

Tax Exempt Entity Declaration and Signature
for E-file

OMB No. 1545-0047

2023

Department of the Treasury
Internal Revenue ServiceFor calendar year 2023, or tax year beginning _____ and ending _____
For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP
Go to www.irs.gov/Form8453TE for the latest information.

Name of filer

EIN or SSN

MUTUAL OF OMAHA FOUNDATION

20-2176636

Part I Type of Return and Return Information

Check the box for the type of return being filed with Form 8453-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	<input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input checked="" type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b	48,551.
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration of Officer or Person Subject to Tax

- 11a ☐ I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- b ☐ If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that ☒ I am an officer of the above named entity or ☐ I am the person subject to tax with respect to (name of entity) _____, (EIN) _____

and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign
Here

Signature of officer or person subject to tax

11/13/24

Date

PRES/SEC/DIR

Title, if applicable

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature	<i>Jennifer D. Rhoderick</i>	Date	11/13/24	Check if also paid preparer	<input checked="" type="checkbox"/>	Check if self- employed	<input type="checkbox"/>	ERO's SSN or PTIN	P00395735
	Firm's name (or yours if self-employed), address, and ZIP code	ERNST & YOUNG U.S. LLP 111 MONUMENT CIR STE 4000 INDIANAPOLIS IN 46204							EIN 34-6565596	Phone no. 317-681-7000

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self- employed	<input type="checkbox"/>	PTIN
	Firm's name					Firm's EIN
	Firm's address					Phone no.

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Form 8453-TE (2023)

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

2023

Open to Public Inspection

For calendar year 2023 or tax year beginning and ending

Name of foundation MUTUAL OF OMAHA FOUNDATION		A Employer identification number 20-2176636
Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number (see instructions) (866) 663-8665
City or town, state or province, country, and ZIP or foreign postal code OMAHA, NE 68175		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 106,691,699.		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)		

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	NONE			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B.				
	3 Interest on savings and temporary cash investments.	86,536.	86,536.		
	4 Dividends and interest from securities	625,213.	625,213.		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	2,101,602.			
	b Gross sales price for all assets on line 6a 65,915,350.				
	7 Capital gain net income (from Part IV, line 2) .		2,698,868.		
	8 Net short-term capital gain.				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)		383,588.		STMT 2	
12 Total. Add lines 1 through 11	2,813,351.	3,794,205.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc. . .	NONE			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule) . *	300,575.	300,575.		
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . **	34,820.			
	19 Depreciation (attach schedule) and depletion .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) STMT 5 .	728.	728.		
	24 Total operating and administrative expenses. Add lines 13 through 23.	336,123.	301,303.		
	25 Contributions, gifts, grants paid	5,571,757.			5,571,757.
26 Total expenses and disbursements. Add lines 24 and 25	5,907,880.	301,303.		5,571,757.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-3,094,529.				
b Net investment income (if negative, enter -0-)		3,492,902.			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash - non-interest-bearing	5,229,613.	5,945,126.	5,945,126.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable.			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts			
	8	Inventories for sale or use.			
	9	Prepaid expenses and deferred charges			
	10a	Investments - U.S. and state government obligations (attach schedule). **	9,889,377.	10,306,440.	10,306,440.
	b	Investments - corporate stock (attach schedule) . STMT 7 . .	3,801,969.	3,401,216.	3,401,216.
	c	Investments - corporate bonds (attach schedule).			
	Liabilities	11	Investments - land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule)		
12		Investments - mortgage loans.			
13		Investments - other (attach schedule) STMT 9 . .	82,199,295.	86,990,451.	86,990,451.
14		Land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule)			
15		Other assets (describe STMT 12)	83,288.	48,466.	48,466.
16		Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	101,203,542.	106,691,699.	106,691,699.
17		Accounts payable and accrued expenses			
18		Grants payable			
19		Deferred revenue.			
20		Loans from officers, directors, trustees, and other disqualified persons. .			
21	Mortgages and other notes payable (attach schedule)				
22	Other liabilities (describe)				
23	Total liabilities (add lines 17 through 22)	NONE	NONE		
Net Assets or Fund Balances		Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30 <input checked="" type="checkbox"/> X			
	24	Net assets without donor restrictions	101,203,542.	106,691,699.	
	25	Net assets with donor restrictions			
		Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30 <input type="checkbox"/>			
	26	Capital stock, trust principal, or current funds			
	27	Paid-in or capital surplus, or land, bldg., and equipment fund.			
	28	Retained earnings, accumulated income, endowment, or other funds . .			
	29	Total net assets or fund balances (see instructions)	101,203,542.	106,691,699.	
30	Total liabilities and net assets/fund balances (see instructions)	101,203,542.	106,691,699.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	101,203,542.
2	Enter amount from Part I, line 27a	2	-3,094,529.
3	Other increases not included in line 2 (itemize) SEE STATEMENT 13	3	8,582,686.
4	Add lines 1, 2, and 3	4	106,691,699.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	106,691,699.

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**

STMT 6

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a SEE PART IV SCHEDULE			
b			
c			
d			
e			

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

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

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	$\left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter -0- in Part I, line 7} \end{array} \right\}$	2	2,698,868.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8	$\left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in} \\ \text{Part I, line 8} \end{array} \right\}$	3	

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)	1	48,551.
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)	2	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	3	48,551.
3 Add lines 1 and 2	4	NONE
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	5	48,551.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	6a	52,180.
6 Credits/Payments:	6b	NONE
a 2023 estimated tax payments and 2022 overpayment credited to 2023	6c	NONE
b Exempt foreign organizations - tax withheld at source	6d	
c Tax paid with application for extension of time to file (Form 8868)	7	52,180.
d Backup withholding erroneously withheld	8	NONE
7 Total credits and payments. Add lines 6a through 6d	9	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	10	3,629.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	11	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		
11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 3,629. Refunded		

Form 990-PF (2023)

Part VI-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ <u>NONE</u> (2) On foundation managers. \$ <u>NONE</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>NONE</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <u>NE,</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>WWW.MUTUALOFOMAHAFoundation.ORG</u>	X	
14 The books are in care of <u>CORPORATE TAX</u> Telephone no. <u>402-351-8944</u> Located at <u>MUTUAL OF OMAHA PLAZA OMAHA, NE</u> ZIP+4 <u>68175</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15		
16 At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		X

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Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1a(5)	X
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	1a(6)	X
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	
c Organizations relying on a current notice regarding disaster assistance, check here. <input type="checkbox"/>		
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2023?	1d	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2023? If "Yes," list the years	2a	X
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a	X
b If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2023.)	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2023?	4b	X

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

	Yes	No
5a During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d) (4)(A)? See instructions.		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 14		NONE	NONE	NONE

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 NONE

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Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SEE STATEMENT 18		231,582.

Total number of others receiving over \$50,000 for professional services NONE

Part VIII-A Summary of Direct Charitable Activities

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

	Expenses
1 NONE	
2	
3	
4	

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

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

	Amount
1 NONE	
2	
All other program-related investments. See instructions.	
3 NONE	

Total. Add lines 1 through 3

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	100,823,887.
b	Average of monthly cash balances	1b	3,505,218.
c	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	104,329,105.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	104,329,105.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	1,564,937.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	102,764,168.
6	Minimum investment return. Enter 5% (0.05) of line 5.	6	5,138,208.

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part.)

1	Minimum investment return from Part IX, line 6.	1	5,138,208.
2a	Tax on investment income for 2023 from Part V, line 5.	2a	48,551.
b	Income tax for 2023. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b.	2c	48,551.
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	5,089,657.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4.	5	5,089,657.
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	5,089,657.

Part XI Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	5,571,757.
b	Program-related investments - total from Part VIII-B.	1b	NONE
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	5,571,757.

Form 990-PF (2023)

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X, line 7				5,089,657.
2 Undistributed income, if any, as of the end of 2023:				
a Enter amount for 2022 only.			NONE	
b Total for prior years: 20 21 , 20 20 , 20 19		NONE		
3 Excess distributions carryover, if any, to 2023:				
a From 2018				
b From 2019 31,960.				
c From 2020				
d From 2021 332,361.				
e From 2022 646,525.				
f Total of lines 3a through e	1,010,846.			
4 Qualifying distributions for 2023 from Part XI, line 4: \$ 5,571,757.				
a Applied to 2022, but not more than line 2a . . .			NONE	
b Applied to undistributed income of prior years (Election required - see instructions).				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2023 distributable amount.				5,089,657.
e Remaining amount distributed out of corpus. . .	482,100.			
5 Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,492,946.			
b Prior years' undistributed income. Subtract line 4b from line 2b		NONE		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount - see instructions		NONE		
e Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount - see instructions			NONE	
f Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024.				NONE
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2018 not applied on line 5 or line 7 (see instructions) . . .				
9 Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a	1,492,946.			
10 Analysis of line 9:				
a Excess from 2019 . . . 31,960.				
b Excess from 2020 . . .				
c Excess from 2021 . . . 332,361.				
d Excess from 2022 . . . 646,525.				
e Excess from 2023 . . . 482,100.				

Form 990-PF (2023)

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

NOT APPLICABLE

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2023, enter the date of the ruling

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

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2023	(b) 2022	(c) 2021	(d) 2020	
b 85% (0.85) of line 2a . . .					
c Qualifying distributions from Part XI, line 4, for each year listed .					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon: . .					
a "Assets" alternative test - enter:					
(1) Value of all assets . . .					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed . . .					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income .					

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SEE STATEMENT 19				5,571,757.
Total			3a	5,571,757.
b Approved for future payment				
Total			3b	

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- | 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
|---|--------------|-----|----|
| a Transfers from the reporting foundation to a noncharitable exempt organization of: | | | |
| (1) Cash | 1a(1) | | X |
| (2) Other assets | 1a(2) | | X |
| b Other transactions: | | | |
| (1) Sales of assets to a noncharitable exempt organization | 1b(1) | | X |
| (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | | X |
| (3) Rental of facilities, equipment, or other assets | 1b(3) | | X |
| (4) Reimbursement arrangements | 1b(4) | | X |
| (5) Loans or loan guarantees | 1b(5) | | X |
| (6) Performance of services or membership or fundraising solicitations | 1b(6) | | X |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | | X |
| d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | | |

[illegible]

- 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

Print/Type preparer's name

11/13/24
Date

PRES/SEC/DIR
Title

May the IRS discuss this return with the preparer shown below? See instructions. ☐ Yes ☒ No

**Paid
Preparer
Use Only**

Print/Type preparer's name

JENNIFER RHODERICK

Preparer's signature

Jennifer D. Rhoderick

Date _____

11/13/24

Check ☐ if self-employed

PTIN

P00395735

Firm's name	ERNST & YOUNG U.S. LLP
-------------	------------------------

Firm's EIN	34-6565596
------------	------------

Firm's address	111 MONUMENT CIR STE 4000
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46204

Phone no. 317-681-7000

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
65915350.		MARKETABLE INVESTMENTS PROPERTY TYPE: SECURITIES 64054166.				P	VAR 1,861,184.	VAR
		PASS-THRU: DAVIDSON KEMPNER INSTITUTIONAL PROPERTY TYPE: OTHER 51,927.				P	VAR -51,927.	VAR
16,035.		PASS-THRU: ENR PARTNERS II, LP PROPERTY TYPE: OTHER				P	VAR 16,035.	VAR
		PASS-THRU: GENERATION IM GLOBAL EQUITY FUND PROPERTY TYPE: OTHER 3,533.				P	VAR -3,533.	VAR
26,243.		PASS-THRU: INDEPENDENT FRANCHISE PARTNER PROPERTY TYPE: OTHER				P	VAR 26,243.	VAR
278.		PASS-THRU: KHP STRATEGIC 9, LP PROPERTY TYPE: OTHER				P	VAR 278.	VAR
25.		PASS-THRU: KLINE HILL PARTNERS FUND PROPERTY TYPE: OTHER				P	VAR 25.	VAR
75.		PASS-THRU: LEVEL EQUITY OPPORTUNITIES FUND PROPERTY TYPE: OTHER				P	VAR 75.	VAR
227.		PASS-THRU: MANULIFE PRIVATE EQUITY PARTNERS PROPERTY TYPE: OTHER				P	VAR 227.	VAR
525.		PASS-THRU: MIC CAPITAL PARTNERS III PARTNERS PROPERTY TYPE: OTHER				P	VAR 525.	VAR
		PASS-THRU: ORBIS INSTITUTIONAL GLOBAL EQUITY PROPERTY TYPE: OTHER 19,232.				P	VAR -19,232.	VAR

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
16,970.		PASS-THRU: PARAMETRIC GLOBAL DEFENSIVE E PROPERTY TYPE: OTHER				P	VAR 16,970.	VAR
		PASS-THRU: RUBICON TECHNOLOGY PARTNERS I PROPERTY TYPE: OTHER 9.				P	VAR -9.	VAR
175.		PASS-THRU: STEPSTONE VC GLOBAL PARTNERS PROPERTY TYPE: OTHER				P	VAR 175.	VAR
479.		PASS-THRU: TRUEBRIDGE CAPITAL PARTNERS F PROPERTY TYPE: OTHER				P	VAR 479.	VAR
		PASS-THRU: TRUEBRIDGE CAPITAL PARTNERS F PROPERTY TYPE: OTHER 30.				P	VAR -30.	VAR
		PASS-THRU: TRUEBRIDGE CAPITAL PARTNERS F PROPERTY TYPE: OTHER 21.				P	VAR -21.	VAR
164,749.		PASS-THRU: US RESEARCH EQUITY EXTENDED F PROPERTY TYPE: OTHER				P	VAR 164,749.	VAR
39,608.		PASS-THRU: VVP ALL CAP FUND, LLC PROPERTY TYPE: OTHER				P	VAR 39,608.	VAR
1,174.		PASS-THRU: C-BRIDGE HEALTHCARE FUND IV, PROPERTY TYPE: OTHER				P	VAR 1,174.	VAR
14,944.		PASS-THRU: DAVIDSON KEMPNER INSITUTIONAL PROPERTY TYPE: OTHER				P	VAR 14,944.	VAR
8,904.		PASS-THRU: ENR PARTNERS II, LP PROPERTY TYPE: OTHER				P	VAR 8,904.	VAR

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		PASS-THRU: GENERATION IM GLOBAL EQUITY F PROPERTY TYPE: OTHER 46,167.				P	VAR -46,167.	VAR
13,900.		PASS-THRU: HEARD HIGH CONVICTION LONG ON PROPERTY TYPE: OTHER				P	13,900.	
118,354.		PASS-THRU: INDEPENDENT FRANCHISE PARTNER PROPERTY TYPE: OTHER				P	VAR 118,354.	VAR
		PASS-THRU: KHP STRATEGIC 9, LP PROPERTY TYPE: OTHER 20,462.				P	VAR -20,462.	VAR
48,144.		PASS-THRU: KLINE HILL PARTNERS FUND PROPERTY TYPE: OTHER				P	VAR 48,144.	VAR
1,564.		PASS-THRU: LEVEL EQUITY OPPORTUNITIES FU PROPERTY TYPE: OTHER				P	VAR 1,564.	VAR
59,932.		PASS-THRU: MANULIFE PRIVATE EQUITY PARTN PROPERTY TYPE: OTHER				P	VAR 59,932.	VAR
13,503.		PASS-THRU: MIC CAPITAL PARTNERS III PARA PROPERTY TYPE: OTHER				P	VAR 13,503.	VAR
34,976.		PASS-THRU: ORBIS INSTITUTIONAL GLOBAL EQ PROPERTY TYPE: OTHER				P	VAR 34,976.	VAR
7,885.		PASS-THRU: PARAMETRIC GLOBAL DEFENSIVE E PROPERTY TYPE: OTHER				P	VAR 7,885.	VAR
767.		PASS-THRU: PEAK ROCK CAPITAL FUND II LP PROPERTY TYPE: OTHER				P	VAR 767.	VAR

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
12,769.		PASS-THRU: RUBICON TECHNOLOGY PARTNERS I PROPERTY TYPE: OTHER				P	VAR 12,769.	VAR
		PASS-THRU: SIRIS PARTNERS IV, LP PROPERTY TYPE: OTHER 208.				P	VAR -208.	VAR
26,299.		PASS-THRU: STEPSTONE VC GLOBAL PARTNERS PROPERTY TYPE: OTHER				P	VAR 26,299.	VAR
9,009.		PASS-THRU: TRUEBRIDGE CAPITAL PARTNERS F PROPERTY TYPE: OTHER				P	VAR 9,009.	VAR
670.		PASS-THRU: TRUEBRIDGE CAPITAL PARTNERS F PROPERTY TYPE: OTHER				P	VAR 670.	VAR
		PASS-THRU: TRUEBRIDGE CAPITAL PARTNERS F PROPERTY TYPE: OTHER 1,112.				P	VAR -1,112.	VAR
443,152.		PASS-THRU: US RESEARCH EQUITY EXTENDED F PROPERTY TYPE: OTHER				P	VAR 443,152.	VAR
		PASS-THRU: VVP ALL CAP FUND, LLC PROPERTY TYPE: OTHER 171,917.				P	VAR -171,917.	VAR
31,130.		PASS-THRU: ARROWSTREET ACWI EX US ALPHA PROPERTY TYPE: OTHER				P	VAR 31,130.	VAR
46,696.		PASS-THRU: ARROWSTREET ACWI EX US ALPHA PROPERTY TYPE: OTHER				P	VAR 46,696.	VAR
		PASS-THRU: ARROWSTREET EMERGING MARKET T PROPERTY TYPE: OTHER 6,263.				P	VAR -6,263.	VAR

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		PASS-THRU: ARROWSTREET EMERGING MARKET T PROPERTY TYPE: OTHER 9,395.				P	VAR -9,395.	VAR
95.		PASS-THRU: DAVIDSON KEMPNER INSTITUTIONA PROPERTY TYPE: OTHER				P	VAR 95.	VAR
142.		PASS-THRU: DAVIDSON KEMPNER INSTITUTIONA PROPERTY TYPE: OTHER				P	VAR 142.	VAR
		PASS-THRU: KLINE HILL PARTNERS FUND - 12 PROPERTY TYPE: OTHER 28.				P	VAR -28.	VAR
		PASS-THRU: KLINE HILL PARTNERS FUND - 12 PROPERTY TYPE: OTHER 42.				P	VAR -42.	VAR
		PASS-THRU: MANULIFE PRIVATE EQUITY PARTN PROPERTY TYPE: OTHER 4.				P	VAR -4.	VAR
		PASS-THRU: MANULIFE PRIVATE EQUITY PARTN PROPERTY TYPE: OTHER 5.				P	VAR -5.	VAR
		PASS-THRU: ORBIS INSTITUTIONAL GLOBAL EQ PROPERTY TYPE: OTHER 5,594.				P	VAR -5,594.	VAR
		PASS-THRU: ORBIS INSTITUTIONAL GLOBAL EQ PROPERTY TYPE: OTHER 8,390.				P	VAR -8,390.	VAR
		PASS-THRU: PARAMETRIC GLOBAL DEFENSIVE E PROPERTY TYPE: OTHER 4,641.				P	VAR -4,641.	VAR
		PASS-THRU: PARAMETRIC GLOBAL DEFENSIVE E PROPERTY TYPE: OTHER 6,961.				P	VAR -6,961.	VAR

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
12,019.		PASS-THRU: US RESEARCH EQUITY EXTENDED F PROPERTY TYPE: OTHER				P	VAR 12,019.	VAR
18,028.		PASS-THRU: US RESEARCH EQUITY EXTENDED F PROPERTY TYPE: OTHER				P	VAR 18,028.	VAR
TOTAL GAIN (LOSS)							----- 2,698,868. =====	

FORM 990PF - GENERAL EXPLANATION ATTACHMENT

=====

PART XIV LINE 2D

THE FOUNDATION REQUIRES A GRANT AGREEMENT WHICH I.) SPECIFIES THE RESPECTIVE RESPONSIBILITIES OF THE FOUNDATION AND THE RECIPIENT; II.) OBLIGATES THE RECIPIENT TO USE THE GRANT FUNDS ONLY FOR THE PURPOSES FOR WHICH THE GRANT WAS MADE; III.) INDICATES HOW AND WHEN ANY GRANT REPORTS REGARDING THE USE OF THE GRANT FUNDS SHOULD BE PROVIDED; AND IV.) ACKNOWLEDGES THE AUTHORITY OF MUTUAL OF OMAHA FOUNDATION TO WITHHOLD AND/OR RECOVER GRANT FUNDS IN CASE SUCH FUNDS ARE, OR APPEAR TO BE, MISUSED.

THE FOUNDATION PROVIDES GRANTS TO ORGANIZATIONS WHICH ARE EXEMPT FROM TAXATION UNDER SECTION 501(C)(3) AND MAY ALSO USE ITS FUNDS TO ENGAGE DIRECTLY IN SECTION 501(C)(3) EXEMPT ACTIVITIES. THE FOUNDATION'S MISSION IS TO BREAK THE CYCLE OF POVERTY FOR FAMILIES IN THE OMAHA METROPOLITAN AREA AND INVEST IN CIVIC PROJECTS THAT STRENGTHEN THE COMMUNITY. THE FOUNDATION'S FOCUS IS IN THE FOLLOWING AREAS:

- . BASIC NEEDS: HOMELESS PREVENTION, AFFORDABLE HOUSING, COMMUNITY HEALTH, FOOD, AND EMERGENCY SHELTER
- . ADULT SELF-SUFFICIENCY: WORKFORCE DEVELOPMENT, FINANCIAL EDUCATION, LITERACY AND LANGUAGE, DOMESTIC VIOLENCE, PARENTING CLASSES
- . YOUTH DEVELOPMENT: MENTORING, OUT-OF-SCHOOL PROGRAMS, TEEN PARENTING, COLLEGE AND CAREER PREP, ABUSE AND NEGLECT
- . DISASTER RELIEF
- . CIVIC INITIATIVES

FORM 990PF, PART I - OTHER INCOME
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
INCOME FROM PARTNERSHIPS	-----	383,588.
	-----	-----
TOTALS	=====	=====

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

=====

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
-----	-----	-----	-----	-----
CAMBRIDGE	231,583.	231,583.		
US BANK	32,560.	32,560.		
CITIBANK - HS MANAGEMENT	14,399.	14,399.		
CITIZENS BANK - BRECKINRIDGE	6,921.	6,921.		
NEWTON INVESTMENT MANAGEMENT	15,018.	15,018.		
AGENT FEE (HS MANAGEMENT)	94.	94.		
	-----	-----		
TOTALS	300,575.	300,575.		
	=====	=====		

FORM 990PF, PART I - TAXES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----
FEDERAL EXCISE TAX	34,820.

TOTALS	34,820.
	=====

FORM 990PF, PART I - OTHER EXPENSES
=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
BANK FEES	728.	728.
	-----	-----
TOTALS	728.	728.
	=====	=====

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ---
UNITED STATES TREASURY ISSUES	10,306,440.	10,306,440.
	-----	-----
US OBLIGATIONS TOTAL	10,306,440.	10,306,440.
	=====	=====

FORM 990PF, PART II - CORPORATE STOCK
=====

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
-----	-----	----
ALPHABET INC.	162,774.	162,774.
BEST BUY CO INC.	152,646.	152,646.
BOOKING HOLDINGS INC.	NONE	NONE
COCA COLA COMPANY	194,469.	194,469.
DICKS SPORTING GOODS INC.	213,078.	213,078.
HOME DEPOT INC	NONE	NONE
INTEL CORP	NONE	NONE
META PLATFORMS INC.	NONE	NONE
LAUDER ESTEE	NONE	NONE
LOCKHEED MARTIN CORP COM	NONE	NONE
MARRIOTT INTL INC	71,036.	71,036.
MCDONALDS CORP	91,918.	91,918.
MICROSOFT CORP	133,494.	133,494.
MONDELEZ INTERNATIONAL W I	177,454.	177,454.
NIKE	119,427.	119,427.
PEPSICO INC	199,562.	199,562.
PROCTER & GAMBLE CO.	139,213.	139,213.
RALPH LAUREN CORP.	97,335.	97,335.
STARBUCKS CORP	136,814.	136,814.
UNITED PARCEL SERVICE INC	NONE	NONE
VISA INC COM. CL A	66,389.	66,389.
WILLIAMS SONOMA, INC.	90,801.	90,801.
YUM BRANDS INC COM	179,658.	179,658.
DIAGEO PLC SPONSORED ADR	155,128.	155,128.
HEINEKEN NV SPON A D R	91,764.	91,764.
NESTLE SA SPONSORED ADR	112,739.	112,739.
SCHLUMBERGER LTD COM STK	NONE	NONE
BLACKROCK INC.	170,478.	170,478.
MATTEL INC	126,024.	126,024.

FORM 990PF, PART II - CORPORATE STOCK
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ----
PAYPAL	196,512.	196,512.
SCHWAB	249,400.	249,400.
LVMH MOET	73,103.	73,103.
	-----	-----
TOTALS	3,401,216.	3,401,216.
	=====	=====

MUTUAL OF OMAHA FOUNDATION

20-2176636

FORM 990PF, PART II - OTHER INVESTMENTS
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV -----
ITE RAIL FEED FUND LP	561,651.	561,651.
LINDEN CAPITAL PARTNERS V-A LP	341,521.	341,521.
LINDEN CO-INVESTMENT V-A LP	113,874.	113,874.
KLINE HILL PTR OFF FUND IV	854,906.	854,906.
KLINE HILL PTR SOL OFF FUND	744,788.	744,788.
FULL IN PARTNERS II, LP	287,138.	287,138.
RUBICON TECH PARTNERS IV L.P.	71,149.	71,149.
CENTER ROCK CAP PTR FUND II	161,586.	161,586.
SURGOCAP OFFSHORE FUND LP	616,263.	616,263.
THE A PLUS FUND LTD	2,310,799.	2,310,799.
ARROWST ACWI EX US ALPHA EXT U	2,902,376.	2,902,376.
DOVER STREET X, LP	617,664.	617,664.
MANULIFE PVT EQT PARTNERS LP	698,979.	698,979.
TRUEBRIDGE CAP PTR FUND VI LP	1,098,890.	1,098,890.
LFP GLOBAL EQUITY LP	3,497,090.	3,497,090.
JUNIPERUS INSURANCE OPP FD	950,534.	950,534.
FULL IN PARTNRS FUND I	510,319.	510,319.
RUBICON TECH PARTNERS III L.P	510,214.	510,214.
ASPEX GLOBAL FUND	1,393,633.	1,393,633.
KLINE HILL PRTRNS OPP. OFF III	248,079.	248,079.
KLINE HILL PRTRNS OFF FUND III	690,483.	690,483.
KPS SPECIAL FND V (A), LP	354,301.	354,301.
PARAMETRIC GLBL DEF EQ FND LLC	607,613.	607,613.
ATALAN OFFSHORE FUND, LTD.	1,658,180.	1,658,180.
JUNIPERUS INSURANCE OPP FUND	295,044.	295,044.
SAMLYN OFFSHORE, LTD.	1,702,092.	1,702,092.
MC PRIVATE EQUITY PARTNERS I-A	226,892.	226,892.
MIC CAP PTRIII PA CAY LP	186,814.	186,814.
C-BRIDGE HLTHCARE FUND V, L.P	625,028.	625,028.

MUTUAL OF OMAHA FOUNDATION

20-2176636

FORM 990PF, PART II - OTHER INVESTMENTS
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ----
PEAK ROCK CAPITAL FUND III LP	238,896.	238,896.
DAVIDSON KEMPNER INDST PTRS LP	2,543,842.	2,543,842.
PRESERVER LP	1,828,585.	1,828,585.
JUNIPERUS INSURANCE OPP L P	539,850.	539,850.
CORE INDST PTRS FD II LP	650,992.	650,992.
RECOGNIZE PARTNERS I-A, L.P.	329,679.	329,679.
TRUEBRIDGE CAPL PARTNER FD VII	483,897.	483,897.
VVP ALL CAP FUND, LLC	1,609,992.	1,609,992.
LEVEL EQTY GROWTH PTRS V LP	189,930.	189,930.
LEVEL EQUITY OPP FD 2021 LP	212,220.	212,220.
HEARD HIGH CONV LNG ONLY FD	1,862,932.	1,862,932.
SENTINEL CONT. FUND I, LP	42,166.	42,166.
LEVEL EQUITY OPP FD 2018 LP	325,975.	325,975.
CORE INDUSTRIAL PARTNERS FD I	504,368.	504,368.
STEPSTONE VC GLB PTRS IV-B LP	472,268.	472,268.
KHP STRATEGIC 9 LP	427,499.	427,499.
SIRIS PARTNERS IV, L.P	222,031.	222,031.
RIVERSIDE FUND VI-B L.P	769,815.	769,815.
ORBIS INST GLOBAL EQUITY LP	3,207,001.	3,207,001.
WHALE ROCK FLAGSHIP FUND	769,685.	769,685.
RWC HORIZON EQUITY FD LTD	NONE	NONE
KLINE HILL PARTNERS	668,713.	668,713.
BAXTER STREET OFFSHORE FUND	3,089,589.	3,089,589.
STONE CASTLE	4,447.	4,447.
HBK MULTI-STRATEGY OFFSHORE	2,282,034.	2,282,034.
TWO SIGMA ACTIVE EXTENSION	5,860,098.	5,860,098.
ENR PARTNERS II	445,756.	445,756.
CITY OF LONDON INTL EQUITY	3,767,671.	3,767,671.
PEAK ROCK CAPITAL FUND II	227,084.	227,084.

MUTUAL OF OMAHA FOUNDATION

20-2176636

FORM 990PF, PART II - OTHER INVESTMENTS
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV ----
CASTLELAKE AVN III STBL YIELD	380,236.	380,236.
RUBICON TECH PARTNERS II LP	440,707.	440,707.
RWC HORIZON EQUITY FUND	NONE	NONE
TRUEBRIDGE CAPITAL PTRS FUND V	1,451,362.	1,451,362.
FVP OVERSEAS LTD	25,593.	25,593.
PEAK ROCK CPTL CREDIT FD II LP	25,556.	25,556.
CENTER ROCK CAPITAL PARTNERS I	1,038,275.	1,038,275.
US RESEARCH EQTY EXT. FUND LP	6,341,059.	6,341,059.
KLINE HILL PTRS OFFSHORE FD II	648,630.	648,630.
C-BRIDGE HEALTHCARE FUND IV	741,345.	741,345.
BNYM MELL CF NSL DYN US EQ FD	3,561,937.	3,561,937.
ARROWST EMERGING MKRT TRUST FD	4,297,888.	4,297,888.
VANGUARD DEVELOPED ETF	980,992.	980,992.
VANGUARD TTL WORLD STK IN ETF	381,891.	381,891.
VANGUARD EMERGING MARKETS ETF	540,753.	540,753.
VANGUARD S&P 500	877,531.	877,531.
VANGUARD SHORT-TERM INFLATION	2,602,873.	2,602,873.
GENERATION IM GLOBAL EQ FD LLC	3,523,938.	3,523,938.
SENTINEL CPTL PARTNERS VII LP	32,260.	32,260.
SENTINEL JR CPTL II LP	40,098.	40,098.
TRUEBRIDGE CPTL PTRS FD VIII	17,570.	17,570.
LINDEN CPTL PTRS V-A AIV LP	341,520.	341,520.
TCP FUND VII LP	90,000.	90,000.
KLINE HILL PTRS OFFSHORE FF IV	193,522.	193,522.
TOTALS	86,990,451.	86,990,451.

FORM 990PF, PART II - OTHER ASSETS
=====

DESCRIPTION -----	ENDING BOOK VALUE -----	ENDING FMV -----
EXCISE TAX RECOVERABLE	48,466.	48,466.
TOTALS	48,466.	48,466.
	=====	=====

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES
=====

DESCRIPTION -----	AMOUNT -----
UNREALIZED GAINS ON INVESTMENT	8,582,686.

TOTAL	8,582,686.
	=====

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:

GAIL A GRAEVE

ADDRESS:

MUTUAL OF OMAHA PLAZA
OMAHA, NE 68175

TITLE:

PRESIDENT/SECRETARY/DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 20.00

COMPENSATION NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:

MICHAEL A. LECHTENBERGER

ADDRESS:

MUTUAL OF OMAHA PLAZA
OMAHA, NE 68175

TITLE:

VICE-PRESIDENT/DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.50

COMPENSATION NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:

ELIZABETH A. MAZZOTTA (TERM 12/23)

ADDRESS:

MUTUAL OF OMAHA PLAZA
OMAHA, NE 68175

TITLE:

TREASURER/DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.50

COMPENSATION NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:

RICHARD R. HRABCHAK

ADDRESS:

MUTUAL OF OMAHA PLAZA
OMAHA, NE 68175

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.50

COMPENSATION NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES
=====

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:

NANCY CRAWFORD (EFF 1/23)

ADDRESS:

MUTUAL OF OMAHA PLAZA
OMAHA, NE 68175

TITLE:

VICE PRESIDENT/DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.50

COMPENSATION NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

OFFICER NAME:

JUAN PRIETO MUNOZ (EFF 1/23)

ADDRESS:

MUTUAL OF OMAHA PLAZA
OMAHA, NE 68175

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0.50

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

COMPENSATION NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES NONE

TOTAL COMPENSATION: NONE

=====

TOTAL CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS: NONE

=====

EXPENSE ACCOUNT AND OTHER ALLOWANCES: NONE

=====

990PF, PART VII-COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS
=====

NAME:

CAMBRIDGE ASSOCIATES

ADDRESS:

125 HIGH STREET
BOSTON, MA 02110-2112

TYPE OF SERVICE:

INVESTMENT MGMT

COMPENSATION 231,582.

TOTAL COMPENSATION: 231,582.
=====

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

100 BLACK MEN OF OMAHA

ADDRESS:

2221 NORTH 24TH STREET

OMAHA, NE 68110

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

15,000.

RECIPIENT NAME:

AIM INSTITUTE

ADDRESS:

1905 HARNEY ST STE 700

OMAHA, NE 68102

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

2,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

ANGELS AMONG US

ADDRESS:

3858 JONES STREET, SUITE A

OMAHA, NE 68105

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 6,000.

RECIPIENT NAME:

AT EASE USA

ADDRESS:

10605 BURT CIRCLE

OMAHA, NE 68114

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

AUTISM ACTION PARTNERSHIP

ADDRESS:

10909 MILL VALLEY RD; 205

OMAHA, NE 68154

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:

BANISTERS LEADERSHIP ACADEMY

ADDRESS:

PO BOX 4002

OMAHA, NE 68104

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 7,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

BIG BROTHERS BIG SISTERS OF THE MIDLANDS

ADDRESS:

1209 HARNEY STREET; SUITE 110

OMAHA, NE 68102

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

35,000.

RECIPIENT NAME:

BLACK MEN UNITED

ADDRESS:

PO BOX 6627

OMAHA, NE 68106

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

BOARD OF REGENTS OF THE UNIVERSITY OF NEBRASKA

ADDRESS:

3835 HOLDREGE ST

LINCOLN, NE 68503

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

GOV

AMOUNT OF GRANT PAID.....

25,000.

RECIPIENT NAME:

BOY SCOUTS OF AMERICA, MID-AMERICA COUNCIL

ADDRESS:

12401 W MAPLE RD

OMAHA, NE 68164

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

20,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

BOYS & GIRLS CLUBS OF THE MIDLANDS

ADDRESS:

2610 HAMILTON ST

OMAHA, NE 68131

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 51,000.

RECIPIENT NAME:

CAROLE'S HOUSE OF HOPE

ADDRESS:

7815 HARNEY ST

OMAHA, NE 68114

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 20,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

CASA FOR DOUGLAS COUNTY

ADDRESS:

2412 ST. MARY'S AVENUE

OMAHA, NE 68105

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 50,000.

RECIPIENT NAME:

CATHOLIC CHARITIES

ADDRESS:

9223 BEDFORD AVE.

OMAHA, NE 68134

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 15,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

CATHOLIC COUNCIL FOR SOCIAL CONCERN INC

ADDRESS:

601 GRAND AVE

DES MOINES, IA 50309

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:

CHARLES DREW HEALTH CENTER INC

ADDRESS:

2915 GRANT ST

OMAHA, NE 68111

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 65,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

CHI HEALTH FOUNDATION/ALEGENT HEALTH FOUNDATION

ADDRESS:

12809 WEST DODGE ROAD

OMAHA, NE 68154

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 50,000.

RECIPIENT NAME:

CHILD SAVING INSTITUTE INC

ADDRESS:

4545 DODGE STREET

OMAHA, NE 68132

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 40,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

CHILDREN'S HOSPITAL & MEDICAL CENTER FOUNDATION

ADDRESS:

8404 INDIAN HILLS, DRIVE, STE 650

OMAHA, NE 68114

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:

CHRISTIAN HOME ASSOCIATION CHILDRENS SQUARE U S A

ADDRESS:

520 NORTH 7TH STREET

COUNCIL BLUFFS, IA 51503

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 15,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

CHRISTIAN OUTREACH PROGRAM-ELKHORN (COPE)

ADDRESS:

P.O. BOX 177

ELKHORN, NE 68022

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

15,000.

RECIPIENT NAME:

CITY SPROUTS INC

ADDRESS:

PO BOX 31593

OMAHA, NE 68131

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

COLLEGE POSSIBLE

ADDRESS:

755 PRIOR AVE N; SUITE 210

SAINT PAUL, MN 55104

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:

COMMUNITY ALLIANCE, INC.

ADDRESS:

4001 LEAVENWORTH ST

OMAHA, NE 68105

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

SO III FI

AMOUNT OF GRANT PAID..... 25,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
COMPLETELY KIDS
ADDRESS:
2566 ST MARYS AVE

OMAHA, NE 68105
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 40,000.

RECIPIENT NAME:
CONFERENCE FOR INCLUSIVE COMMUNITIES
ADDRESS:
6400 UNIVERSITY DR N CEC 122

OMAHA, NE 68182
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
COUNCIL BLUFFS SCHOOLS FOUNDATION
ADDRESS:
300 W BROADWAY; SUITE 212

COUNCIL BLFS, IA 51503
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 35,000.

RECIPIENT NAME:
CREIGHTON UNIVERSITY
ADDRESS:
2500 CALIFORNIA PLZ

OMAHA, NE 68154
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

CAPITAL CAMPAIGN SUPPORT/ GENERAL OPERATING
SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 290,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

ECONOMIC EMPOWERMENT CENTER

ADDRESS:

4706 S 24TH ST

OMAHA, NE 68107

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:

EMPLOYEE FINANCIAL ASSISTANCE FUND

ADDRESS:

MUTUAL OF OMAHA PLAZA

OMAHA, NE 68175

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

MATCHING GIFT/ GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 129,093.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

EQUAL PLAY - INSPIRING CONFIDENCE FOR GIRLS

ADDRESS:

117 N 32ND AVE STE 202

OMAHA, NE 68131

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

5,000.

RECIPIENT NAME:

FAMILY HOUSING ADVISORY SERVICES

ADDRESS:

2401 LAKE ST

OMAHA, NE 68111

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

35,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

FATHER FLANAGAN'S BOYS' HOME, AKA BOYS TOWN

ADDRESS:

14100 CRAWFORD ST - MOD 1

BOYS TOWN, NE 68010

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:

FOOD BANK FOR THE HEARTLAND

ADDRESS:

10525 J STREET

OMAHA, NE 68127

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 150,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

GIRL SCOUTS SPIRIT OF NEBRASKA

ADDRESS:

2121 S 44TH ST

OMAHA, NE 68105

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

20,000.

RECIPIENT NAME:

GIRLS INC OF OMAHA

ADDRESS:

2811 N 45TH ST

OMAHA, NE 68104

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

50,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

GOODWILL OF OMAHA

ADDRESS:

4805 NORTH 72ND STREET

OMAHA, NE 68134

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:

HABITAT FOR HUMANITY OF COUNCIL BLUFFS

ADDRESS:

1228 SOUTH MAIN ST.

COUNCIL BLFS, IA 51503

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 15,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

HABITAT FOR HUMANITY OF OMAHA

ADDRESS:

1701 N 24TH ST

OMAHA, NE 68110

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT/ CAPITAL CAMPAIGN

SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

200,000.

RECIPIENT NAME:

HARBOR HOUSE DBA HOSPICE HOUSE

ADDRESS:

12809 W DODGE RD

OMAHA, NE 68154

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

HEART MINISTRY CENTER

ADDRESS:

2222 BINNEY ST

OMAHA, NE 68110

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

62,500.

RECIPIENT NAME:

HEARTLAND EQUINE THERAPEUTIC RIDING ACADEMY INC

ADDRESS:

10130 S 222ND STREET

GRETN, NE 68028

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

5,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
HEARTLAND FAMILY SERVICE (HFS)
ADDRESS:
2101 S 42 ST

OMAHA, NE 68105
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 75,000.

RECIPIENT NAME:
HEARTLAND HOPE MISSION
ADDRESS:
2021 U STREET

OMAHA, NE 68107-3666
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 35,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

HEARTLAND WORKERS CENTER

ADDRESS:

4923 S 24TH ST STE 3A

OMAHA, NE 68107

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

15,000.

RECIPIENT NAME:

HO-CHUNK DEVELOPMENT CORPORATION

ADDRESS:

509 HOCHUNK PLAZA N

WINNEBAGO, NE 51104

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

25,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

HOLY NAME HOUSING CORPORATION

ADDRESS:

4324 FORT ST

OMAHA, NE 68111

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 20,000.

RECIPIENT NAME:

HOPE CENTER FOR KIDS, INC.

ADDRESS:

2200 N 20TH ST

OMAHA, NE 68110

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 30,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

IMMIGRANT LEGAL CENTER

ADDRESS:

4223 CENTER ST

OMAHA, NE 68105

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT/ CAPITAL CAMPAIGN

SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 150,000.

RECIPIENT NAME:

INCOMMON COMMUNITY DEVELOPMENT

ADDRESS:

1340 PARK AVE.

OMAHA, NE 68105

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
INTERCULTURAL SENIOR CENTER
ADDRESS:
5545 CENTER STREET

OMAHA, NE 68106
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 40,000.

RECIPIENT NAME:
INTERNATIONAL COUNCIL FOR REFUGEES AND IMMIGRANTS
ADDRESS:
6901 DODGE ST STE 104

OMAHA, NE 68132
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

IOWA JAG INC

ADDRESS:

1111 9TH ST

DES MOINES, IA 50314

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:

IOWA LEGAL AID

ADDRESS:

666 WALNUT ST FLOOR 25

DES MOINES, IA 50309

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 20,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

JENNIE EDMUNDSON HOSPITAL FOUNDATION

ADDRESS:

933 EAST PIERCE STREET

COUNCIL BLUFFS, IA 51503

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 15,000.

RECIPIENT NAME:

KEEP AMERICA BEAUTIFUL, INC.

ADDRESS:

1010 WASHINGTON BLVD; 3RD FLOOR

STAMFORD, CT 06901

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

KIDS CAN COMMUNITY CENTER

ADDRESS:

4768 Q ST

OMAHA, NE 68117

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 40,000.

RECIPIENT NAME:

KNIGHTS OF AK-SAR-BEN FOUNDATION

ADDRESS:

7101 MERCY RD STE 320

OMAHA, NE 68106

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

LATINO CENTER OF THE MIDLANDS

ADDRESS:

4821 S 24TH STREET

OMAHA, NE 68107

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 30,000.

RECIPIENT NAME:

LEGAL AID OF NEBRASKA

ADDRESS:

209 SOUTH 19TH ST., STE. 200

OMAHA, NE 68102

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 40,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

LUTHERAN FAMILY SERVICES OF NEBRASKA, INC.

ADDRESS:

7929 WEST CENTER RD

OMAHA, NE 68124

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 75,000.

RECIPIENT NAME:

MAGDALENE OMAHA INC

ADDRESS:

930 S. 48TH STREET

OMAHA, NE 68106

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 20,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

MERCY HOUSING MIDWEST

ADDRESS:

1600 BROADWAY; SUITE 2000

DENVER, CO 80202

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:

METHODIST HOSPITAL FOUNDATION

ADDRESS:

8701 WEST DODGE ROAD; SUITE 450

OMAHA, NE 68114

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 50,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

METRO AREA CONTINUUM OF CARE FOR THE HOMELESS

ADDRESS:

6001 DODGE STREET, SUITE 117D, CEC

OMAHA, NE 68182

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

25,000.

RECIPIENT NAME:

METROPOLITAN COMMUNITY COLLEGE FOUNDATION

ADDRESS:

PO BOX 3777

OMAHA, NE 68103

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

25,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

MICAH HOUSE

ADDRESS:

1415 AVENUE J

COUNCIL BLFS, IA 51501

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 40,000.

RECIPIENT NAME:

MIDLANDS LATINO COMMUNITY DEVELOPMENT CORPORATION

ADDRESS:

DEVELOPMENT CORP 4923 S 24TH ST SUI

OMAHA, NE 68107

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

NATIONAL PARK FOUNDATION

ADDRESS:

1500 K STREET SUITE 700, NW

WASHINGTON, DC 20005

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

GOV

AMOUNT OF GRANT PAID..... 100,000.

RECIPIENT NAME:

NEBRASKA 4-H FOUNDATION

ADDRESS:

PO BOX 4500

LINCOLN, NE 68504

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 7,500.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

NEBRASKA AIDS PROJECT

ADDRESS:

6220 MAPLE STREET

OMAHA, NE 68104

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

10,000.

RECIPIENT NAME:

NEBRASKA APPLESEED

ADDRESS:

PO BOX 83613

LINCOLN, NE 68501-3613

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

25,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

NEBRASKA CENTER FOR WORKFORCE DEVELOPMENT AND EDUC

ADDRESS:

6001 GROVER ST STE 2

OMAHA, NE 68106

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:

NEBRASKA CHILDREN AND FAMILIES FOUNDATION

ADDRESS:

215 CENTENNIAL MALL S STE 200

LINCOLN, NE 68508

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 30,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

NEBRASKA CHILDREN'S HOME SOCIETY (NCHS)

ADDRESS:

4939 S 118TH ST

OMAHA, NE 68137

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:

NEBRASKA COALITION TO END SEXUAL AND DOMESTIC VIOL

ADDRESS:

245 S 84TH ST STE 200

LINCOLN, NE 68510

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

NEBRASKA DIAPER BANK

ADDRESS:

9100 F ST SUITE 100

OMAHA, NE 68127

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

5,000.

RECIPIENT NAME:

NEOLA BETTERMENT CORPORATION

ADDRESS:

PO BOX 143

NEOLA, IA 51559

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

5,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

NEW VISIONS HOMELESS SERVICES

ADDRESS:

1435 N 15TH ST

COUNCIL BLUFFS, IA 51501

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

30,000.

RECIPIENT NAME:

NO MORE EMPTY POTS

ADDRESS:

8511 NORTH 30TH STREET

OMAHA, NE 68112

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

30,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

NORTHSTAR FOUNDATION

ADDRESS:

4242 N 49TH AVE

OMAHA, NE 68104

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

25,000.

RECIPIENT NAME:

OMAHA HOME FOR BOYS

ADDRESS:

4343 N 52ND ST

OMAHA, NE 68104

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

25,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

=====

RECIPIENT NAME:

OMAHA MUNICIPAL LAND BANK

ADDRESS:

1905 HARNEY ST; #224

OMAHA, NE 68102

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

25,000.

RECIPIENT NAME:

OMAHA PERFORMING ARTS

ADDRESS:

1200 DOUGLAS

OMAHA, NE 68102

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

CAPITAL CAMPAIGN SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

250,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

ONEWORLD COMMUNITY HEALTH CENTER

ADDRESS:

4920 SOUTH 30TH STREET; SUITE 103

OMAHA, NE 68107

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

65,000.

RECIPIENT NAME:

OUTLINC INC DBA OUTNEBRASKA

ADDRESS:

211 N 14TH ST

LINCOLN, NE 68508

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

5,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
OUTLOOK ENRICHMENT
ADDRESS:
4125 S 72ND ST

OMAHA, NE 68127
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:
PARTNERSHIP 4 KIDS
ADDRESS:
1004 FARNAM STREET, SUITE 200

OMAHA, NE 68102
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

SO I

AMOUNT OF GRANT PAID..... 35,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

PROJECT HARMONY CHILD ADVOCACY CENTER

ADDRESS:

11949 Q ST

OMAHA, NE 68137

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

60,000.

RECIPIENT NAME:

PROJECT HOUSEWORKS

ADDRESS:

2316 SOUTH 24TH STREET

OMAHA, NE 68108

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

20,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

RABBLE MILL

ADDRESS:

2005 Y ST

LINCOLN, NE 68503

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 2,500.

RECIPIENT NAME:

REFUGEE WOMEN RISING

ADDRESS:

3902 GAVENPORT STREET

OMAHA, NE 68131

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
RESTORING DIGNITY
ADDRESS:
10818 J STREET

OMAHA, NE 68137
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:
RISE (FORMERLY DEFY NEBRASKA)
ADDRESS:
3555 FARNAM ST; SUITE 222

OMAHA, NE 68131
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

RONALD MCDONALD HOUSE CHARITIES IN OMAHA, INC.

ADDRESS:

620 S 38TH AVE

OMAHA, NE 68105

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:

SANTA MONICA, INC.

ADDRESS:

401 S 39TH ST

OMAHA, NE 68131

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 20,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

SAVING GRACE PERISHABLE FOOD RESCUE, INC.

ADDRESS:

4611 S 96TH ST STE 154

OMAHA, NE 68127

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 30,000.

RECIPIENT NAME:

SEVENTY FIVE NORTH

ADDRESS:

2112 NORTH 30TH STREET 200

OMAHA, NE 68111

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

MUTUAL OF OMAHA FOUNDATION

20-2176636

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

SHARE OMAHA

ADDRESS:

6825 PINE STREET; M/S B3

OMAHA, NE 68106

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

25,000.

RECIPIENT NAME:

SIENA FRANCIS HOUSE

ADDRESS:

P.O. BOX 217 DTS

OMAHA, NE 68101

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

75,000.

STATEMENT 68

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

SOUTHSIDE REDEVELOPMENT CORPORATION

ADDRESS:

2411 O ST

OMAHA, NE 68107

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:

SPECIAL OLYMPICS NEBRASKA

ADDRESS:

9427 F ST

OMAHA, NE 68127

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 5,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

ST. AUGUSTINE INDIAN MISSION SCHOOL

ADDRESS:

705 SOUTH MISSION DRIVE; PO BOX 766

WINNEBAGO, NE 68071

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 30,000.

RECIPIENT NAME:

STEPHEN CENTER, INC.

ADDRESS:

2723 Q STREET

OMAHA, NE 68107

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 50,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

TEAMMATES MENTORING PROGRAM

ADDRESS:

121 SOUTH 13TH STREET, SUITE 300

LINCOLN, NE 68508

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:

THE AMERICAN RED CROSS

ADDRESS:

431 18TH ST NW

WASHINGTON, DC 20006

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT/ GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 125,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
THE BIG GARDEN
ADDRESS:
5602 READ ST

OMAHA, NE 68152
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 15,000.

RECIPIENT NAME:
THE BLACKBAUD GIVING FUND
ADDRESS:
65 FAIRCHILD STREET

DANIEL ISLAND, SC 29492
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

MATCHING GIFT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 108,164.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
THE COLLECTIVE FOR HOPE
ADDRESS:
7811 FARNAM DRIVE

OMAHA, NE 68114
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 25,000.

RECIPIENT NAME:
THE FURNITURE PROJECT OMAHA (TFP)
ADDRESS:
10808 J STREET

OMAHA, NE 68137
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

THE SALVATION ARMY - OMAHA

ADDRESS:

5550 PRAIRIE STONE PARKWAY

HOFFMAN ESTATES, IL 60192

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PROGRAM SUPPORT/ CAPITAL CAMPAIGN SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 550,000.

RECIPIENT NAME:

THE SIMPLE FOUNDATION

ADDRESS:

3157 FARNAM STREET; SUITE 7104

OMAHA, NE 68131

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

THE WELLBEING PARTNERS

ADDRESS:

6001 DODGE STREET

OMAHA, NE 68182

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 10,000.

RECIPIENT NAME:

TOGETHER INC OF METROPOLITAN OMAHA

ADDRESS:

812 S 24TH STREET

OMAHA, NE 68108

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 65,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

UNIVERSITY OF NEBRASKA FOUNDATION

ADDRESS:

1010 LINCOLN MALL; SUITE 300

LINCOLN, NE 68508

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

CAPITAL CAMPAIGN SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

375,000.

RECIPIENT NAME:

URBAN LEAGUE OF NEBRASKA

ADDRESS:

3040 LAKE STREET

OMAHA, NE 68111

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT/ BOARD DIRECTED GIVING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

40,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:
VISITING NURSE HEALTH SERVICES
ADDRESS:
12565 W CENTER RD

OMAHA, NE 68144
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 50,000.

RECIPIENT NAME:
WOMEN'S CENTER FOR ADVANCEMENT
ADDRESS:
3801 HARNEY ST.

OMAHA, NE 68131
RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 75,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

YMCA OF GREATER OMAHA

ADDRESS:

430 SOUTH 20TH

OMAHA, NE 68102

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

20,000.

RECIPIENT NAME:

YOUTH CARE & BEYOND INC

ADDRESS:

15418 WEIR STREET; SUITE 317

OMAHA, NE 68137

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

10,000.

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID
=====

RECIPIENT NAME:

YOUTH EMERGENCY SERVICES

ADDRESS:

2566 FARNAM ST., SUITE 301

OMAHA, NE 68131

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT/ CAPITAL CAMPAIGN
SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

295,000.

RECIPIENT NAME:

YOUTURN

ADDRESS:

4344 N 34TH AVE

OMAHA, NE 68111

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL OPERATING SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID.....

10,000.

TOTAL GRANTS PAID:

5,571,757.
=====

Notice of Inconsistent Treatment or Administrative Adjustment Request (AAR)

OMB No. 1545-0074

(Rev. October 2023)
Department of the Treasury
Internal Revenue Service(For use by partners, S corporation shareholders, estate and domestic trust beneficiaries, foreign trust owners and beneficiaries, REMIC residual interest holders, TMPs, and PRs.)
Go to www.irs.gov/Form8082 for instructions and the latest information.Attachment
Sequence No. **84**

Name(s) shown on return

Identifying number

MUTUAL OF OMAHA FOUNDATION

20-2176636

Part I General Information**1** Check boxes that apply:(a) ☒ Notice of inconsistent treatment (go to line 2)(b) ☐ AAR (choose one below - see instructions)For partnership tax years beginning **before** January 1, 2018 (unless electing into BBA)☐ TEFRA AAR☐ ELPs/REMICsFor partnership tax years beginning **after** December 31, 2017 (or that elected into BBA for tax years beginning after November 2, 2015, and before January 1, 2018)☐ BBA AAR - go to item A below**A** Is the partnership revoking the immediately preceding partnership representative (and/or designated individual, if applicable) and designating a successor (including the appointment of a designated individual, if applicable) at the same time that the AAR is being filed? If "Yes," attach Form 8979**B** Do the adjustments on the AAR result in an imputed underpayment (IU) for the reviewed year? If "Yes," go to item C1. If "No," go to item D**C1** Is the partnership making an election under section 6227(b)(2) to have the adjustments taken into account by the reviewed year partners? If "Yes," go to Question D. If "No," go to item C2**C2** Are there also adjustments that do not result in an IU? (An adjustment does not result in an IU if the result of netting with respect to any grouping or subgrouping that includes the particular adjustment is a net negative adjustment.) If "Yes," go to item D and then answer item E. If "No," go to item E**D** If the partnership is required to provide statements to the reviewed year partners containing their share of the adjustments, by signing below, the partnership representative declares, under penalties of perjury, that all statements have been provided to the reviewed year partners as required by the instructions.

Partnership Representative Name (or designated individual, if appropriate)

Date

E Is the partnership applying modifications to the IU? If "Yes," attach Form 8980**2** Identify type of pass-through entity in which you are a partner, shareholder, or member.(a) ☐ TEFRA Partnership (b) ☐ S corporation (c) ☐ Estate (d) ☐ Trust (e) ☐ REMIC (f) ☒ BBA Partnership**3** Employer identification number of pass-through entity
SEE ATTACHED**5** Internal Revenue Service Center where pass-through entity filed its return
E-FILE**4** Name, address, and ZIP code of pass-through entity
SEE ATTACHED**6** Tax year of pass-through entity
01/01/2023 to 12/31/2023**7** Your tax year
01/01/2023 to 12/31/2023**Part II Inconsistent or Administrative Adjustment Request (AAR) Items**

(a) Description of inconsistent or AAR items (see instructions)	(b) Inconsistency is in, or AAR is to correct (check boxes that apply)		(c) Amount as shown on Schedule K-1, Schedule Q, or similar statement; a foreign trust statement; or your return, whichever applies (see instructions)	(d) Amount you are reporting	(e) Difference between (c) and (d)
	Amount of item	Treatment of item			
8 SCHEDULE K-1 NOT RECEIVED	X	X	UNKNOWN	0.00	UNKNOWN
9					
10					
11					

For Paperwork Reduction Act Notice, see separate instructions.

Form **8082** (Rev. 10-2023)

Part III Explanations - Enter the Part II item number before each explanation. Show how the IU was calculated and how modifications were applied.

#8 THE TAXPAYER HAS AN INVESTMENT IN THE PASS-THROUGH ENTITY

#8 THE TAXPAYER DID NOT RECEIVE THE SCHEDULE K-1 FROM THE PASS-THROUGH ENTITY PRIOR TO
FILING ITS TAX RETURN

FORM 8082 Part I Line 3 and Line 4

Partnerships/Joint Ventures		
	EIN	Address
Castlelake Aviation III Stbl Yield *** 97MSCS585	81-3294316	CASTLELAKE AVIATION III STABLE YIELD, L.P 250 NICOLLET MALL SUITE 900 MINNEAPOLIS, MN 55401
Center Rock Capital Partners Fund II *** 95MSC8A04	87-3808260	CENTER ROCK CAPITAL PARTNERS FUND II, LP 39400 WOODWARD AVE, STE 240 BLOOMFIELD HILLS, MI 48304
Center Rock Capital Partners I *** 97MSCX0V8	82-3689372	CENTER ROCK CAPITAL PARTNERS FUND I, LP 39400 WOODWARD AVE, STE 240 BLOOMFIELD HILLS, MI 48304
City Of London International Equity *** 97MSCSNV4	82-6360347	CA INTERNATIONAL EQUITY CEF FUND 4005 KENNETT PIKE, SUITE 250 (AIM#19G-0250) GREENVILLE, DE 19807
Core Industrial Partners Fund I *** 96MSC2G82	83-0858940	CORE INDUSTRIAL PARTNERS FUND I, L.P 150 N RIVERSIDE PLAZA, SUITE 2050 CHICAGO, IL 60606
Dover Street X, LP	83-2356376	DOVER STREET X L.P. ONE FINANCIAL CENTER BOSTON, MA 02111
Ite Rail Feed Fund LP ****95MSC0V40	NA	NA
Kps SpecialSituations Fnd V (A), LP *** 96MSCFV86	NA	NA
Linden Capital Partners V-A Aiv LP ***95MSCV277	NA	NA
Mc Private Equity Partners I-A ***96MSCLQF3	98-1583061	MC PRIVATE EQUITY PARTNERS I - A, LP 375 PARK AVENUE SUITE 3201 NEW YORK, NY 10152
Pimco Stockplus LP B ***96MSCFFD3	NA	NA
Preserver LP ***96MSCP5U4	27-1367437	PRESERVER, L.P. 425 MADISON AVENUE MEMPHIS, TN 38103
Riverside Fund VI-B L.P. ***96MSC7336	83-0972997	RIVERSIDE FUND VI-B, L.P. 699 BOYLSTON STREET, 14TH FLOOR BOSTON, MA 02116
Sentinel Continuation Fund I, LP ***96MSCWC23	87-1425293	SENTINEL CONTINUATION FUND I, L.P. ONE VANDERBILT AVENUE, 53RD FLOOR NEW YORK, NY 10017
Surgocap Offshore Fund LP ***95MSC9185	NA	NA
Tcp Fund VII, LP ***95MSCYDR5	NA	NA

Form **2220****Underpayment of Estimated Tax by Corporations**

OMB No. 1545-0123

Department of the Treasury
Internal Revenue ServiceAttach to the corporation's tax return.
Go to www.irs.gov/Form2220 for instructions and the latest information.**2023**

Name MUTUAL OF OMAHA FOUNDATION	Employer identification number 20-2176636
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Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1 Total tax (see instructions)	1	48,551.
2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method.	2b	
c Credit for federal tax paid on fuels (see instructions)	2c	
d Total. Add lines 2a through 2c	2d	
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty.	3	48,551.
4 Enter the tax shown on the corporation's 2022 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	52,145.
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	48,551.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- | | |
|---|---|
| 6 | <input type="checkbox"/> The corporation is using the adjusted seasonal installment method. |
| 7 | <input type="checkbox"/> The corporation is using the annualized income installment method. |
| 8 | <input checked="" type="checkbox"/> The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. |

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	05/15/2023	06/15/2023	09/15/2023	12/15/2023
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column.	12,138.	12,138.	12,138.	12,138.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions <i>Complete lines 12 through 18 of one column before going to the next column.</i>	52,180.			
12 Enter amount, if any, from line 18 of the preceding column		40,042.	27,904.	15,766.
13 Add lines 11 and 12		40,042.	27,904.	15,766.
14 Add amounts on lines 16 and 17 of the preceding column				
15 Subtract line 14 from line 13. If zero or less, enter -0-	52,180.	40,042.	27,904.	15,766.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-				
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18				
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column.	40,042.	27,904.	15,766.	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

For Paperwork Reduction Act Notice, see separate instructions.

Form **2220** (2023)

JSA

3X8006 1.000

3288RZ 1546 11/11/2024 23:43:02 V23-7.4F

111

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions				
20 Number of days from due date of installment on line 9 to the date shown on line 19.				
21 Number of days on line 20 after 4/15/2023 and before 7/1/2023				
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{365} \times 7\% (0.07)$	\$	\$	\$	\$
23 Number of days on line 20 after 6/30/2023 and before 10/1/2023				
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{365} \times 7\% (0.07)$	\$	\$	\$	\$
25 Number of days on line 20 after 9/30/2023 and before 1/1/2024				
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{365} \times 8\% (0.08)$	\$	\$	\$	\$
27 Number of days on line 20 after 12/31/2023 and before 4/1/2024				
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{366} \times 8\% (0.08)$	\$	\$	\$	\$
29 Number of days on line 20 after 3/31/2024 and before 7/1/2024				
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{366} \times \%$	\$	\$	\$	\$
31 Number of days on line 20 after 6/30/2024 and before 10/1/2024				
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{366} \times \%$	\$	\$	\$	\$
33 Number of days on line 20 after 9/30/2024 and before 1/1/2025				
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33}}{366} \times \%$	\$	\$	\$	\$
35 Number of days on line 20 after 12/31/2024 and before 3/16/2025				
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35}}{365} \times \%$	\$	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	\$	\$	\$	\$

38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns **38** \$ **NONE**

*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 800-829-4933 to get interest rate information.

Form **2220** (2023)