

File with
Your County
Assessor

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations
Read instructions on reverse side.

FORM
451

Failure to properly complete or timely file this application will result in a denial of the exemption.

Name of Organization Catholic Foundation of Southern Nebraska		County Name Lancaster	Tax Year 2017
Name of Owner of Property Catholic Foundation of Southern Nebraska		State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 3700 Sheridan Blvd, Suite 9		Total Actual Value of Real and Personal Property \$ 18,334.00	Parcel ID Number P058358
City Lincoln	State NE	Zip Code 68506	Contact Name Chris Raun
Type of Ownership <input type="checkbox"/> Agricultural and Horticultural Society <input type="checkbox"/> Educational Organization <input checked="" type="checkbox"/> Religious Organization <input checked="" type="checkbox"/> Charitable Organization <input type="checkbox"/> Cemetery Organization		Phone Number 402-488-2142	

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
Chris Raun	Executive Director	3700 Sheridan Blvd, Suite 9, Lincoln, NE 68506

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:

Laptops, Computers, Storage Drives, Battery Backups, Docking Stations, and Wireless Routers
Office Furniture

RECEIVED

JUN 01 2017

Property described above is used in the following exempt category (please mark the applicable boxes):

- Agricultural and Horticultural Society Educational Religious Charitable Cemetery

NORMAN H. AGENA
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

Give a detailed description of the use of the property:

The Catholic Foundation of Southern Nebraska exists to proclaim the Good News of Salvation by offering opportunities to financially support the spiritual, educational, and charitable works of all Catholic parishes, schools, diocesan offices and agencies. All property listed above is used in the daily operations of the organization.

All organizations, except for an Agricultural and Horticultural Society, must complete the following questions.

- Is all of the property used exclusively as described above? YES NO
- Is the property used for financial gain or profit to either the owner or owner or organization making exclusive use of the property? .. YES NO
- Is a portion of the property used for the sale of alcoholic beverages? YES NO
If Yes, state the number of hours per week _____
- Is the property owned or used by an organization which discriminates in membership or employment based on race, color, or national origin? YES NO

Under penalties of law, I declare that I have examined this exemption application and, to the best of my knowledge and belief, it is correct and complete. I also declare that I am duly authorized to sign this exemption application.

sign
here

Chris Raun
Authorized Signature

Executive Director
Title

5/31/2017
Date

Retain a copy for your records.

For County Assessor's Recommendation

- Approval COMMENTS: _____
- Approval of a Portion _____
- Denial _____
- Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

I declare that to the best of my knowledge and belief, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of Nebraska.

- Approved COMMENTS: _____
- Approval of a Portion _____
- Denied _____
- Signature of County Board Member _____ Date _____

County Clerk: A legible copy of this form showing the final decision of the County Board of Equalization must be delivered electronically to the Nebraska Department of Revenue within seven days after the Board's decision.

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations
Read instructions on reverse side.

Failure to properly complete or timely file this application will result in a denial of the exemption.

Name of Organization Bryan Medical Center			County Name Lancaster	Tax Year 2017
Name of Owner of Property Bryan Medical Center			State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 1600 S. 48th Street			Total Actual Value of Real and Personal Property \$ 3,190,700.00	Parcel ID Number 10-36-303-007-000
City Lincoln	State NE	Zip Code 68506	Contact Name Jon Peppmuller	Phone Number (402) 481-8987
Type of Ownership <input type="checkbox"/> Agricultural and Horticultural Society <input type="checkbox"/> Educational Organization <input type="checkbox"/> Religious Organization <input checked="" type="checkbox"/> Charitable Organization <input type="checkbox"/> Cemetery Organization				

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
Kim Russell	CEO	1600 S. 48th St. Lincoln, NE 68506
Russ Gronewold	CFO	1600 S. 48th St. Lincoln, NE 68506
John Woodrich	COO	1600 S. 48th St. Lincoln, NE 68506

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
DAVISS SUBDIVISION, Lot 8 - 9, & LOT 10 EX S21.50 W63.42' & LOT 17 EX S21.5' & E65.38' LOTS 11-13 & LOTS 18-19 & E PT OF NE1/4 LOT 6 (#2007-43903) SW 36-10-6 & VAC ALLEYS ADJ 8-9, 18-19, & N PTS 10 & 17

2201 517

Property described above is used in the following exempt category (please mark the applicable boxes):

Agricultural and Horticultural Society
 Educational
 Religious
 Charitable
 Cemetery

RECEIVED

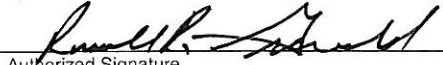
Give a detailed description of the use of the property:
Hospital use

MAY 01 2017
NORMAN H. AGENA
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

All organizations, except for an Agricultural and Horticultural Society, must complete the following questions.

Is all of the property used exclusively as described above? YES NO
Is the property used for financial gain or profit to either the owner or owner or organization making exclusive use of the property? . . . YES NO
Is a portion of the property used for the sale of alcoholic beverages? YES NO
If Yes, state the number of hours per week _____
Is the property owned or used by an organization which discriminates in membership or employment based on race, color, or national origin? YES NO

Under penalties of law, I declare that I have examined this exemption application and, to the best of my knowledge and belief, it is correct and complete. I also declare that I am duly authorized to sign this exemption application.

sign here  _____ **CFO** _____ **4-20-17**
Authorized Signature Title Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____
 Approval of a Portion _____
 Denial _____

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

I declare that to the best of my knowledge and belief, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of Nebraska.

Approved COMMENTS: _____
 Approval of a Portion _____
 Denied _____

Signature of County Board Member _____ Date _____

County Clerk: A legible copy of this form showing the final decision of the County Board of Equalization must be delivered electronically to the Nebraska Department of Revenue within seven days after the Board's decision.

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations

Read instructions on reverse side.

Failure to properly complete or timely file this application will result in a denial of the exemption.

Name of Organization CBOL, Inc.			County Name Lancaster	Tax Year 2017
Name of Owner of Property CBOL, Inc.			State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 233 S. 13th Street, Suite 1900			Total Actual Value of Real and Personal Property \$ 165,600.00	Parcel ID Number 10-24-235-002-000
City Lincoln	State NE	Zip Code 68508	Contact Name Dan Stogsdill	Phone Number (402) 474-6900

Type of Ownership

Agricultural and Horticultural Society Educational Organization Religious Organization Charitable Organization Cemetery Organization

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
Daniel R. Stogsdill	President	233 S. 13th Street, Suite 1900, Lincoln, NE 68508
Melinda J. Stogsdill	Vice Pres/Secretary	233 S. 13th Street, Suite 1900, Lincoln, NE 68508
Tamara M. Rager	Treasurer	233 S. 13th Street, Suite 1900, Lincoln, NE 68508

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:

Lot One (1), EXCEPT the South Forty (40) feet thereof, and the East Twenty (20) feet of Lot Two (2), EXCEPT the South Forty (40) feet thereof, Laurence Addition, Lincoln, Lancaster County, Nebraska.

Property described above is used in the following exempt category (please mark the applicable boxes):

Agricultural and Horticultural Society Educational Religious Charitable Cemetery

RECEIVED

Give a detailed description of the use of the property:

See Attachment "A"

JUN 23 2017

NORMAN H. AGENA
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

All organizations, except for an Agricultural and Horticultural Society, must complete the following questions.

Is all of the property used exclusively as described above? YES NO

Is the property used for financial gain or profit to either the owner or owner or organization making exclusive use of the property? ... YES NO

Is a portion of the property used for the sale of alcoholic beverages? YES NO

If Yes, state the number of hours per week _____

Is the property owned or used by an organization which discriminates in membership or employment based on race, color, or national origin? YES NO

Under penalties of law, I declare that I have examined this exemption application and, to the best of my knowledge and belief, it is correct and complete. I also declare that I am duly authorized to sign this exemption application.

sign here

D. Stogsdill
Authorized Signature

Title

6/23/17
Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

Signature of County Assessor Date

For County Board of Equalization Use Only

I declare that to the best of my knowledge and belief, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of Nebraska.

Approved COMMENTS: _____

Approval of a Portion _____

Denied _____

Signature of County Board Member Date

County Clerk: A legible copy of this form showing the final decision of the County Board of Equalization must be delivered electronically to the Nebraska Department of Revenue within seven days after the Board's decision.

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations
Read instructions on reverse side.

Failure to properly complete or timely file this application will result in a denial of the exemption.

Name of Organization Candlewood Church, INC		County Name LANCASTER	Tax Year 2017
Name of Owner of Property Candlewood Church, INC		State Where Incorporated NEBRASKA	
Street or Other Mailing Address of Applicant 2640 R STREET		Total Actual Value of Real and Personal Property \$ 725,000	Parcel ID Number 10-24-420-010-00
City LINCOLN	State NE	Zip Code 68503	Contact Name Jim Wiebelhaus
Type of Ownership		Phone Number 402-476-4007	
<input type="checkbox"/> Agricultural and Horticultural Society <input type="checkbox"/> Educational Organization <input checked="" type="checkbox"/> Religious Organization <input type="checkbox"/> Charitable Organization <input type="checkbox"/> Cemetery Organization			

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
Rory Whitney	President	5421 S. 60th ST. Omaha, NE 68117
Jim Wiebelhaus	Secretary	407 N. 26th ST. Lincoln, NE 68503

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
KEYSTONE ADDITION TO LINCOLN, BLOCK 2, LOTS 7-8, TRI TR IN SW 4 S103' LOTS 7-8 + LOT 9 + REM PT LOTS 10-11 + LOTS 12-13 + 5 1/2 VAC E-W ALLEY ADJ LOTS 10-13 (ORD #623+1298) + VAC N-S ALLEYS (ORD #6800 +7905) EX ST + EX N-S ALLEY (DESC 656-189) Band, OFFICE, CLASSROOM SUPPLIES

Property described above is used in the following exempt category (please mark the applicable boxes):

Agricultural and Horticultural Society
 Educational
 Religious
 Charitable
 Cemetery

RECEIVED

Give a detailed description of the use of the property:
Place of Worship.

MAY 25 2017

NORMAN H. AGENA
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

All organizations, except for an Agricultural and Horticultural Society, must complete the following questions.

Is all of the property used exclusively as described above? YES NO

Is the property used for financial gain or profit to either the owner or owner or organization making exclusive use of the property? YES NO

Is a portion of the property used for the sale of alcoholic beverages? YES NO
If Yes, state the number of hours per week _____

Is the property owned or used by an organization which discriminates in membership or employment based on race, color, or national origin? YES NO

Under penalties of law, I declare that I have examined this exemption application and, to the best of my knowledge and belief, it is correct and complete. I also declare that I am duly authorized to sign this exemption application.

sign here James Wiebelhaus Pastor 05/17/2017
 Authorized Signature Title Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval
 Approval of a Portion
 Denial

COMMENTS: _____

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

I declare that to the best of my knowledge and belief, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of Nebraska.

Approved
 Approval of a Portion
 Denied

COMMENTS: _____

Signature of County Board Member _____ Date _____

County Clerk: A legible copy of this form showing the final decision of the County Board of Equalization must be delivered electronically to the Nebraska Department of Revenue within seven days after the Board's decision.

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations
Read instructions on reverse side.

Failure to properly complete or timely file this application will result in a denial of the exemption.

Name of Organization Grace Chapel-Lincoln (Presbyterian Church in America)		County Name Lancaster	Tax Year 2017
Name of Owner of Property Grace Chapel-Lincoln (Presbyterian Church in America)		State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 4000 Sheridan Boulevard		Total Actual Value of Real and Personal Property \$ 96,100.00	Parcel ID Number 10-25-331-014-000
City Lincoln	State NE	Zip Code 68506	Contact Name Brook Talsma
			Phone Number 402-484-8555

Type of Ownership

Agricultural and Horticultural Society Educational Organization Religious Organization Charitable Organization Cemetery Organization

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
Benjamin Loos	President	4345 Prescott Ave, Lincoln, NE 68506
Greg Baker	Treasurer	1039 S. 11th St. Lincoln, NE 68508
Ben Davy	Secretary	5635 Randolph St. Lincoln, NE 68510

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:

Lots 7, 8, and 9, Block 245, Original Lincoln, Lancaster County, Nebraska (1600 A Street)

RECEIVED

JUN 23 2017

NORMAN H. AGENA
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

Property described above is used in the following exempt category (please mark the applicable boxes):

Agricultural and Horticultural Society Educational Religious Charitable Cemetery

Give a detailed description of the use of the property:

Please see Exhibit A

All organizations, except for an Agricultural and Horticultural Society, must complete the following questions.

Is all of the property used exclusively as described above? YES NO

Is the property used for financial gain or profit to either the owner or owner or organization making exclusive use of the property? ... YES NO

Is a portion of the property used for the sale of alcoholic beverages? YES NO

If Yes, state the number of hours per week _____

Is the property owned or used by an organization which discriminates in membership or employment based on race, color, or national origin? YES NO

Under penalties of law, I declare that I have examined this exemption application and, to the best of my knowledge and belief, it is correct and complete. I also declare that I am duly authorized to sign this exemption application.

sign
here

Authorized Signature

Title

Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

I declare that to the best of my knowledge and belief, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of Nebraska.

Approved COMMENTS: _____

Approval of a Portion _____

Denied _____

Signature of County Board Member _____ Date _____

County Clerk: A legible copy of this form showing the final decision of the County Board of Equalization must be delivered electronically to the Nebraska Department of Revenue within seven days after the Board's decision.

File with
Your County
Assessor

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations

Read instructions on reverse side.

FORM
451

Failure to properly complete or timely file this application will result in a denial of the exemption.

Name of Organization Grace Chapel-Lincoln (Presbyterian Church in America)		County Name Lancaster	Tax Year 2017
Name of Owner of Property Grace Chapel-Lincoln (Presbyterian Church in America)		State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 4000 Sheridan Boulevard		Total Actual Value of Real and Personal Property \$ 779,700.00	Parcel ID Number 10-25-331-013-000
City Lincoln	State NE	Zip Code 68506	Contact Name Brook Talsma
Phone Number 402-484-8555			

Type of Ownership

Agricultural and Horticultural Society Educational Organization Religious Organization Charitable Organization Cemetery Organization

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
Benjamin Loos	President	4345 Prescott Ave, Lincoln, NE 68506
Greg Baker	Treasurer	1039 S. 11th St. Lincoln, NE 68508
Ben Davy	Secretary	5635 Randolph St. Lincoln, NE 68510

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
 Lots 6, 7, 8, 9, 10, 11 and 12, Block 244, Original Lincoln, Lancaster County, Nebraska (1245 S. 16th Street)

RECEIVED
 JUN 23 2017
 NORMAN H. AGENA
 LANCASTER COUNTY ASSESSOR/
 REGISTER OF DEEDS

Property described above is used in the following exempt category (please mark the applicable boxes):

Agricultural and Horticultural Society Educational Religious Charitable Cemetery

Give a detailed description of the use of the property:
 Please see Exhibit A

All organizations, except for an Agricultural and Horticultural Society, must complete the following questions.

Is all of the property used exclusively as described above? YES NO

Is the property used for financial gain or profit to either the owner or owner or organization making exclusive use of the property? ... YES NO

Is a portion of the property used for the sale of alcoholic beverages? YES NO

If Yes, state the number of hours per week _____

Is the property owned or used by an organization which discriminates in membership or employment based on race, color, or national origin? YES NO

Under penalties of law, I declare that I have examined this exemption application and, to the best of my knowledge and belief, it is correct and complete. I also declare that I am duly authorized to sign this exemption application.

sign here  _____ Title Pastor Date 6/22/17

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

I declare that to the best of my knowledge and belief, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of Nebraska.

Approved COMMENTS: _____

Approval of a Portion _____

Denied _____

Signature of County Board Member _____ Date _____

County Clerk: A legible copy of this form showing the final decision of the County Board of Equalization must be delivered electronically to the Nebraska Department of Revenue within seven days after the Board's decision.

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations
Read instructions on reverse side.

Failure to properly complete or timely file this application will result in a denial of the exemption.

Name of Organization Nebraska Recycling Council		County Name Lancaster	Tax Year 2017
Name of Owner of Property Nebraska Recycling Council		State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 610 J Street, Suite 300		Total Actual Value of Real and Personal Property \$3,197.09	Parcel ID Number
City Lincoln	State NE	Zip Code 68508	Contact Name Julie Diegel
Type of Ownership		Phone Number 402-436-2384	

- Agricultural and Horticultural Society
 Educational Organization
 Religious Organization
 Charitable Organization
 Cemetery Organization

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
Danielle Easdale	President	4360 N 147th Plz, Omaha, NE 68116
Craig Gubbels	Vice-President/Secretary	Integrated Recycling, 1344 County Road 10, Mead, NE 68041
Marty Hager	Vice-President	Aradius Group, 815 O Street, Suite 3, Lincoln, NE 68508

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:

1 - Dell Inspiron 15 7000 Series Laptop Computer (\$1361.09), 1- Refrigerator (\$612.00), 3 - Lenovo Thinkpad Laptops (\$1224.00 total)

RECEIVED

JUN 16 2017

Property described above is used in the following exempt category (please mark the applicable boxes):

- Agricultural and Horticultural Society
 Educational
 Religious
 Charitable
 Cemetery

NORMAN H. AGENA
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

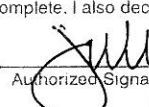
Give a detailed description of the use of the property.

The laptops are used to store digital files and are used for email and web site communications, creation of documents and bookkeeping. The refrigerator is used to store refrigerated goods in at the office.

All organizations, except for an Agricultural and Horticultural Society, must complete the following questions.

- Is all of the property used exclusively as described above? YES NO
Is the property used for financial gain or profit to either the owner or owner or organization making exclusive use of the property? YES NO
Is a portion of the property used for the sale of alcoholic beverages? YES NO
If Yes, state the number of hours per week _____
Is the property owned or used by an organization which discriminates in membership or employment based on race, color, or national origin? YES NO

Under penalties of perjury, I declare that the information furnished herein is true and correct to the best of my knowledge and belief, it is correct and complete. I also declare that this application and, to the best of my knowledge and belief, it is correct and complete.

sign here  Authorized Signatory

6/22/17 - LM for Diegel u-1

Heather

End of March

Executive Director _____ Date 06/16/2017

ords.

oundation

- Approval
 Approval of a Portion
 Denial

- Approved
 Approval of a Portion
 Denied

I declare that to the best of my knowledge and belief, it is correct and complete pursuant to the laws of the State of Nebraska.

Use Only

County Board of Equalization is correct pursuant to the

Signature of County Board Member

Date

County Clerk: A legible copy of this form showing the final decision of the County Board of Equalization must be delivered electronically to the Nebraska Department of Revenue within seven days after the Board's decision.

File with
Your County
Assessor

Exemption Application for Tax Exemption on Real and Personal Property by Qualifying Organizations

Read instructions on reverse side.

FORM
451

Failure to properly complete or timely file this application will result in a denial of the exemption.

Name of Organization New Visions Community-United Methodist Church			County Name Lancaster	Tax Year 2017
Name of Owner of Property Southminster United Methodist Church			State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 2400 S. 11th St.			Total Actual Value of Real and Personal Property \$ 83,600.00	Parcel ID Number 0901105002000
City Lincoln	State NE	Zip Code 68502	Contact Name Andy Gueck	Phone Number 402-304-8904

Type of Ownership

Agricultural and Horticultural Society Educational Organization Religious Organization Charitable Organization Cemetery Organization

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
Beth Baldwin	Director	2400 S. 11th St., Lincoln, NE 68502
Amy Chandler	Director	2400 S. 11th St., Lincoln, NE 68502
Andy Gueck	Director	2400 S. 11th St., Lincoln, NE 68502

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:

Knob Hill Addition, Block 4, Lot 3

RECEIVED

MAR 30 2017

Property described above is used in the following exempt category (please mark the applicable boxes):

Agricultural and Horticultural Society Educational Religious Charitable Cemetery

AGENDA
COUNTY ASSESSOR/
REGISTER OF DEEDS

Give a detailed description of the use of the property:

This property is to be used for housing low income/under employed individuals and families in a no cost housing unit to provide a safe, healthy locale for them to begin to become self sufficient.

All organizations, except for an Agricultural and Horticultural Society, must complete the following questions.

Is all of the property used exclusively as described above? YES NO

Is the property used for financial gain or profit to either the owner or organization making exclusive use of the property? .. YES NO

Is a portion of the property used for the sale of alcoholic beverages? YES NO

If Yes, state the number of hours per week _____

Is the property owned or used by an organization which discriminates in membership or employment based on race, color, or national origin? YES NO

Under penalties of law, I declare that I have examined this exemption application and, to the best of my knowledge and belief, it is correct and complete. I also declare that I am duly authorized to sign this exemption application.

sign here  _____ Title Director Date March 29, 2017

Authorized Signature

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

I declare that to the best of my knowledge and belief, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of Nebraska.

Approved COMMENTS: _____

Approval of a Portion _____

Denied _____

Signature of County Board Member _____ Date _____

County Clerk: A legible copy of this form showing the final decision of the County Board of Equalization must be delivered electronically to the Nebraska Department of Revenue within seven days after the Board's decision.

File with
Your County
Assessor

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations
Read instructions on reverse side.

FORM
451

Failure to properly complete or timely file this application will result in a denial of the exemption.

Name of Organization Lincoln Children's Zoo		County Name Lancaster	Year 2017
Name of Owner of Property Lincoln Children's Zoo		State Where Incorporated NE	
Street or Other Mailing Address of Applicant 1222 South 27th Street		Total Actual Value of Real and Personal Property \$ 275,000.00	Parcel ID Number 17-31-101-019-000
City Lincoln	State NE	Zip Code 68502	Contact Name Stacy Varga
Type of Ownership		Phone Number 402-475-6741	

Agricultural and Horticultural Society Educational Organization Religious Organization Charitable Organization Cemetery Organization

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
John Chapo	President/CEO	2840 Stockwell Lincoln, NE 68502
Evan Killeen	COO	2601 Winthrop Rd, Lincoln, NE 68502

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:

Situs Address: 2847 A Street

RECEIVED

JUN 30 2017

Property described above is used in the following exempt category (please mark the applicable boxes):

Agricultural and Horticultural Society Educational Religious Charitable Cemetery

NORMAN H. AGENA
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

Give a detailed description of the use of the property:

New parking lot for Lincoln Children's Zoo.

All organizations, except for an Agricultural and Horticultural Society, must complete the following questions.

Is all of the property used exclusively as described above? YES NO

Is the property used for financial gain or profit to either the owner or owner or organization making exclusive use of the property? ... YES NO

Is a portion of the property used for the sale of alcoholic beverages? YES NO

If Yes, state the number of hours per week _____

Is the property owned or used by an organization which discriminates in membership or employment based on race, color, or national origin? YES NO

Under penalties of law, I declare that I have examined this exemption application and, to the best of my knowledge and belief, it is correct and complete. I also declare that I am duly authorized to sign this exemption application.

sign
here

Stacy Varga
Authorized Signature

Director of Finance/HR

06/30/2017
Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

I declare that to the best of my knowledge and belief, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of Nebraska.

Approved COMMENTS: _____

Approval of a Portion _____

Denied _____

Signature of County Board Member _____ Date _____

County Clerk: A legible copy of this form showing the final decision of the County Board of Equalization must be delivered electronically to the Nebraska Department of Revenue within seven days after the Board's decision.