE, 68508- 1089	47-0531887	501(C)(3)	5,293				GENERAL PURPOSES
(188) LINCOLN LITERACY 1023 LINCOLN MALL STE 104, LINCOLN, NE, 68508	47-0655582	501(C)(3)	184,653				CAPITAL CAMPAIGN, GENERAL PURPOSES
(189) LINCOLN LITTLES 215 CENTENNIAL MALL S, LINCOLN, NE, 68508	47-0458128	501(C)(3)	11,221				EARLY CHILDHOOD EDUCATION
(190) LINCOLN LUTHERAN JR./SR. HIGH SCHOOL 1100 N 56TH ST, LINCOLN, NE, 68504-3251	47-0468752	501(C)(3)	36,000				SCHOLARSHIPS, GENERAL PURPOSES
(191) LINCOLN MEETING OF THE SOCIETY OF FRIENDS 3319 S 46TH ST, LINCOLN, NE, 68506		501(C)(3)	9,324				GENERAL PURPOSES
(192) LINCOLN MUNICIPAL BAND ASSOCIATION 315 S 9TH ST STE 110, LINCOLN, NE, 68508- 2283	47-0637021	501(C)(3)	12,431				GENERAL PURPOSES
(193) LINCOLN MUSIC TEACHERS ASSOCIATION 7567 CRYSTAL CT, LINCOLN, NE, 68506	47-0681623	501(C)(3)	15,274				GENERAL PURPOSES
(194) LINCOLN PARKS FOUNDATION 3131 O ST STE 300, LINCOLN, NE, 68510	36-3853746	501(C)(3)	151,645				TOWER SQUARE, VETERANS GARDEN, PARKS, AIR PARK
(195) LINCOLN ROTARY CLUB 14 FOUNDATION PO BOX 83843, LINCOLN, NE, 68501-3843	91-1767748	501(C)(3)	9,427				GENERAL PURPOSES
(196) LINCOLN STAR CITY LIONS FOUNDATION 4907 WOODHAVEN DR, LINCOLN, NE, 68516	87-1785169	501(C)(3)	5,386				GENERAL PURPOSES
(197) LINCOLN YOUNG LIFE PO BOX 6442, LINCOLN, NE, 68506-0442	84-0385934	501(C)(3)	7,087				GENERAL PURPOSES
(198) LINCOLN'S SYMPHONY ORCHESTRA 233 S 13TH ST STE 1702, LINCOLN, NE, 68508-2003	47-0773445	501(C)(3)	109,997				GENERAL PURPOSES
(199) LINKED2LITERACY 211 N 14TH, LINCOLN, NE, 68508	92-0620121	501(C)(3)	17,988				GENERAL PURPOSES
(200) LITTLE TREASURE MINISTRIES 6039 CYPRESS GARDENS BLVD #514, WINTER HAVEN, FL, 33884	84-4654284	501(C)(3)	12,000				GENERAL PURPOSES
(201) LIZ SHEA-MCCOY FOUNDATION FOR THE ARTS 2700 SHERIDAN BLVD, LINCOLN, NE, 68502- 4238	87-4703774	501(C)(3)	56,909				GENERAL PURPOSES

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(202) LOVE JUSTICE INTERNATIONAL PO BOX 67195, LINCOLN, NE, 68506	71-0982808	501(C)(3)	12,900				GENERAL PURPOSES
(203) LUTHERAN EDUCATION FOUNDATION 1100 N 56TH ST, LINCOLN, NE, 68504	41-2032088	501(C)(3)	188,000				EMBARK CAMPAIGN
(204) LUTHERAN FAMILY SERVICES OF NEBRASKA 2301 O ST, LINCOLN, NE, 68510	23-7267972	501(C)(3)	28,235				GENERAL PURPOSES
(205) LUTHERAN HOUR MINISTRIES 660 MASON RIDGE CENTER DR, ST. LOUIS, MO, 63141	41-1568278	501(C)(3)	7,500				GENERAL PURPOSES
(206) LUX CENTER FOR THE ARTS 2601 N 48TH ST, LINCOLN, NE, 68504-3632	47-0629528	501(C)(3)	32,290				GENERAL PURPOSES
(207) MADONNA FOUNDATION 5401 SOUTH ST, LINCOLN, NE, 68506-2150	23-7159940	501(C)(3)	714,570				GENERAL PURPOSES
(208) MAKE-A-WISH NEBRASKA - LINCOLN OFFICE 8033 S 15TH ST STE B, LINCOLN, NE, 68512	47-0671096	501(C)(3)	23,941				GENERAL PURPOSES
(209) MALONE COMMUNITY CENTER PO BOX 80723, LINCOLN, NE, 68501	47-0376577	501(C)(3)	68,466				GENERAL PURPOSES
(210) MASONIC - EASTERN STAR HOME FOR CHILDREN PO BOX 1327, FREMONT, NE, 68026-1327	47-0384097	501(C)(3)	11,992				GENERAL PURPOSES
(211) MATT TALBOT KITCHEN & OUTREACH PO BOX 80935, LINCOLN, NE, 68501-0935	36-3945814	501(C)(3)	267,100				GENERAL PURPOSES
(212) MATTERS ON TOMORROW PO BOX 5573, LINCOLN, NE, 68505-0573	26-3385226	501(C)(3)	31,418				GENERAL PURPOSES
(213) MAYO CLINIC DEPARTMENT OF DEVELOPMENT, 200 FIRST ST SW, ROCHESTER, MN, 55905- 0001	41-6011702	501(C)(3)	20,000				GENERAL PURPOSES
(214) MERCY CITY CHURCH INC 6224 LOGAN AVE, LINCOLN, NE, 68507	46-4922859	501(C)(3)	19,350				GENERAL PURPOSES
(215) MERCY HOME FOR BOYS AND GIRLS MERCY HOME FOR BOYS AND GIRLS, 1140 W JACKSON BLVD, CHICAGO, IL, 60607	36-2171726	501(C)(3)	50,000				FUNDRAISING CAMPAIGN
(216) MESSIAH LUTHERAN CHURCH 1800 S 84TH ST, LINCOLN, NE, 68506-1870	47-0717241	501(C)(3)	82,603				GENERAL PURPOSES
(217) MESSIAH LUTHERAN SCHOOL 1800 S 84TH ST, LINCOLN, NE, 68506-1870	47-0717241	501(C)(3)	7,500				SCHOLARSHIPS, GENERAL PURPOSES
(218) MILFORD SCHOOLS FOUNDATION 1200 1ST ST, MILFORD, NE, 68405-8794	47-0830054	501(C)(3)	15,335				SCHOLARSHIPS, GENERAL PURPOSES
(219) MILKWORKS MILKWORKS, 5930 S 58TH ST STE W, LINCOLN, NE, 68516-3653	47-0835579	501(C)(3)	27,297				GENERAL PURPOSES
(220) MINISTRY BUILDERS 1512 BRAY CENTRAL DR STE 300, MCKINNEY, TX, 75069	83-3837393	501(C)(3)	10,000				GENERAL PURPOSES
(221) MISSION CENTRAL 40755 COUNTY HWY E16, MAPLETON, IA, 51034	43-0658188	501(C)(3)	13,500				GENERAL PURPOSES

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(222) MONTESSORI SCHOOL FOR YOUNG CHILDREN 4727 A ST, LINCOLN, NE, 68510-4823	47-0606391	501(C)(3)	27,566				GENERAL PURPOSES
(223) MOSAIC CHURCH PO BOX 81632, LINCOLN, NE, 68501-1632	27-1514064	501(C)(3)	8,000				GENERAL PURPOSES
(224) MOSAIC IN SOUTHEAST NEBRASKA MOSAIC IN SOUTHEAST NEBRASKA, 5631 S 48TH ST STE 500, LINCOLN, NE, 68516	11-3669999	501(C)(3)	27,877				GENERAL PURPOSES
(225) MOURNING HOPE GRIEF CENTER 1311 S FOLSOM ST, LINCOLN, NE, 68522	47-0782915	501(C)(3)	62,447				GENERAL PURPOSES
(226) MUSEUM OF NEBRASKA ART 2401 CENTRAL AVE, KEARNEY, NE, 68847- 4501	47-0608588	501(C)(3)	25,000				CAPITAL CAMPAIGN
(227) MYBRIDGE PO BOX 30345, LINCOLN, NE, 68503	27-1287224	501(C)(3)	9,547				GENERAL PURPOSES
(228) NATIONAL MUSEUM OF ROLLER SKATING 4730 SOUTH ST, LINCOLN, NE, 68506-1256	47-0635648	501(C)(3)	21,976				GENERAL PURPOSES
(229) NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE RD STE 1200, JENKINTOWN, PA, 19046-3594	23-7825575	501(C)(3)	52,838				GENERAL PURPOSES
(230) NATIONAL WILDLIFE FEDERATION PO BOX 1583, MERRIFIELD, VA, 22116-1583	53-0204616	501(C)(3)	6,972				GENERAL PURPOSES
(231) NEBRASKA APPLESEED PO BOX 83613, LINCOLN, NE, 68501	47-0798343	501(C)(3)	89,985				GENERAL PURPOSES
(232) NEBRASKA CHILDREN AND FAMILIES FOUNDATION 215 CENTENNIAL MALL S STE 200, LINCOLN, NE, 68508-1813	91-1829974	501(C)(3)	29,694				GENERAL PURPOSES
(233) NEBRASKA CIVIC ENGAGEMENT TABLE 211 N 14TH ST STE 324, LINCOLN, NE, 68508	81-2233379	501(C)(3)	5,376				GENERAL PURPOSES
(234) NEBRASKA COMMUNITY BLOOD BANK 100 N 84TH ST, LINCOLN, NE, 68505-3101	13-1949477	501(C)(3)	13,810				GENERAL PURPOSES
(235) NEBRASKA CULTURAL ENDOWMENT 1004 FARNAM ST LOWR PLZ, OMAHA, NE, 68102-1885	47-0813703	501(C)(3)	9,420				GENERAL PURPOSES
(236) NEBRASKA FFA FOUNDATION PO BOX 94942, LINCOLN, NE, 68509-4942	47-0741774	501(C)(3)	8,529				GENERAL PURPOSES
(237) NEBRASKA HOUSING DEVELOPERS ASSOCIATION 3883 NORMAL BLVD STE 102, LINCOLN, NE, 68506	47-0798048	501(C)(3)	17,771				GENERAL PURPOSES
(238) NEBRASKA HOUSING RESOURCE 1248 O ST STE 749, LINCOLN, NE, 68508	47-0813497	501(C)(3)	100,000				AFFORDABLE HOUSING
(239) NEBRASKA LAND TRUST 3201 PIONEERS BLVD STE 107, LINCOLN, NE, 68516	47-0843794	501(C)(3)	14,634				GENERAL PURPOSES
(240) NEBRASKA LAWYERS FOUNDATION VOLUNTEER LAWYERS PROJECT, 635 S 14TH ST STE 200, LINCOLN, NE, 68508-2701	86-1066093	501(C)(3)	14,983				BARRISTERS BALL

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(241) NEBRASKA NO KILL CANINE RESCUE PO BOX 6295, LINCOLN, NE, 68506-0295	30-0655509	501(C)(3)	26,363				GENERAL PURPOSES
(242) NEBRASKA PEACE FOUNDATION PO BOX 83466, LINCOLN, NE, 68501	36-3347131	501(C)(3)	16,974				GENERAL PURPOSES
(243) NEBRASKA PREGNANCY CARE ALLIANCE 3115 S 81ST STREET CT, LINCOLN, NE, 68506	87-1766758	501(C)(3)	100,000				GENERAL PURPOSES
(244) NEBRASKA PUBLIC MEDIA FOUNDATION 1800 N 33RD ST, LINCOLN, NE, 68503-1409	86-2239027	501(C)(3)	87,018				GENERAL PURPOSES
(245) NEBRASKA SPORTS COUNCIL PO BOX 29366, LINCOLN, NE, 68529-0366	36-3354207	501(C)(3)	32,202				GENERAL PURPOSES
(246) NEBRASKA STATE CHAMBER FOUNDATION 1128 LINCOLN MALL STE 302, LINCOLN, NE, 68508	83-3631043	501(C)(3)	15,000				GENERAL PURPOSES
(247) NEBRASKA STATE HISTORICAL SOCIETY FOUNDATION 1201 LINCOLN MALL STE 100, LINCOLN, NE, 68508	47-6000332	501(C)(3)	47,457				GENERAL PURPOSES
(248) NEBRASKA STATE SUICIDE COALITION PO BOX 23002, LINCOLN, NE, 68542	82-4052913	501(C)(3)	5,241				GENERAL PURPOSES
(249) NEBRASKA TRAILS FOUNDATION 5935 S 56TH ST STE A, LINCOLN, NE, 68516	36-0061007	501(C)(3)	47,770				GENERAL PURPOSES
(250) NEBRASKA TRANSITION FOUNDATION 6901 N 13TH CR, LINCOLN, NE, 68521	81-3766668	501(C)(3)	5,180				GENERAL PURPOSES
(251) NEBRASKA UNITED METHODIST FOUNDATION 100 W FLETCHER AVE STE 100, LINCOLN, NE, 68521	47-0844886	501(C)(3)	100,000				GENERAL PURPOSES
(252) NEBRASKA WESLEYAN UNIVERSITY 5000 ST PAUL AVE, LINCOLN, NE, 68504- 2760	47-0376524	501(C)(3)	49,509				SCHOLARSHIPS, GENERAL PURPOSES
(253) NEBRASKA WILDLIFE REHAB 4905 S 148TH ST, WALTON, NE, 68461	47-0829201	501(C)(3)	7,182				GENERAL PURPOSES
(254) NEBRASKA WRESTLING TRAINING CENTER 110 HENDRICKS TRAINING COMPLEX, LINCOLN, NE, 68588	27-3438024	501(C)(3)	29,012				GENERAL PURPOSES
(255) NEIGHBORWORKS LINCOLN 2530 Q ST, LINCOLN, NE, 68503-3538	36-3430278	501(C)(3)	176,876				AFFORDABLE HOUSING, COMMUNITY BUILDERS
(256) NEW COVENANT COMMUNITY CHURCH 6000 S 84TH ST, LINCOLN, NE, 68516-3807	47-0720181	501(C)(3)	11,560				GENERAL PURPOSES
(257) NEW HORIZONS FOUNDATION 5550 TECH CENTER DR STE 303, COLORADO SPRINGS, CO, 80919	84-1123082	501(C)(3)	7,500				GENERAL PURPOSES
(258) NHRI LEADERSHIP MENTORING PO BOX 830947, LINCOLN, NE, 68535	47-6040776	501(C)(3)	14,191				GENERAL PURPOSES

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(259) NORTH AMERICAN MARTYRS CATHOLIC CHURCH OF LINCOLN 1101 ISAAC DR, LINCOLN, NE, 68521	47-0768348	501(C)(3)	6,600				GENERAL PURPOSES
(260) NORTHEAST FAMILY CENTER 6220 LOGAN AVE, LINCOLN, NE, 68507-1247	91-1787068	501(C)(3)	13,564				GENERAL PURPOSES
(261) OMAHA COMMUNITY FOUNDATION 1120 S 101ST ST STE 320, OMAHA, NE, 68124-1088	47-0645958	501(C)(3)	75,678				FUND TRANSFER
(262) OPEN DOOR MISSION PO BOX 8340, OMAHA, NE, 68108	47-0411375	501(C)(3)	29,500				GENERAL PURPOSES
(263) OPENSKY POLICY INSTITUTE 1327 H ST STE 102, LINCOLN, NE, 68508- 3798	45-3327969	501(C)(3)	30,277				GENERAL PURPOSES
(264) OPERATION SANTA CLAUS 3800 CORNHUSKER HWY, LINCOLN, NE, 68504-1533	23-7167477	501(C)(3)	7,361				GENERAL PURPOSES
(265) ORPHAN GRAIN TRAIN INC. PO BOX 1466, NORFOLK, NE, 68702-1466	31-1614650	501(C)(3)	6,800				GENERAL PURPOSES
(266) OUR SAVIOUR LUTHERAN CHURCH 2420 W OMAHA AVE, NORFOLK, NE, 68701	47-0484946	501(C)(3)	211,724				GENERAL PURPOSES
(267) OUTNEBRASKA 211 N 14TH ST, LINCOLN, NE, 68508	27-1377612	501(C)(3)	38,116				GENERAL PURPOSES
(268) OUTSTRETCHED ARMS MINISTRIES 408 3RD ST, STELLA, NE, 68442-0111	20-0746661	501(C)(3)	6,000				GENERAL PURPOSES
(269) PEOPLE'S CITY MISSION PO BOX 80636, LINCOLN, NE, 68501-0636	47-0376896	501(C)(3)	309,529				GENERAL PURPOSES
(270) PHI GAMMA DELTA EDUCATIONAL FOUNDATION PO BOX 4599, LEXINGTON, KY, 40544	52-6036185	501(C)(3)	5,160				SCHOLARSHIPS, GENERAL PURPOSES
(271) PICKLEBALL LINCOLN 6700 ANN'S CT, LINCOLN, NE, 68516	82-1765073	501(C)(3)	108,360				GENERAL PURPOSES
(272) PINEWOOD PERFORMING ARTS PO BOX 22266, LINCOLN, NE, 68542	51-0203438	501(C)(3)	8,977				GENERAL PURPOSES
(273) PIUS X FOUNDATION 6000 A ST, LINCOLN, NE, 68510-5005	23-7074428	501(C)(3)	17,116				SCHOLARSHIPS, GENERAL PURPOSES
(274) PLANNED PARENTHOOD NORTH CENTRAL STATES PO BOX 850838, MINNEAPOLIS, MN, 55485	83-0614523	501(C)(3)	128,479				GENERAL PURPOSES
(275) PRAIRIE HILL LEARNING CENTER 17705 S 12TH ST, ROCA, NE, 68430-4327	47-0635283	501(C)(3)	5,569				GENERAL PURPOSES
(276) PREGNANCY CENTER 111 PIAZZA TERR, LINCOLN, NE, 68510- 2138	47-0662813	501(C)(3)	29,100				GENERAL PURPOSES
(277) PROYECTO CULTURAL 1110 CLAREMONT ST, LINCOLN, NE, 68508	37-1436363	501(C)(3)	9,038				GENERAL PURPOSES
(278) PUBLIC ART LINCOLN 215 CENTENNIAL MALL SOUTH, LINCOLN, NE, 68508	47-0458128	501(C)(3)	6,750				GENERAL PURPOSES
(279) RABBLE MILL 2005 Y ST, LINCOLN, NE, 68503	27-2442893	501(C)(3)	84,021				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(280) RATIO CHRISTI PO 10907, MERRILLVILLE, IN, 46410	27-4733824	501(C)(3)	9,250				GENERAL PURPOSES
(281) REDEEMER LUTHERAN CHURCH 510 S 33RD ST, LINCOLN, NE, 68510-3399	47-0416357	501(C)(3)	25,857				GENERAL PURPOSES
(282) RISE 745 S 9TH ST, LINCOLN, NE, 68508	83-0583165	501(C)(3)	20,687				GENERAL PURPOSES
(283) ROMAN CATHOLIC ARCHDIOCESE OF NASSAU FOUNDATION INC 110 MERRICK WAY STE 3B, CORAL GABLES, FL, 33134-5236	11-3798061	501(C)(3)	80,000				GENERAL PURPOSES
(284) ROYAL FAMILY KIDS OF LANCASTER COUNTY 6000 S 84TH ST, LINCOLN, NE, 68516-3807	81-3834200	501(C)(3)	5,700				GENERAL PURPOSES
(285) SALVATION ARMY-LINCOLN 2625 POTTER ST, LINCOLN, NE, 68503-1043	36-2167910	501(C)(3)	129,837				GENERAL PURPOSES
(286) SAMARITAN'S PURSE PO BOX 3000, BOONE, NC, 28607-3000	58-1437002	501(C)(3)	6,300				GENERAL PURPOSES
(287) SANDHILLS GLOBAL LINCOLN YOUTH COMPLEX 5934 S 56TH ST STE A, LINCOLN, NE, 68516	87-1032872	501(C)(3)	26,012				YOUTH SPORTS COMPLEX
(288) SANDY HOOK PROMISE FOUNDATION PO BOX 3489, NEWTOWN, CT, 6470	46-1657101	501(C)(3)	25,000				GENERAL PURPOSES
(289) SENIORS FOUNDATION PO BOX 6093, LINCOLN, NE, 68506	47-0630837	501(C)(3)	11,936				GENERAL PURPOSES
(290) SEWARD CHANGING THE GAME INC PO BOX 426, SEWARD, NE, 68434	82-1355502	501(C)(3)	5,100				GENERAL PURPOSES
(291) SEWARD COMMUNITY SCHOLARSHIP PO BOX 141, SEWARD, NE, 68434-0141	47-0620453	501(C)(3)	56,673				SCHOLARSHIPS
(292) SHELDON ART ASSOCIATION PO BOX 880300, LINCOLN, NE, 68588-0300	47-6026671	501(C)(3)	16,120				GENERAL PURPOSES
(293) SHERIDAN ELEMENTARY PTO 3100 PLYMOUTH AVE, LINCOLN, NE, 68502- 4129	47-0665369	501(C)(3)	28,361				SCHOLARSHIPS, GENERAL PURPOSES
(294) SHERIDAN LUTHERAN CHURCH 6955 OLD CHENEY RD, LINCOLN, NE, 68516-3565	47-0484855	501(C)(3)	95,089				GENERAL PURPOSES
(295) SHRINER'S HOSPITAL FOR CHILDREN 2900 N ROCKY POINT DR, TAMPA, FL, 33607-1435	36-2193608	501(C)(3)	67,342				GENERAL PURPOSES
(296) SOUTH GATE UNITED METHODIST CHURCH 3500 PIONEERS BLVD, LINCOLN, NE, 68506- 4853	47-0520001	501(C)(3)	7,600				GENERAL PURPOSES
(297) SOUTH OF DOWNTOWN COMMUNITY DEVELOPMENT ORGANIZATION 2530 Q ST, LINCOLN, NE, 68503	81-3999486	501(C)(3)	133,980				AFFORDABLE HOUSING
(298) SOUTH STREET TEMPLE 2061 S 20TH ST, LINCOLN, NE, 68502-2797	47-0498915	501(C)(3)	10,586				GENERAL PURPOSES
(299) SOUTHEAST COMMUNITY COLLEGE FOUNDATION 8800 O ST STE 227, LINCOLN, NE, 68520	51-0168407	501(C)(3)	333,905				SCHOLARSHIPS, GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(300) SOUTHERN HEIGHTS FOOD FOREST PO BOX 22403, LINCOLN, NE, 68542-2403	83-2927740	501(C)(3)	5,300				GENERAL PURPOSES
(301) SOUTHWOOD LUTHERAN CHURCH 4301 WILDERNESS HILLS BLVD, LINCOLN, NE, 68516-4557	47-0576864	501(C)(3)	69,500				GENERAL PURPOSES
(302) SPECIAL OLYMPICS NEBRASKA 9427 F ST, OMAHA, NE, 68127-1215	47-0546346	501(C)(3)	12,340				GENERAL PURPOSES
(303) SPIRIT OF HOPE LUTHERAN CHURCH 5801 NW 1ST ST STE 2, LINCOLN, NE, 68521-4476	27-0681227	501(C)(3)	19,200				GENERAL PURPOSES
(304) SPRING CREEK PRAIRIE AUDUBON CENTER PO BOX 117, DENTON, NE, 68339	13-1624102	501(C)(3)	49,585				GENERAL PURPOSES
(305) ST. ANNE CATHOLIC CHURCH (TOMBALL, TX) 1111 S CHERRY ST, TOMBALL, TX, 77375- 6675		501(C)(3)	16,600				GENERAL PURPOSES
(306) ST. ELIZABETH FOUNDATION 555 S 70TH ST, LINCOLN, NE, 68510-2462	47-0625523	501(C)(3)	26,217				GENERAL PURPOSES
(307) ST. JOHN CATHOLIC CHURCH 7601 VINE ST, LINCOLN, NE, 68505		501(C)(3)	7,600				GENERAL PURPOSES
(308) ST. JOSEPH CATHOLIC CHURCH (LINCOLN, NE) 7900 TRENDWOOD DR, LINCOLN, NE, 68506-6559	47-0580454	501(C)(3)	259,965				GENERAL PURPOSES
(309) ST. JUDE CHILDREN'S RESEARCH HOSPITAL 501 SAINT JUDE PL, MEMPHIS, TN, 38105- 1905	62-0646012	501(C)(3)	224,221				GENERAL PURPOSES
(310) ST. LEONARD'S CATHOLIC CHURCH PO BOX 368, MADISON, NE, 68748-0368	47-0376612	501(C)(3)	20,000				GENERAL PURPOSES
(311) ST. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD, LINCOLN, NE, 68520- 1306		501(C)(3)	90,400				GENERAL PURPOSES
(312) ST. MARY'S CATHOLIC CHURCH (PARK CITY, UT) 1505 WHITE PINE CANYON RD, PARK CITY, UT, 84060		501(C)(3)	70,000				GENERAL PURPOSES
(313) ST. MARY'S CATHOLIC CHURCH (LINCOLN, NE) 1420 K ST, LINCOLN, NE, 68508-2730	47-0386654	501(C)(3)	100,000				RENOVATION
(314) ST. MARY'S CHURCH (DENTON, NE) PO BOX 406, DENTON, NE, 68339-0406	47-0457881	501(C)(3)	13,000				GENERAL PURPOSES
(315) ST. MATTHEW'S EPISCOPAL CHURCH 2325 S 24TH ST, LINCOLN, NE, 68502-4005		501(C)(3)	6,074				GENERAL PURPOSES
(316) ST. MICHAEL CATHOLIC CHURCH 9101 S 78TH ST, LINCOLN, NE, 68516	47-0813800	501(C)(3)	26,325				GENERAL PURPOSES
(317) ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN 120 WEDGEWOOD DR, LINCOLN, NE, 68510-2431	47-0490169	501(C)(3)	23,086				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(318) ST. PAUL LUTHERAN CHURCH (WEST POINT, NE) 434 N LINCOLN ST, WEST POINT, NE, 68788	47-0421458	501(C)(3)	7,200				GENERAL PURPOSES
(319) ST. PAUL UNITED METHODIST CHURCH (LINCOLN, NE) 1144 M ST, LINCOLN, NE, 68508-2123	47-0379012	501(C)(3)	11,919				GENERAL PURPOSES
(320) ST. PETER CATHOLIC CHURCH 4500 DUXHALL DR, LINCOLN, NE, 68516- 2860		501(C)(3)	60,150				GENERAL PURPOSES
(321) ST. TERESA'S CATHOLIC CHURCH 735 S 36TH ST, LINCOLN, NE, 68510-1666	47-0393174	501(C)(3)	18,500				GENERAL PURPOSES
(322) STEADFAST BIBLE FELLOWSHIP 2440 S 141ST CIR, OMAHA, NE, 68144	20-0793317	501(C)(3)	20,000				GENERAL PURPOSES
(323) STILL WATERS EQUESTRIAN ACADEMY 18221 S 68TH ST, HICKMAN, NE, 68372-9842	46-4343429	501(C)(3)	9,500				GENERAL PURPOSES
(324) STUDENT MOBILIZATION INC PO BOX 567, CONWAY, AR, 72033-0567	71-0629392	501(C)(3)	5,300				GENERAL PURPOSES
(325) SUTTON CHRISTIAN SCHOOLS INC 1004 E ASH ST, PO BOX 321, SUTTON, NE, 68979	47-0630455	501(C)(3)	25,000				BUILDING RENOVATION
(326) SWARTHMORE COLLEGE 500 COLLEGE AVE, SWARTHMORE, PA, 19081-1306	23-1352683	501(C)(3)	5,500				SCHOLARSHIPS, GENERAL PURPOSES
(327) TABITHA FOUNDATION 4720 RANDOLPH ST, LINCOLN, NE, 68510- 3741	47-0636199	501(C)(3)	122,908				GENERAL PURPOSES
(328) TABITHA INC. 4720 RANDOLPH ST, LINCOLN, NE, 68510- 3741	47-0377998	501(C)(3)	16,546				GENERAL PURPOSES
(329) TEAMMATES FOUNDATION 121 S 13TH ST STE 300, LINCOLN, NE, 68508	26-2658139	501(C)(3)	13,000				GENERAL PURPOSES
(330) TEAMMATES MENTORING PROGRAM 121 S 13TH ST STE 300, LINCOLN, NE, 68508	47-0840990	501(C)(3)	30,300				GENERAL PURPOSES
(331) TEAMMATES MENTORING PROGRAM OF LINCOLN 5905 O ST, LINCOLN, NE, 68510-2235	26-4658462	501(C)(3)	58,229				SCHOLARSHIPS, GENERAL PURPOSES
(332) THE NAVIGATORS PO BOX 50500, COLORADO SPRINGS, CO, 80949	84-6007896	501(C)(3)	5,650				GENERAL PURPOSES
(333) THE TRINITY CHURCH 8620 E MCDONALD DR., SCOTTSDALE, AZ, 85250		501(C)(3)	20,000				GENERAL PURPOSES
(334) THEATRE ARTS FOR KIDS 5820 M ST, LINCOLN, NE, 68510	46-3745380	501(C)(3)	70,963				GENERAL PURPOSES
(335) TRINITY EVANGELICAL LUTHERAN CHURCH 265 HELEN ST, PO BOX 47, CORDOVA, NE, 68330	47-0645137	501(C)(3)	6,500				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(336) TRINITY LUTHERAN CHURCH (MURDOCK, NE) 31104 CHURCH RD, MURDOCK, NE, 68407	47-0525231	501(C)(3)	10,000				GENERAL PURPOSES
(337) TRINITY LUTHERAN SCHOOL FOUNDATION 208 W 13TH ST, GRAND ISLAND, NE, 68801	47-0738412	501(C)(3)	100,000				ACQUISITION AND RENOVATION
(338) TUNNEL TO TOWERS FOUNDATION 2361 HYLAN BLVD, STATEN ISLAND, NY, 10306	02-0554654	501(C)(3)	28,900				GENERAL PURPOSES
(339) UNF CHARITABLE GIFT FUND 1010 LINCOLN MALL STE 300, LINCOLN, NE, 68508-2886	20-0288992	501(C)(3)	18,100				GENERAL PURPOSES
(340) UNION ADVENTIST UNIVERSITY 3800 S 48TH ST, LINCOLN, NE, 68506-4345	47-0405319	501(C)(3)	78,551				SCHOLARSHIPS, GENERAL PURPOSES
(341) UNITED STATES ARTISTS INC 200 W MADISON ST, FL 3, CHICAGO, IL, 60606	22-3903993	501(C)(3)	10,000				GENERAL PURPOSES
(342) UNITED WAY OF GREATER HOUSTON 50 WAUGH DR, HOUSTON, TX, 77007-5813	74-1167964	501(C)(3)	10,000				GENERAL PURPOSES
(343) UNITED WAY OF LINCOLN AND LANCASTER COUNTY 238 S 13TH ST, LINCOLN, NE, 68508-2004	47-0376624	501(C)(3)	171,766				TOCQUEVILLE, GENERAL PURPOSES
(344) UNIVERSITY OF IOWA FOUNDATION PO BOX 4550, IOWA CITY, IA, 52244-4550	42-0796760	501(C)(3)	20,000				SCHOLARSHIPS, GENERAL PURPOSES
(345) UNIVERSITY OF NEBRASKA BOARD OF REGENTS 3835 HOLDREGE ST, LINCOLN, NE, 68583	47-0049123	501(C)(3)	241,919				PROSPER LINCOLN, REI RESEARCH
(346) UNIVERSITY OF NEBRASKA FOUNDATION 1010 LINCOLN MALL STE 300, LINCOLN, NE, 68508-2886	47-0379839	501(C)(3)	4,470,163				NURSING, UNK RURAL MEDICINE, ATHLETICS, ENGR, LIBRARY
(347) VILLA MARIE HOME AND SCHOOL FOR EXCEPTIONAL CHILDREN 7205 N 112TH ST, WAVERLY, NE, 68462	47-0576011	501(C)(3)	23,572				SCHOLARSHIPS, GENERAL PURPOSES
(348) VINE CONGREGATIONAL CHURCH 1800 TWIN RIDGE RD, LINCOLN, NE, 68506- 2355	47-0718475	501(C)(3)	5,650				GENERAL PURPOSES
(349) VOICES OF HOPE 2545 N ST, LINCOLN, NE, 68510-1250	47-0726814	501(C)(3)	56,683				GENERAL PURPOSES
(350) WACHISKA AUDUBON SOCIETY 4547 CALVERT ST STE 10, LINCOLN, NE, 68506-5643	51-0229888	501(C)(3)	53,845				GENERAL PURPOSES
(351) WATER FOR LIFE PO BOX 456, KALONA, IA, 52247	42-1203881	501(C)(3)	10,000				GENERAL PURPOSES
(352) WE CAN DO THIS PO BOX 80871, LINCOLN, NE, 68501	87-2737545	501(C)(3)	5,717				GENERAL PURPOSES
(353) WE CARE FOUNDATION 7731 VIBURNUM DR, LINCOLN, NE, 68516	81-3563641	501(C)(3)	17,684				GENERAL PURPOSES
(354) WELLBEING INITIATIVE 5530 O ST STE 2, LINCOLN, NE, 68510	47-4853482	501(C)(3)	7,217				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(355) WESTMINSTER PRESBYTERIAN CHURCH 2110 SHERIDAN BLVD, LINCOLN, NE, 68502- 4036	47-0380471	501(C)(3)	16,401				GENERAL PURPOSES
(356) WHITE CANE FOUNDATION 2741 KATY CIR, LINCOLN, NE, 68506	83-3478011	501(C)(3)	35,237				GENERAL PURPOSES
(357) WICS-WOMEN IN COMMUNITY SERVICES 1935 D ST, LINCOLN, NE, 68502-1659	47-0533212	501(C)(3)	11,348				GENERAL PURPOSES
(358) WILD LEARNING 2621 AUSTIN DR, LINCOLN, NE, 68506	85-3230774	501(C)(3)	6,428				GENERAL PURPOSES
(359) WILLIE'S UNDERWEAR PROJECT 2906 PLYMOUTH AVE, LINCOLN, NE, 68502	82-3122335	501(C)(3)	8,050				GENERAL PURPOSES
(360) WILSON COLLEGE OFFICE OF INSTITUTIONAL ADVANCEMENT, 1015 PHILADELPHIA AVE, CHAMBERSBURG, PA, 17201-1279	23-1352692	501(C)(3)	10,000				SCHOLARSHIPS, GENERAL PURPOSES
(361) WOMEN'S CARE CENTER 5632 S 48TH ST, LINCOLN, NE, 68516	35-1609945	501(C)(3)	7,000				GENERAL PURPOSES
(362) WOODS TENNIS & EDUCATIONAL FOUNDATION 401 S 33RD ST, LINCOLN, NE, 68510	85-0948502	501(C)(3)	24,379				GENERAL PURPOSES
(363) WORLD FOOD PRIZE FOUNDATION 100 LOCUST ST, DES MOINES, IA, 50309	42-1356715	501(C)(3)	25,000				GENERAL PURPOSES
(364) WOUNDED WARRIOR PROJECT 4899 BELFORT RD STE 300, JACKSONVILLE, FL, 32256-6033	20-2370934	501(C)(3)	7,750				GENERAL PURPOSES
(365) WYUKA HISTORICAL FOUNDATION 3600 O ST, LINCOLN, NE, 68510-1668	47-0823689	501(C)(3)	47,314				GROUNDS RENOVATION
(366) YALE UNIVERSITY 157 CHURCH S, NEW HAVEN, CT, 06510- 2100	06-0646973	501(C)(3)	10,500				SCHOLARSHIPS, GENERAL PURPOSES
(367) YBOR - A SECOND CHANCE KITCHEN YBOR - A SECOND CHANCE KITCHEN, PO BOX 21917, LINCOLN, NE, 68542	84-3925961	501(C)(3)	14,468				GENERAL PURPOSES
(368) YMCA OF LINCOLN 570 FALLBROOK BLVD STE 210, LINCOLN, NE, 68521-9026	47-0376578	501(C)(3)	63,162				GENERAL PURPOSES
(369) YOUNG ACTORS ACADEMY OF LINCOLN 1233 LIBRA DR STE 2, LINCOLN, NE, 68512	27-3325983	501(C)(3)	6,456				GENERAL PURPOSES
(370) YOUNG LIFE PO BOX 6442, LINCOLN, NE, 68506-0442	84-0385934	501(C)(3)	6,482				GENERAL PURPOSES
(371) YOUTH FOR CHRIST USA INC 5062 S 108TH ST STE 160, OMAHA, NE, 68137	47-0484339	501(C)(3)	25,000				GENERAL PURPOSES
(372) YOUTH FOR CHRIST-CAMPUS LIFE- PARENT LIFE-JUVENILE JUSTICE MINISTRY PO BOX 6081, LINCOLN, NE, 68506-6081	47-0543176	501(C)(3)	28,639				GENERAL PURPOSES
(373) YWCA OF LINCOLN 5631 S 48TH ST STE 410, LINCOLN, NE, 68516	47-0376894	501(C)(3)	27,036				GENERAL PURPOSES

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
Name and address of organization or government	EIN	IRC section if applicable	Amount of cash grant	Amount of non-cash assistance	Method of valuation (book, FMV, appraisal, other)	Description of non-cash assistance	Purpose of grant or assistance
(374) ZION CHURCH 5511 S 27TH ST, LINCOLN, NE, 68512-1611		501(C)(3)	19,100				GENERAL PURPOSES
(375) ZION LUTHERAN CHURCH (JOHNSON, NE) PO BOX 251, JOHNSON, NE, 68378-0251	47-0611798	501(C)(3)	6,500				GENERAL PURPOSES

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

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS.	THE LINCOLN COMMUNITY FOUNDATION STAFF RESEARCHES ALL CHARITIES THAT DONORS RECOMMEND FOR GRANTS. TO QUALIFY FOR A GRANT DISTRIBUTION, A PROSPECTIVE GRANTEE MUST BE ABLE TO SATISFY THE FOUNDATION'S DUE DILIGENCE 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 CHARITY IN GOOD STANDING. ONCE THE ORGANIZATION MEETS THE DUE DILIGENCE REQUIREMENTS, THE FOUNDATION ISSUES A CHECK TO THE ORGANIZATION.
(7) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	AMERICAN CANCER SOCIETY (NATIONAL OFFICE) PO BOX 6704, HAGERSTOWN, MD, 21714
(8) SCHEDULE I, PART II, COLUMN A - NAME AND ADDRESS OF ORGANIZATION OR GOVERNMENT	AMERICAN RED CROSS OF SOUTHEAST NEBRASKA DONATIONS PROCESSING, 2912 S 80TH ST, OMAHA, NE, 68124
SCHEDULE I, PART II , COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	AGS GAMMA CHAPTER FOUNDATION INC: SCHOLARSHIPS, GENERAL PURPOSES

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

LINCO	DLN COMMUNITY FOUNDATION INC 47-045	58128		
Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Forganization Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	m		
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding paymer			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III t			
	explain	1b	~	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by a	all		
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on lin			
	1a?	2	~	
_				
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.	۱ ا		
	✓ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		~
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		~
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		~
	If "Yes" to any of lines 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	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue ar	10		
	compensation contingent on the revenues of:	,		
а	The organization?	5a		~
b	Any related organization?	5b		~
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue an	ıv		
U	compensation contingent on the net earnings of:	'y		
а	The organization?	6a		~
b	Any related organization?	6b		~
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixe	² d		
•	payments not described on lines 5 and 6? If "Yes," describe in Part III			~
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject	-		
-	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describ	oe		
	in Part III	8		~
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described			
	Regulations section 53.4958-6(c)?	9	1	1

11/8/2024 10:16:09 AM

Schedule J (Form 990) 2023

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 aren't 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.

THE SUM OF COLUMN (D)(I) (III) FOR CAC		(B) Breakdown of W-2 ar				(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990	
ALEC GORYNSKI	(i)	243,936	0	0	0	30,753	274,689	0	
1 PRESIDENT	(ii)	0	0	0	0		0		
	(i)								
2	(ii)								
	(i)								
3	(ii)								
	(i)								
4	(ii)								
	(i)								
5	(ii)								
	(i)								
6	(ii)								
	(i)								
7	(ii)								
	(i)								
8	(ii)								
	(i)								
9	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
12	(ii)								
	(i)								
13	(ii)								
	(i)								
14	(ii)								
	(i)								
15	(ii)								
	(i)								
16	(ii)								

Schedule J (Form 990) 2023

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.

Return Reference - Identifier	Explanation
SCHEDULE J, PART I, LINE 1A - HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES	SOCIAL CLUB DUES WERE PAID FOR THE PRESIDENT.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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.

Open to Public Inspection

Name of the organization

LINCOLN COMMUNITY FOUNDATION INC

Go to www.irs.gov/Form990 for instructions and the latest information.

47-0458128

Employer identification number

Part	Types of Property			'	
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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	~	111	16,787,567	MARKET VALUE
10	Securities—Closely held stock .	~	1	41,969	INDEPENDENT APPRAISAL
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					
23 24	Scientific specimens				
2 4 25	Archeological artifacts Other (GOLD COINS)	· ·	2	4.070	MARKET VALUE
26	Other ()		2	4,076	WARRET VALUE
27	Other ()				
28	Other () Other ()				
29	Number of Forms 8283 received	by the or	canization during the tax	vear for contributions for	
	which the organization completed				29 1
					Yes No
30a	During the year, did the organizat	tion receive	by contribution any prope	erty reported in Part I, lines	
	28, that it must hold for at least 3				
	used for exempt purposes for the	entire hold	ing period?		30a
b	If "Yes," describe the arrangemen	t in Part II.			
31	Does the organization have a	gift accep	otance policy that require	es the review of any no	onstandard
	contributions?				· · · 31 🗸
32a	Does the organization hire or use	e third part	ies or related organization	is to solicit, process, or se	Il noncash
	contributions?				32a 🗸
b	If "Yes," describe in Part II.				
33	If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	perty for which column (a) i	s checked,

J	

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.

Return Reference - Identifier	Explanation
SCHEDULE M, PART I - EXPLANATIONS OF REPORTING METHOD FOR	SECURITIES - PUBLICLY TRADED - NUMBER OF DONOR CONTRIBUTION TRANSACTIONS; A TRANSACTION MAY INVOLVE MULTIPLE STOCKS.
NUMBER OF CONTRIBUTIONS	SECURITIES - CLOSELY HELD STOCK - NUMBER OF CONTRIBUTIONS OTHER - GOLD COINS - NUMBER OF CONTRIBUTIONS
 	
SCHEDULE M, PART I, LINE 32B - THIRD PARTIES USED TO SOLICIT, PROCESS, OR SELL NONCASH CONTRIBUTIONS	AN INDEPENDENT BROKER IS USED TO SELL GOLD COIN GIFTS.

SCHEDULE 0 (Form 990)

Department of Treasury Internal Revenue Service

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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the Organization
LINCOLN COMMUNITY FOUNDATION INC

Employer Identification Number 47-0458128

Return Reference - Identifier	Explanation	
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	THE FILING VERSION OF THE RETURN IS PROVIDED TO THE BOARD CHAIR AND AUDIT COMMITTEE. THE REST OF THE BOARD IS PROVIDED THE FILING VERSION NAMES AND ADDRESSES OF THE CONTRIBUTORS ON SCHEDULE B.	
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	ALL BOARD OF DIRECTORS ARE ASKED AT THE BEGINNING OF EACH QUARTERL THERE ARE ANY CHANGES SINCE THEIR LAST DISCLOSURE.	Y MEETING IF
FORM 990, PART VI, LINE 15A - AND 15B - PROCESS TO ESTABLISH COMPENSATION	THE HUMAN RESOURCES COMMITTEE (A BOARD COMMITTEE) MEETS ANNUALLY INCREASES AS WELL AS PAY RANGES FOR ALL EMPLOYEES. THESE ARE BASED COMPARABILITY DATA. THE DECISIONS MADE BY THIS COMMITTEE ARE DOCUM MINUTES.	ON
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	THE FOUNDATION PUTS ITS FORM 990 AND AUDIT REPORT FOR THREE YEARS OF FOR PUBLIC VIEWING. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST PROVIDED TO ANYONE UPON REQUEST.	
FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	(a) Description CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS PARTNERSHIP INCOME	(b) Amount 1,761 - 18,245

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

Employer identification number

47-0458128

Department of the Treasury Internal Revenue Service

Name of the organization

LINCOLN COMMUNITY FOUNDATION INC

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

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

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

Open to Public Inspection

(a) Name, address, and EIN (if applicable) of disregarded entity	Prima	(b) ary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct con entit	trolling
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
Part II Identification of Related Tax-Exempt Organizations do not one or more related tax-exempt organizations do	 ations. Complete if thuring the tax year.	he organization	answered "Yes" o	on Form 990, Par	t IV, line 34, beca	use it h	ad
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country		(e) Public charity statu (if section 501(c)(3)		conf	(g) 512(b)(13) trolled tity?
						Yes	No
(1) LINCOLN FOUNDATION DONOR DIRECTED DEPOSITORY (36-3766015) 215 CENTENNIAL MALL SOUTH STE 100, LINCOLN, NE 68508	GRANTS AND ALLOCATIONS TO LOCAL NON-PROFIT ORGANIZATIONS	NE NE	501(C)(3)	7 LINCOLN COMM FDN	V	
(2)							
(3)							
(4)							
(5)							
(6)							
	1	1	1	1	<u> </u>		1

Page **2**

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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	e of total Share of end-of-		ortionate tions?	ns? amount in box 20 of Schedule K-1 (Form 1065)		i) eral or aging ner?	(k) Percentage ownership
		country)		sections 512-514)			Yes No			Yes	No	
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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)	(c) Legal domicile (state or foreign country)	(d)	(e) Type of entity (C corp, S corp, or trust)	(f)	(g) Share of end-of-year assets	(h) Percentage ownership	Section 5 conti ent	(i) 512(b)(13) rolled tity?
								Yes	No
(1)(SEE STATEMENT)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note	: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No
1	During the tax year, did the organization engage in any of the following transactions with one or	more related organi	zations listed in Parts	II–IV?	
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a	ı /
b	Gift, grant, or capital contribution to related organization(s)			1k	· ·
С	Gift, grant, or capital contribution from related organization(s)			10	: 1
d	Loans or loan guarantees to or for related organization(s)			10	I /
е	Loans or loan guarantees by related organization(s)			16	
f	Dividends from related organization(s)			11	· /
g	Sale of assets to related organization(s)			19	· ·
h	Purchase of assets from related organization(s)			1h	· /
i	Exchange of assets with related organization(s)			1i	· ·
j	Lease of facilities, equipment, or other assets to related organization(s)			1j	· ·
k	Lease of facilities, equipment, or other assets from related organization(s)			1k	
ı	Performance of services or membership or fundraising solicitations for related organization(s) .			11	V
m					1 /
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1 r	1 V
0	Sharing of paid employees with related organization(s)				· ·
р	Reimbursement paid to related organization(s) for expenses			1p	· /
q	Reimbursement paid by related organization(s) for expenses				· ·
_					
r	Other transfer of cash or property to related organization(s)			1 r	· /
s	Other transfer of cash or property from related organization(s)			1s	
2	If the answer to any of the above is "Yes," see the instructions for information on who must com				resholds.
	(a)	(b)	(c)	(d)	
	(a) Name of related organization	Transaction	Amount involved	Method of determining am	ount involved
		type (a-s)			
(1)					
(2)					
(3)					
/ / \					
(4)					
(5)					
\ " /					
(6)					

Page **4**

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all sec 501 organiz	e) partners ction (c)(3) zations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate tions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	ral or aging	(k) Percentage ownership
			sections 512-514)	Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
<u>(4)</u>													
(5)													
<u>(6)</u>													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Schedule R (Form 990) 2023

Part IV Identification of Related Organizations Taxable as a Corporation or 1	Trust	(continued)
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(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C-corp, S-corp or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUSTS (4)	CHARITABLE TRUST		N/A					\	

PUBLIC DISCLOSURE COPY

990-T

Exempt Organization Business Income Tax Return

OMB No. 1545-0047 (and proxy tax under section 6033(e)) For calendar year 2023 or other tax year beginning , 2023, and ending Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service Name of organization (Check box if name changed and see instructions.) D Employer identification number Check box if address changed. LINCOLN COMMUNITY FOUNDATION INC 47-0458128 **Print** Number, street, and room or suite no. If a P.O. box, see instructions. E Group exemption number **B** Exempt under section or (see instructions) **v** 501(**C**)(3) 215 CENTENNIAL MALL S STE 100 Type 408(e) 220(e) City or town, state or province, country, and ZIP or foreign postal code 530(a) 408A LINCOLN. NE 68508-1885 F Check box if an amended return. 529(a) 529A C Book value of all assets at end of year 211.371.387 G Check organization type ✓ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust ☐ State college/university ☐ 6417(d)(1)(A) Applicable entity H Check if filing only to claim Credit from Form 8941 Refund shown on Form 2439 Elective payment amount from Form 3800 During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?

Tes If "Yes," enter the name and identifying number of the parent corporation Telephone number The books are in care of (SEE STATEMENT) (402) 474-2345 **Total Unrelated Business Taxable Income** 1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 1 18.245 2 2 3 3 18,245 4 4 1,825 5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 . . . 5 16.420 6 6 0 7 Total of unrelated business taxable income before specific deduction and section 199A deduction. 7 16,420 8 Specific deduction (generally \$1,000, but see instructions for exceptions) 8 1,000 9 9 0 10 10 1,000 11 **Unrelated business taxable income.** Subtract line 10 from line 7. If line 10 is greater than line 7, 11 15,420 Part II **Tax Computation** 3,238 Organizations taxable as corporations. Multiply Part I, line 11, by 21% (0.21) 1 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on 2 Part I, line 11, from: Tax rate schedule or Schedule D (Form 1041) 2 3 3 0 0 4 Other tax amounts. See instructions 4 Alternative minimum tax 5 5 0 6 6 0 7 **Total.** Add lines 3 through 6 to line 1 or 2, whichever applies 7 3,238 Part III Tax and Payments Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 0 0 1b 0 С General business credit. Attach Form 3800 (see instructions) . . . 1c d Credit for prior-year minimum tax (attach Form 8801 or 8827) 1d **Total credits.** Add lines 1a through 1d 1e 2 Subtract line 1e from Part II. line 7. . . . 2 3.238 Amount due from Form 4255 3a Amount due from Form 8611 3h Amount due from Form 8697 Amount due from Form 8866 3d

Total tax. Add lines 2 and 3f (see instructions).

Check if includes tax previously deferred under

section 1294. Enter tax amount here

Current net 965 tax liability paid from Form 965-A, Part II, column (k)

0

0

3,238

Other amounts due (see instructions)

2

0 4

3f

Form 990-T (2023) Page **2**

		-/								. 490	_
Part I		Tax and Payments (continued)									
6a	Paym	ents: Preceding year's overpayment of	credited to the curre	nt year	6a		0				
b	Curre	nt year's estimated tax payments. Ch	eck if section 643(g)	election							
	applie	es		🗌	6b		0				
		eposited with Form 8868			6c		0				
d	Foreig	gn organizations: Tax paid or withheld	I at source (see instr	uctions) .	6d		0				
е		up withholding (see instructions)			6e		0				
f		t for small employer health insurance			6f		0				
g	Electi	ve payment election amount from For	m 3800				0				
h	Paym	ent from Form 2439			6h		0				
i	Credi	t from Form 4136			6i		0				
j	Other	(see instructions)			6j		0				
7		,					.	7			0
8		ated tax penalty (see instructions). Ch						8			0
9		ue. If line 7 is smaller than the total of					.	9		3,23	8
10	-	payment. If line 7 is larger than the to			ınt ove	erpaid	.	10			0
11		the amount of line 10 you want: Credite				Refund	led	11			
Part I	V :	Statements Regarding Certain <i>A</i>	Activities and Oth	er Informati	ion (s	ee instructions)					
1		y time during the 2023 calendar year,							Ŭ.,,,	es No)
		a financial account (bank, securities, o									
		N Form 114, Report of Foreign Bank	and Financial Acco	unts. If "Yes,"	enter	the name of th	e for	eign cou	ıntry		
	here										
2	_	the tax year, did the organization receive		_	rantor	of, or transferor	to, a	foreign tr	ust?		_
		s," see instructions for other forms the	•								
3		the amount of tax-exempt interest red							0		
4	Enter	available pre-2018 NOL carryovers he n on Schedule A (Form 990-T). Don't	ere \$	Do not in	nclude	any post-2017	'NOI	_ carryo	ver		
			t reduce the NOL ca	arryover snow	n ner	e by any deduc	ction	reported	on		
_		line 6.	A 1' 'I O I			47 NO		- u			
		2017 NOL carryovers. Enter the Busine	•	•		•					
	tne ar	nounts shown below by any NOL clain		A, Part II, IIne							
		Business Activity	Code		Avail	able post-2017	NOL	carryov	er_		
				\$	} 						
				\$	S 						
				\$	} 						
_					<u> </u>						
		ved for future use									
		ved for future use									
Part		Supplemental Information									_
Provide	e any a	additional information. See instruction	IS.								
	l la des		de estable makement in alcoholic					41 14	-£ l		
	1	penalties of perjury, I declare that I have exam it is true, correct, and complete. Declaration of							•	wieage ai	ıa
Sign	,		pp (,,							_
Here			1						RS discuss reparer sho		
		A f - ffi		VICE PRESI	DENT-	FINANCE			ictions)? 🔽		
	Signa	ature of officer	Date	Title		I 5 .			DT/		_
Paid		Print/Type preparer's name	Preparer's signature			Date	Chec		PTIN	00000	
Prepa	arer	KRISTIN TYNON						mployed		063388	_
Use (Firm's name FORVIS MAZARS, LLP					Firm's		44-0160 (402) 473		_
		Firm's address 1248 O STREET STE 1040	address 1248 O STREET STE 1040, LINCOLN, NE 68508-1461 Phone no.								

Form **990-T** (2023)

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Go to www.irs.gov/Form990T for instructions and the latest information.

Department of the Treasury Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service 501(c)(3) Organizations Only B Employer identification number A Name of the organization LINCOLN COMMUNITY FOUNDATION INC 47-0458128 901101 1 **C** Unrelated business activity code (see instructions) **D** Sequence: E Describe the unrelated trade or business INVESTMENT IN PARTNERSHIPS Part I **Unrelated Trade or Business Income** (A) Income (B) Expenses (C) Net 1a Gross receipts or sales Less returns and allowances 0 c Balance 0 1c Cost of goods sold (Part III, line 8) 0 2 2 3 Gross profit. Subtract line 2 from line 1c. 3 0 0 Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions 4a 0 0 Net gain (loss) (Form 4797) (attach Form 4797). See 4b 1,526 1,526 Capital loss deduction for trusts 4c 0 0 5 Income (loss) from a partnership or an S corporation (attach statement) 5 16,719 16,719 Rent income (Part IV) 6 6 0 0 0 7 7 Unrelated debt-financed income (Part V) 0 0 0 8 Interest, annuities, royalties, and rents from a controlled 8 0 0 0 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) 0 9 0 0 10 Exploited exempt activity income (Part VIII) 10 0 0 0 11 Advertising income (Part IX) 11 0 0 0 Other income (see instructions; attach statement) 12 0 0 12 Total. Combine lines 3 through 12 13 13 18.245 18,245 Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be Part II directly connected with the unrelated business income. Compensation of officers, directors, and trustees (Part X) . . . 0 1 0 2 Salaries and wages 2 3 3 0 4 4 0 Bad debts 5 5 0 Interest (attach statement). See instructions 6 6 0 7 Depreciation (attach Form 4562). See instructions 8 Less depreciation claimed in Part III and elsewhere on return. 0 8b 0 9 0 10 0 Contributions to deferred compensation plans 10 0 11 Employee benefit programs 11 12 0 12 Excess exempt expenses (Part VIII) 13 Excess readership costs (Part IX) 13 0 14 0 14 15 Total deductions. Add lines 1 through 14 15 0 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, 16 16 18.245

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 74036O

Unrelated business taxable income. Subtract line 17 from line 16 . . .

Schedule A (Form 990-T) 2023

0

18.245

17

17

18

Schedule A (Form 990-T) 2023

Part	Cost of Goods Sold Enter me	thod of inventory val	uation		· · ·
1	Inventory at beginning of year			1	0
2	Purchases			2	2 0
3	Cost of labor			3	0
4	Additional section 263A costs (attach statement)			4	0
5	Other costs (attach statement)			5	0
6	Total. Add lines 1 through 5			6	0
7	Inventory at end of year				0
8	Cost of goods sold. Subtract line 7 from line 6.				
9	Do the rules of section 263A (with respect to prop				
	N Rent Income (From Real Property an				
1	Description of property (property street address,	city, state, ZIP code). Check if a dual-u	se. See instructio	ns.
	<u>A</u> <u> </u>				
	B				
	C □				
	D 📙	Α	В	С	D
2	Rent received or accrued	A	В		
a	From personal property (if the percentage of				
u	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income) .				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c, colum	nc A through D. Entor	horo and an Part I	ing 6 column (A)	0
3	·	ins A through D. Enter	Tiere and on Fart i, i	ine o, column (A)	
4	Deductions directly connected with the income				
	in lines 2a and 2b (attach statement)				
5	Total deductions. Add line 4, columns A through	h D. Enter here and o	on Part I, line 6, colu	ımn (B)	0
Dar	V Unrelated Debt-Financed Income (se				
1	Description of debt-financed property (street add		code) Check if a d	lual-use See inst	ructions
•	A	•	,	1441 450. 500 11101	radiono.
	B				
	C □				
	D [
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
a	Straight line depreciation (attach statement) .				
b	Other deductions (attach statement) Total deductions (add lines 3a and 3b,				
С	columns A through D)				
1	Amount of average acquisition debt on or allocable				
4	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
J	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	(% %
7	Gross income reportable. Multiply line 2 by line 6	70	70		70 70
			_		
8	Total gross income (add line 7, columns A through	ugh D). Enter here an	d on Part I, line 7, o	column (A)	0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns	A through D. Enter h	ere and on Part I, lir	ne 7, column (B)	0
11	Total dividends — received deductions include	_			0

Schedule A (Form 990-T) 2023

	rt VI Interest, Annuit	tion Povoltio	o and Dante	. Ero	m Controlled Ore	nonizationa (aca inatru	otion	Page 3
Fal	interest, Annun	lies, noyailie	ss, and nems	SFIC		ganizations (see instruentrolled Organizations	ictioi	18)
	Name of controlled organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions		Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5	
(1)								
(2)								
(3)								
(4)								
	7. Taxable income	inco	unrelated me (loss) structions)	9. Total of specified payments made		10. Part of column 9 that is included in the controlling organization's	11. Deductions directly connected with income in column 10	
(1)								
(2)								
(3)								
(4)								
Tota	als					Add columns 5 and 10. Enter here and on Part I, line 8, column (A).	Ente I	d columns 6 and 11. er here and on Part I, ine 8, column (B).
Par	t VII Investment Inc	ome of a Sec	ction 501(c)(7), (9), or (17) Organiza	ation (see instructions))	
	1. Description of income		unt of income		3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)	
(1)								
(2)								
(3)								
(4)							_	
T		Add amounts in column Enter here and on Part line 9, column (A).					Add amounts in column 5. Enter here and on Part I, line 9, column (B).	
_	als	· ·	0 200ma Otha	u Th	on Advortising In	eeme (ooo instructions		0
1	Exploited Exem Description of exploited		icome, Othe	# III	an Advertising in	come (see instructions	>) 	
2			n trade or busi	nace	Enter here and on P	art I, line 10, column (A)	2	
3	Expenses directly conn	ected with pro	duction of unre	elated	d business income. E	Enter here and on Part I,		
	line 10, column (B)						3	
4	lines 5 through 7						4	
5	Gross income from act	-					5	
6	Expenses attributable t						6	
7	Excess exempt expenses. Subtract line 5 from line 6, 4. Enter here and on Part II, line 12						7	

Schedule A (Form 990-T) 2023

Schedule A (Form 990-T) 2023

Par	X Advertising Income					, ,
1	Name(s) of periodical(s). Check box if re	porting t	two or more period	cals on a consoli	idated basis.	
	A 🗆 🐪		•			
	В 🗌					
	c 🗆					
	D 🗌					
nter	amounts for each periodical listed above	in the co				
2	Cross advertising income		Α	В	С	D
2	Gross advertising income					
а	Add columns A through D. Enter here a	nd on Pa	ırt I, line 11, columr	(A)		. <u> </u>
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here a	nd on Pa	ırt I, line 11, columr	(B)		
4	Advertising gain (loss). Subtract line 3 ft 2. For any column in line 4 showing complete lines 5 through 8. For any coline 4 showing a loss or zero, do not colines 5 through 7, and enter -0- on line 8	a gain, olumn in omplete				
5 6 7	Readership costs					
	line 5, subtract line 6 from line 5. If line 5 than line 6, enter -0	5 is less				
8	Excess readership costs allowed deduction. For each column showing a line 4, enter the lesser of line 4 or line 7	gain on				
а	Add line 8, columns A through D. En Part II, line 13	_				
Par	X Compensation of Officers, Di					
	1. Name		2. Title		3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
l)					%	
2)					%	
3)					%	
l)					%	
ro+c	I Enter here and an Dart II line 1					
Para	I. Enter here and on Part II, line 1 . XI Supplemental Information (se	o instru	retions)			0
GII	Supplemental information (se	e mstru	ictions)			

Return Reference - Identifier	Explanation
BOOK CARE - NAME AND	SCOTT LAWSON VP FINANCE, 215 CENTENNIAL MALL SOUTH STE 100, LINCOLN, NE 68508

Additional Information

Form 990T

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2023	21,894,110	0	1,825		21,892,285	
Totals	21,894,110	0	1,825	0	21,892,285	

Charitable Contributions

Form 990T Part I, Line 4

Schedule A - Part I, Line 5

Income (loss) from Partnership and S Corporations

Name of Partnership	Share of gross income	Share of deductions	Gain or loss	
PARTNERSHIP INCOME				
(1) INCOME FROM PARTNERSHIPS	16,719	0	16,719	
Total	16,719	0	16,719	

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

2023

Employer identification number LINCOLN COMMUNITY FOUNDATION INC 47-0458128 Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☐ No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less See instructions for how to figure the amounts to enter on (g) Adjustments to gain (h) Gain or (loss) (d) (e) the lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) column (g) the result with column (g) whole dollars. 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, 0 leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 with **Box A** checked 0 2 Totals for all transactions reported on Form(s) 8949 0 with **Box B** checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked 0 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37. 4 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 5 **6** Unused capital loss carryover (attach computation) 6 0) 7 0 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h Long-Term Capital Gains and Losses—Assets Held More Than One Year See instructions for how to figure the amounts to enter on the (g) Adjustments to gain (h) Gain or (loss) (d) lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part II, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) column (g) the result with column (g) whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, 0 leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 0 with **Box D** checked 9 Totals for all transactions reported on Form(s) 8949 with **Box E** checked 0 10 Totals for all transactions reported on Form(s) 8949 with **Box F** checked 0 1,526 11 Enter gain from Form 4797, line 7 or 9 11 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37. 12 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 **14** Capital gain distributions (see instructions) 14 1,526 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 15 Summary of Parts I and II Part III 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 0 1,526 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns . 18 1,526 **Note:** If losses exceed gains, see Capital Losses in the instructions.

Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

OMB No. 1545-0184

Attachment Sequence No. 27

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form4797 for instructions and the latest information.

Name((s) shown on return					Identifying r	umbe	r
LINCO	OLN COMMUNITY FOUND	ATION INC					47-045	58128
1a	Enter the gross proceeds substitute statement) that						1a	
b	Enter the total amount o MACRS assets	f gain that you are	e including on line	es 2, 10, and 24 o	due to the partial dis	positions of	1b	
С	Enter the total amount of assets				he partial dispositions		1c	
Par								From Other
	Than Casualty o							
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or o basis, plu improvements expense of	s and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
SEC	1231 PROPERTY	VARIOUS	VARIOUS		1,526			1,526
3	Gain, if any, from Form 46	884, line 39					3	
4	Section 1231 gain from in	stallment sales fron	m Form 6252, line 2	26 or 37			4	
5	Section 1231 gain or (loss	s) from like-kind exc	changes from Form	18824			5	
6	Gain, if any, from line 32,	from other than cas	sualty or theft				6	
7	Combine lines 2 through 6	6. Enter the gain or	(loss) here and on	the appropriate lin	e as follows		7	1,526
	Individuals, partners, Softom line 7 on line 11 bel 1231 losses, or they were Schedule D filed with your	ow and skip lines to recaptured in an e	8 and 9. If line 7 is arlier year, enter th	s a gain and you one gain from line 7	didn't have any prior	year section		
8	Nonrecaptured net section	n 1231 losses from	prior years. See in	structions			8	
9 Part	Subtract line 8 from line 7 line 9 is more than zero, e capital gain on the Sched	nter the amount froule D filed with you	om line 8 on line 12 r return. See instru	below and enter t	he gain from line 9 as	a long-term	9	
10	Ordinary gains and losses				eld 1 vear or less):			
	Ordinary game and lococo		loo iii amougii io (inolado proporty m				
11	Loss, if any, from line 7				-		11	()
12	Gain, if any, from line 7 or						12	,
13	Gain, if any, from line 31						13	0
14	Net gain or (loss) from For						14	
15	Ordinary gain from installr						15	
16	Ordinary gain or (loss) from						16	
17	Combine lines 10 through	•	-				17	0
18	For all except individual re a and b below. For individual	eturns, enter the an	nount from line 17	on the appropriate				
а	If the loss on line 11 include from income-producing proemployee.) Identify as from	operty on Schedule	A (Form 1040), line	e 16. (Do not includ	e any loss on property	used as an	18a	
b	Redetermine the gain or (Form 1040), Part I, line 4	(loss) on line 17 ex	xcluding the loss,	if any, on line 18a	a. Enter here and on	Schedule 1	18b	
For Pa	aperwork Reduction Act N				Cat. No. 13086l			Form 4797 (2023)

Form 4797 (2023) Page **2**

19	(a) Description of section 1245, 1250, 1252, 1254, or 1255 property:						uired /r.)	(c) Date sold (mo., day, yr.)
Α								
В								
С								
D								
	These columns relate to the properties on lines 19A through 19D).	Property A	Property	В	Property	С	Property D
20	Gross sales price (Note: See line 1a before completing.) .	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
24	Total gain. Subtract line 23 from line 20	24						
25	If section 1245 property:	 - 						
a	Depreciation allowed or allowable from line 22	25a						
b	Enter the smaller of line 24 or 25a	25b						
26	If section 1250 property: If straight line depreciation was used,							
	enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975. See instructions .	26a						
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
С	Subtract line 26a from line 24. If residential rental property							
	or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d	Additional depreciation after 1969 and before 1976 .	26d						
e	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f 26g						
<u>g</u>	If section 1252 property: Skip this section if you didn't	20g						
27	dispose of farmland or if this form is being completed							
	for a partnership.							
а	Soil, water, and land clearing expenses	27a						
b	Line 27a multiplied by applicable percentage. See instructions	27b						
С	Enter the smaller of line 24 or 27b	27c						
28	If section 1254 property:							
а	Intangible drilling and development costs, expenditures							
	for development of mines and other natural deposits,							
	mining exploration costs, and depletion. See instructions	28a						
b	Enter the smaller of line 24 or 28a	28b						
29	If section 1255 property:							
а	Applicable percentage of payments excluded from income under section 126. See instructions	29a						
h	Enter the smaller of line 24 or 29a. See instructions	29b						
Sun	nmary of Part III Gains. Complete property colur		through D throu	gh line 29b b	efore	going to lin	ne 30.	
30	Total gains for all properties. Add property columns A thro	ough D,	line 24				30	(
31	Add property columns A through D, lines 25b, 26g, 27c, 2	8b, and	29b. Enter here an	d on line 13 .			31	С
32	Subtract line 31 from line 30. Enter the portion from casu other than casualty or theft on Form 4797, line 6		theft on Form 468	4, line 33. Ente	er the	portion from	32	(
Pa	Recapture Amounts Under Sections 17 (see instructions)	79 and	1 280F(b)(2) Wh	en Busines	ss Us	se Drops to	50%	or Less
						(a) Section 179	on	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable	in prior	vears		33			
34					34			
35	Recapture amount. Subtract line 34 from line 33. See the	instruct	ons for where to re	port	35		0	C

Form **4797** (2023)