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NEBRASKA
Good Life. Great Service.

Application for Exemption
from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

| FORM |
|-------------|
| 457 |

| DEPARTMENT OF REVENUE | | To be filed withRead instruction | | | | | 45/ |
|---|---------------------------|---|---|--------------------------|----------------|---------------------|--|
| Name of Organization | | i ieau manucilo | Type of O | wnership | | | 1 |
| MiddleCross Church of the C&M | A | | X No | nprofit Corporation | Other | (specify): | |
| Name of Owner of Property MiddleCross Church | | | County Na Lancast | | | State Where I | ncorporated |
| Street or Other Mailing Address 2600 N 70th | | | Contact Name Phone Number Dawn Nider 402-466-29 | | | | |
| City State Zip Code Lincoln NE 68507 | | | Email Add | lress ntdaycareandpre | school@ | gmail.com | |
| | Identify Officers | Directors, or Part | 1 | | | | |
| Title | Name, Address, City | - | 11010 01 111 | io itoripioni org | amzatio | •• | |
| _ead Pastor | | 2322 North 87th St | treet Linc | oln NF 68507 | | | |
| Treasurer | | ,2020 Riveria Drive | | | | | |
| Director of Childare Center | | 35 Huntington Ave | | | | | |
| | | | | | | | |
| | | Description of the Attach an additional | | | | | a |
| Motor Vehicle Make | Model Year | Body Type | е | Vehicle | icle ID Number | | Registration Date or Date of Acquisition, if Newly Purchased |
| Ford | 2001 | Econoline Cargo | | 1FTNE24L91H | 473684 | | 1/2018 |
| Victoria | 2015 | 2 Wheel Enclose | ed TrIr | 564BE1210FR0 | 07803 | | 8/2018 |
| | | | | | | | |
| | | - | | | | | |
| DocuSigned by: / | | Mainly "From the S | Sky Down' | · | | elief, it is correc | et and complete. |
| sign Jeff Wiesinger | dutionzed to sign this of | | Lead Pa | stor | | 2/7/2 | 019 |
| here CD20DBB0BE2948B | | | Title | | | Date | |
| | F | or County Treasure | r Recomm | endation | | | |
| X Approval | Com | ments: | | | | | |
| Disapproval | | DocuSign | ned by: | | | | |
| | | Rachel A. M. | | | | | 2/7/2019 |
| | Fo | | 40FF8496 | n Hoe Only | | | Date |
| | FO | r County Board of E | -qualizatio | in Use Only | | | |
| X Approval | Com | ments: | | | | | |
| Disapproval | | | | | | | |
| | | | | | | | — S. |
| | | Authorized S | Signature | | | | Date |

Nehraska Department of Revenue

Authorized by Neb. Rev. Stat. §§ 77-202(1)(c) and (d), and 60-3,185, and 60-3,189 DS

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Authorized Signature

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Application for Exemption

from Motor Vehicle Taxes by Qualifying Nonprofit Organizations

• To be filed with your county treasurer.

• Read instructions on reverse side.

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FORM

| DEPARTMENT OF REVENUE | | | | | | |
|--|---|--|---|---|---|---|
| lame of Organization | | | Type of O | | Other (specify): | 140 |
| ame of Owner of Property IUS X HIGH SCHOOL | | | County No | ame | | Incorporated |
| | | | - | | | h |
| Street or Other Mailing Address 6000 A STREET | | | Contact N KAREN | FRANCIS | Phone Num 402-4880 | |
| ity NCOLN | State NE | Zip Code 68510 | Email Add | ress ancis@PIUSX.NET | | |
| | Identify Officers, | Directors, or Part | ners of th | e Nonprofit Organi | zation | |
| tle | Name, Address, City, | , State, Zip Code | | | | |
| esident | Most Rev James | s Conley 3400 S | heridan Bl | vd Lincoln NE 685 | 06 | |
| ec/Treasurer | Rev. James Mey | ysenburg 7900 Tı | rendwood | Dr Lincoln NE 685 | 506 | |
| | | | | | | |
| | | Description of th Attach an additiona | | | | |
| Motor Vehicle Make | Model Year | Body Typ | | Vehicle ID I | Number | Registration Date of Date of Acquisition if Newly Purchased |
| yundai - Azera | 2011 | 4 Dr Sedan | | KMHFC4DF5BA55 | S075 | 2/17/2018 |
| , | | 1 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | | -, , - 0 . 0 |
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| | | 1: | | 1 | 7 | |
| Agricultural and Horticultural Society ve detailed description of use, including a | an explanation if multiple | | st: | naritable Cemete | as indicated? X YES | NO |
| Agricultural and Horticultural Society | an explanation if multiple | use classifications exis | st: | | as indicated? X YES If No, give pe | |
| Under penalties of law, lo | an explanation if multiple tation for the Maria | use classifications exis n Sisters to fulfill t | their duties | s as | as indicated? XYES If No, give pe | NO rcentage of exempt use: % |
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Nehraska Department of Revenue 06 Rev. 7-2018 Supersedes 96-253-2006 Rev. 8-2011 Authorized by Neb. Rev. Stat. §§ 77-202(1)(c) and (d), and 60-3,185, and 60-3,189 DS

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