

File with Your County Assessor on or Before December 31

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 Dimensions Educational Research Foundation			County Name Lancaster	Tax Year 2019
Name of Owner of Property Dimensions Educational Research Foundation			State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 7700 A St			Total Actual Value of Real and Personal Property \$1,400,000.00	Parcel ID Number 17-27-403-030-000
City Lincoln	State NE	Zip Code 68510	Contact Name Rick Reeble	Phone Number 402.467.6112
Email Address rickr@dimensionsfoundation.org				

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
Nancy Rosenow	Executive Director	7700 A St Lincoln NE 68510
Marjorie Koestner	President	7700 A St Lincoln NE 68510

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

Wedgewood Manor First Addition, Block 14, Lot 30

7700 A St

RECEIVED

DEC 19 2018

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:

Dimensions Educational Research Foundation conducts research and collaborates with others to investigate how children's connections with the world around them can affect wellness and development.

We leased part of the building to Christensen Audiology until March 2018. Christensen moved out March 2018 + we now occupy the entire building.

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

Finance Director

12/17/2018

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 on or Before December 31

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 Bryan Medical Center		County Name Lancaster	Tax Year 2019
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 \$85,200.00	Parcel ID Number 10-36-334-009-000
City Lincoln	State NE	Zip Code 68506	Contact Name Julie Lacy
Email Address julie.lacy@bryanheath.org		Phone Number 402-481-8966	

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
Kim Russel	CEO	1600 South 48th Street, Lincoln, NE 68506
Russ Gronewold	CFO	1600 South 48th Street, Lincoln, NE 68506
John Woodrich	COO	1600 South 48th Street, Lincoln, NE 68506

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
Central Park Subdivision, Block 2, Lot 9

Property Address: 2215 S. 15th St., Lincoln, NE 68502

RECEIVED

DEC 31 2018

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:
Property is used for a community garden.

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  _____ Accounting & Tax Manager 12/28/2018
Authorized Signature Title Date

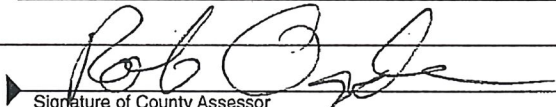
Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

 _____ 3/25/19
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 on or Before December 31

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations

FORM 451

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 DIALYSIS CENTER OF LINCOLN, INC.		County Name LANCASTER	Tax Year 2019
Name of Owner of Property DIALYSIS CENTER OF LINCOLN, INC.		State Where Incorporated NEBRASKA	
Street or Other Mailing Address of Applicant 7910 "O" STREET		Total Actual Value of Real and Personal Property \$822,423.00	Parcel ID Number 1 P059298
City LINCOLN	State NE	Zip Code 68510-2500	Contact Name KAREL S. SYSEL, CFO
Email Address ksysel@dialysiscenteroflincoln.org		Phone Number 402-742-8556	

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
Schedule of Directors & Officers attached		

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

Personal property located at:
 Address: 3211 Salt Creek Circle; Lincoln, NE 68504
 Legal: Lot 4; Block 6 Landmark Corporate Center Addition; Lincoln, Lancaster County Nebraska
 Personal Property Value at 01/01/2019: \$822423.00

RECEIVED

NOV 26 2018

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:

Personal property & equipment used for dialysis treatment of end-stage renal disease at a 501(c)3 facility located at 3211 Salt Creek Circle, Lincoln, Nebraska 68504

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

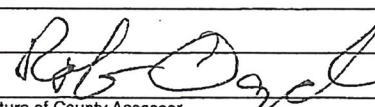
- Is all of the property used exclusively as described above? YES NO
 Is the property used for financial gain or profit to either the owner or owner or organization making exclusive use of the property? .. YES NO
 Is a portion of the property used for the sale of alcoholic beverages? YES NO
 If Yes, 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  _____ C.F.O. _____ 11/19/2018
 Authorized Signature Title Date

Retain a copy for your records.

For County Assessor's Recommendation

- Approval
 Approval of a Portion
 Denial
- COMMENTS: _____
-  _____ 3/25/19
 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.

File with Your County Assessor on or Before December 31

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 Christ Lutheran Church		County Name Lancaster	Tax Year 2019
Name of Owner of Property Christ Lutheran Church Lincoln Nebraska		State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 4325 Sumner Street		Total Actual Value of Real and Personal Property \$443,200.00	Parcel ID Number 16-21-431-001-000
City Lincoln	State NE	Zip Code 68516	Contact Name Michael Milbourn
Email Address mmilbourn@christlincoln.org		Phone Number 402-483-7774	

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
Torin Berge	Chair	7724 S. 81st St. Lincoln, NE 68516
Kyle Kaldahl	Vice Chair	485 Adams St. Bennett, NE 68137
Valerie Dorfmeier	Secretary	5830 Cavvy Road Lincoln, NE 68516

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

Village Meadows 16th Addition, Block 3, Lot1

6700 Chatsworth Ln

RECEIVED
NOV 14 2018
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:
Constructing a building for worship/educational/child care

8/2018 permit

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  _____ **Chief Operating Officer** **11/08/2018**
 Authorized Signature Title Date

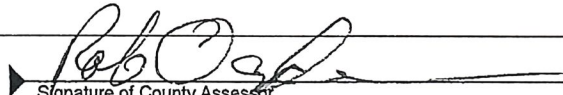
Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

 _____ **3/25/19**
 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 on or Before December 31

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 First Presbyterian Church of Lincoln Nebraska			County Name Lancaster	Tax Year 2019
Name of Owner of Property			State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 840 S 17th Street			Total Actual Value of Real and Personal Property \$112,500.00	Parcel ID Number 10-25-307-001-000
City Lincoln	State NE	Zip Code 68508	Contact Name Cheryl Rennick	Phone Number 402-477-6037
Email Address finance@fpclincn.org				

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
Nate Van Meter	President	840 S 17th Street, Lincoln, NE 68508
Sherry Knapp	Treasurer	840 S 17th Street, Lincoln, NE 68508
Terri Sherman	Secretary	840 S 17th Street, Lincoln, NE 68508

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
Lincoln Original, Block 183, Lot 1

1637 F

RECEIVED
JAN 17 2019

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

Agricultural and Horticultural Society Educational Religious Charitable Cemetery

ROB OGDEN
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

Give a detailed description of the use of the property:
houses were removed - is used by the Church for a Community Garden

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 Nate Van Meter President 1/10/19
Authorized Signature Title Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____
 Approval of a Portion
 Denial

Rob Ogden 3/25/19
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

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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 HopeSpoke		County Name Lancaster	Tax Year 2019
Name of Owner of Property HopeSpoke		State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 2444 O Street		Total Actual Value of Real and Personal Property \$350,600.00	Parcel ID Number 10-35-216-008-000
City Lincoln	State NE	Zip Code 68510	Contact Name Brad Schiltz
Email Address bschiltz@hopespoke.org		Phone Number 402-475-7666	

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
See Attached		

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
BORGELTS SUBDIVISION (OF BLOCK 17 SOUTH LINCOLN), Lot 7 - 8

904 Sumner St

RECEIVED

JAN 11 2019

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

Agricultural and Horticultural Society Educational Religious Charitable Cemetery

ROB OGDEN
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

Give a detailed description of the use of the property:

Provide specialized residential treatment services for adolescent males ages 12-18 who have been sexually abusive. Program also includes day treatment for youth that do not require 24 hour placement.

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

Brad Schiltz
Authorized Signature

Finance Director

12/31/18
Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

Rob Ogden
Signature of County Assessor *3/25/19*
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 on or Before December 31

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 HopeSpoke	County Name Lancaster	Tax Year 2019
Name of Owner of Property HopeSpoke	State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 2444 O Street	Total Actual Value of Real and Personal Property \$350,600.00	Parcel ID Number 40-35-210-008-000
City Lincoln	State NE	Zip Code 68510
Email Address bschiltz@hopespoke.org	Contact Name Brad Schiltz	Phone Number 402-475-7666

PAID 600 X451

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
See Attached		

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
 BORGELTS SUBDIVISION (OF BLOCK 17 SOUTH LINCOLN), Lot 7 - 8
904 Summer - personal property

RECEIVED
JAN 02 2018

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:
 Provide specialized residential treatment services for adolescent males ages 12-18 who have been sexually abusive. Program also includes day treatment for youth that do not require 24 hour placement.

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 *Brad Schiltz* _____ Finance Director 12/31/18
 Authorized Signature Title Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

Rob Ogden _____ 3/25/19
 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 on or Before December 31

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

FORM 451

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 HopeSpoke			County Name Lancaster	Tax Year 2019
Name of Owner of Property HopeSpoke			State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 2444 O Street			Total Actual Value of Real and Personal Property \$1,269,400.00	Parcel ID Number 10-24-439-014-000
City Lincoln	State NE	Zip Code 68510	Contact Name Brad Schiltz	Phone Number 402-475-7666
Email Address bschiltz@hopespoke.org				

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
See Attached		

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

KINNEYS O STREET ADDITION, BLOCK 23, Lot 1 - 2, & 15 - 18

2443 P St

RECEIVED

JAN 02 2019

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

- Agricultural and Horticultural Society
 Educational
 Religious
 Charitable
 Cemetery

NUHMAN H. AGENA
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

Give a detailed description of the use of the property:

Provide outpatient therapy services for children ages 0-19 and their families. Provide substance abuse education and treatment to at-risk youth. Provide therapeutic after-school day treatment for children ages 5-11 with emotional & behavioral difficulties.

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

Brad Schiltz
Authorized Signature

Finance Director
Title

12/31/18
Date

Retain a copy for your records.

For County Assessor's Recommendation

- Approval
 Approval of a Portion
 Denial

COMMENTS: _____

Rob Ogden
Signature of County Assessor

3/25/19
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.

File with Your County Assessor on or Before December 31

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 HopeSpoke			County Name Lancaster	Tax Year 2019
Name of Owner of Property HopeSpoke			State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 2444 O Street			Total Actual Value of Real and Personal Property \$85,500.00	Parcel ID Number 10-24-440-006-000
City Lincoln	State NE	Zip Code 68510	Contact Name Brad Schiltz	Phone Number 402-475-7666
Email Address bschiltz@hopespoke.org				

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
See Attached		

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
KINNEYS O STREET ADDITION, BLOCK 22, Lot 5, W1/2 & LOT 6

2501 P St

RECEIVED

JAN 02 2019

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:

Parking lot for HopeSpoke to provide outpatient therapy services for children ages 0-19 and their families. Provide substance abuse education and treatment to at-risk youth. Provide therapeutic after-school day treatment for children ages 5-11 with emotional & behavioral difficulties.

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

Brad Schiltz
Authorized Signature

Finance Director

12/31/18
Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval

COMMENTS: _____

Approval of a Portion

Denial

Rob Ogle
Signature of County Assessor

3/25/19
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 on or Before December 31

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 HopeSpoke	County Name Lancaster	Tax Year 2019
Name of Owner of Property HopeSpoke	State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 2444 O Street	Total Actual Value of Real and Personal Property \$82,700.00	Parcel ID Number 10-24-440-013-000
City Lincoln	State NE	Zip Code 68510
Contact Name Brad Schiltz		Phone Number 402-475-7666

Email Address
bschiltz@hopespoke.org

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
See Attached		

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
KINNEYS O STREET ADDITION, BLOCK 22, Lot 4, & E1/2 LOT 5

2521 P St

RECEIVED
JAN 02 2018

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:

Parking lot for HopeSpoke to provide outpatient therapy services for children ages 0-19 and their families. Provide substance abuse education and treatment to at-risk youth. Provide therapeutic after-school day treatment for children ages 5-11 with emotional & behavioral difficulties.

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

Brad Schiltz
Authorized Signature

Finance Director

12/31/18
Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval

COMMENTS: _____

Approval of a Portion

Denial

Rob O...
Signature of County Assessor

3/25/19
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 on or Before December 31

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 League of Human Dignity Inc			County Name Lancaster	Tax Year 2019
Name of Owner of Property League of Human Dignity Inc			State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 1701 P St			Total Actual Value of Real and Personal Property \$280,530.00	Parcel ID Number 10-24-325-011-000
City Lincoln	State NE	Zip Code 68508-1741	Contact Name Kathy Kay	Phone Number 402-441-7871
Email Address kkay@leagueofhumandignity.com				

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
Kathy A Kay	Co-C.E.O.	1701 P St, Lincoln, NE 68508
Michael C Schafer	Co-G.E.O.	1701 P St, Lincoln, NE 68508
Jodi Mason	CFO	1701 P St, Lincoln, NE 68508

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

Kinneys O Street addition, Block 30, Lot 11
1720 O St

RECEIVED

DEC 20 2018

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:

Occupied by staff of non-profit League of Human Dignity staff (Chief Financial Officer, Accounting Assistant and Personnel Specialist) and used for storage of equipment for the League of Human Dignity's Center for Independent Living program. Previously used by for-profit subsidiary, Mobility Options. Mobility Options was discontinued effective September 1, 2018.

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

Kathy Kay
Authorized Signature

Co.- C.E.O.

12-18-18
Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval

COMMENTS: _____

Approval of a Portion

Denial

Rob Ogden
Signature of County Assessor

3/25/19
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 on or Before December 31

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 League of Human Dignity Inc			County Name Lancaster	Tax Year 2019
Name of Owner of Property League of Human Dignity Inc			State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 1701 P St			Total Actual Value of Real and Personal Property \$744,144.00	Parcel ID Number 10-24-325-017-000
City Lincoln	State NE	Zip Code 68508-1741	Contact Name Kathy Kay	Phone Number 402-441-7871
Email Address kkay@leagueofhumandignity.com				

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
Kathy A Kay	Co-C.E.O.	1701 P St, Lincoln, NE 68508
Michael C Schafer	Co-C.E.O.	1701 P St, Lincoln, NE 68508
Jodi Mason	CFO	1701 P St, Lincoln, NE 68508

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
Kinneys O Street addition, Block 30, Lot 4, E 12.5' & LOTS 5 & 6
1701 P St

RECEIVED
DEC 20 2018

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. AGERIA
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

Give a detailed description of the use of the property:

Area was previously used by for-profit subsidiary, Mobility Options. Mobility Options was discontinued effective September 1, 2018. Area is now used for storage of tools and equipment for the League of Human Dignity's Center for Independent Living program.

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

Kathy Kay
Authorized Signature

Co.- C.E.O.

12-17-18
Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval
 Approval of a Portion
 Denial

COMMENTS: _____

Rob Ogden
Signature of County Assessor
3/25/19
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.

File with Your County Assessor on or Before December 31

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 Hickman Presbyterian Church		County Name Lancaster	Tax Year 2019
Name of Owner of Property Hickman Presbyterian Church		State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant PO Box 468		Total Actual Value of Real and Personal Property \$147,500.00	Parcel ID Number 1533235004000
City Hickman	State NE	Zip Code 68372	Contact Name Kelly Hoffart
Phone Number 402-750-6217		Email Address hickmanchurch@windstream.net	

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
David Dudley	President	15939 S 96 Roca, NE 68430
Amy Gewecke	Secretary	825 Sunflower Dr, Hickman, NE 68372
see addendum		

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
GARNERS FIRST ADDITION TO HICKMAN, BLOCK 1, Lot 6-7 & LOT 8 EX S15'

329 E 4 St, Hickman NE

RECEIVED

DEC 24 2018

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:

The garage is used for storage of items used in the church mission and the remainder as an extension of the church lawn. It is contiguous with the rest of the church property. The organization is seeking to have the house removed from the property and is not using the house for any purpose.

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
David Dudley
David Dudley

President HPL
Title

12-14-18
Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval

Approval of a Portion

Denial

COMMENTS: _____

Rob Ogyle
Signature of County Assessor

3/25/19
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.

1/22/19 LM for articles

File with Your County Assessor on or Before December 31

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations

FORM 451

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 Midwest Dharma Wheel Contemplative & Healing Arts, Inc.		County Name Lancaster	Tax Year 2019
Name of Owner of Property Midwest Dharma Wheel Contemplative & Healing Arts, Inc.		State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 1900 D Street		Total Actual Value of Real and Personal Property \$375,000.00	Parcel ID Number 10-25-316-007-000
City Lincoln	State NE	Zip Code 68516	Contact Name Cary Twomey
Email Address cary.twomey@gmail.com		Phone Number 402-477-5101	

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
Cary Twomey	Officer	6435 Colfax Avenue, Lincoln, Nebraska 68507
Lee Willett	Officer	6435 Colfax Avenue, Lincoln, Nebraska 68507
Mike Hemmer	Director	4826 Montgomery Lane, Bethesda, MD 20814

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
 Capitol Addition, Block 6, Lots 7-9, & W 1/2 Lot 10, Lancaster County, Nebraska

1900 D St

RECEIVED
 DEC 31 2018
 NORMAN H. AGEWA
 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:
 The property is owned by Midwest Dharma Wheel Contemplative & Healing Arts, Inc., a Church (as defined by the IRS), and used exclusively for the practice, furtherance, and enrichment of the Buddhist faith for all people in the community who wish to so worship. Please see attached Narrative for a more detailed description.

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

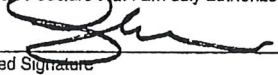
Is all of the property used exclusively as described above? YES NO

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 Signatory Title Date
 Attorney for Applicant 12-31-18

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 on or Before December 31

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 Mosaic		County Name Lancaster	Tax Year 2019
Name of Owner of Property Mosaic		State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 4980 S. 118th Street		Total Actual Value of Real and Personal Property \$8,000.00	Parcel ID Number P046551
City Omaha	State NE	Zip Code 68137	Contact Name Greg Paskach
Email Address greg.paskach@mosaicinfo.org		Phone Number 402-896-3884	

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
Linda Timmons	CEO	4980 S. 118th Street, Omaha, NE 68137
Scott Hoffman	CFO	4980 S. 118th Street, Omaha, NE 68137

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

Furniture and equipment
101 SW 14th Place, Lincoln, NE
221 Sun Valley Blvd, Lincoln, NE
6810 P Street, Lincoln, NE

RECEIVED

DEC 31 2018

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 properties function as retail, office and a community hub in support of providing supportive services to individuals with intellectual disabilities.

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

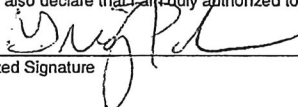
Is a portion of the property used for the sale of alcoholic beverages? YES NO

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



Director of Fixed Assets

12.31.2018

Authorized Signature

Title

Date

Retain a copy for your records.

For County Assessor's Recommendation

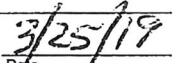
Approval

COMMENTS: _____

Approval of a Portion

Denial

Signature of County Assessor


3/25/19
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 on or Before December 31

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 Nebraska Communities Playhouse	County Name Lancaster	Tax Year 2018
Name of Owner of Property Nebraska Communities Playhouse	State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 225 Locust Street	Total Actual Value of Real and Personal Property \$150,000.00	Parcel ID Number 15-33-220-011-000
City Hickman	State NE	Zip Code 68372
Email Address rex.wamsley@yahoo.com	Contact Name Rex Wamsley	Phone Number 402-610-0687

2019
11/5/18
Rex Wamsley

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
Robert S. Wamsley	President	1721 Garfield Street, Lincoln, NE 68502
Catherine Gosselin	Secretary	521 Maple Street, Hickman, NE 68372
Lou Cinda M. Wamsley	Treasurer	18545 South 96th Street, Hickman, NE 68372

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
Commercial Improved zoned property in the B-Business District of Hickman, Nebraska. The legal description is:
Hickman, Block 20, Lot 2, S 1/2 and Lot 3 and Lot 4 N 1/2.

225 Locust St, Hickman NE

RECEIVED
NOV 05 2018

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 property is used as the 501(c)(3) non-profit communities playhouse for the cities of Hickman, Roca, Princeton, Cortland, Sprague, Firth, and Panama, and the unincorporated community of Holland. The playhouse is an educational non-profit that supports live, all-volunteer community plays and the performing arts, along with other charitable activities.

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 2 hours/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 [Signature] Authorized Signature Title President Date 11/5/2018

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

Signature of County Assessor [Signature] Date 3/25/19

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 on or Before December 31

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 VSL Lincoln Sumner, LLC	County Name Lancaster	Tax Year 2019
Name of Owner of Property VSL Lincoln Sumner, LLC	State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 20220 Harney St.	Total Actual Value of Real and Personal Property \$3,186,888.00	Parcel ID Number 10-36-221-001-000, 10-36-143-001-000, P008850
City Elkhorn	State NE	Zip Code 68022-2063
Email Address bstuhr@vhsmail.com	Contact Name Brian Stuhr	Phone Number 402-895-3932

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
Jack Vetter	CEO	20220 Harney Street, Elkhorn, NE. 68022
Glenn Van Ekeren	President	20220 Harney Street, Elkhorn, NE. 68022
Brian Stuhr	CFO	20220 Harney Street, Elkhorn, NE. 68022

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

RECEIVED
DEC 24 2018

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. AGERA
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

Give a detailed description of the use of the property:
See attached Schedule B

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 Brian Stuhr CFO 12/19/18
Authorized Signature Title Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

Rob Ogden 3/25/19
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 on or Before December 31

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

FORM 451

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 Autism Center of Nebraska, Inc.			County Name Lancaster	Tax Year 2018 2019
Name of Owner of Property Autism Center of Nebraska, Inc.			State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 9012 Q Street			Total Actual Value of Real and Personal Property \$3,000.00	Parcel ID Number P059297
City Omaha	State NE	Zip Code 68127	Contact Name Richard Lowery	Phone Number 402-315-1007
Email Address rlowery@ACNomaha.org				

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
Brett Samson	President & CEO	9012 Q Street, Omaha, NE 68127
Richard Lowery	CFO	9012 Q Street, Omaha, NE 68127

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

Personal Property the agency owns in Lancaster County consists of desks, chairs, files, etc. and various office supplies used to outfit the offices we opened in May 2018 at 6127 Havelock Avenue, Lincoln, NE 68507. The agency has no real property in Lancaster County at this time.

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:

The equipment described above, is used in support of our efforts to serve individuals with autism and other developmental disabilities in Lincoln and the surrounding area.

OCT 04 2018
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 Richard J. Lowery Title CFO Date 10/1/2018

Authorized Signature

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

Rob Ogden Signature of County Assessor Date 3/25/19

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

FORM
451

Assessment on or
Before December 31

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 Lincoln Memorial Cemetery	County Name Lancaster	Tax Year 2019
Name of Owner of Property The Lincoln Memorial Park Cemetery Association	State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant c/o Property Tax, 9th Floor, PO Box 130548	Total Actual Value of Real and Personal Property \$1,928,500.00	Parcel ID Number 09-13-300-011-000
City Houston	State TX	Zip Code 77219-0548
	Contact Name Matthew Kubecka	Phone Number 713-525-7151

Email Address

matthew.kubecka@sci-us.com

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
Janet Key	Director	1929 Allen Parkway, Houston, TX 77019
Susan Garrett	Director	1929 Allen Parkway, Houston, TX 77019
Lori Spilde	Director	1929 Allen Parkway, Houston, TX 77019

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

S13, T9, R6, 6th Principal Meridian, IT LOTS 69 & 59 SW & LOT 77 NW IN 24-9-6 cemetery and grounds maintenance equipment

6800 S 14

RECEIVED

JAN 04 2019

BOB OGDEN

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:

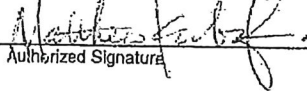
126.11 acres of land and associated improvements (mausoleums and columbariums to house urns for cremated human remains) used for the burial of the deceased

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

Property Tax Supervisor

12/13/18

Title

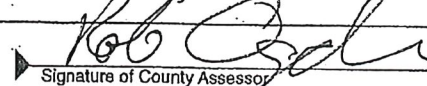
Date

Retain a copy for your records.

For County Assessor's Recommendation

- Approval
 Approval of a Portion
 Denial

COMMENTS: **Property is used for financial gain.**


Signature of County Assessor

3/25/19
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.

File with Your County Assessor on or Before December 31

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 <u>UNITED METHODIST Church of MARTELL</u>			County Name <u>LANCASTER</u>	Tax Year <u>2019</u>
Name of Owner of Property <u>PO Box 68</u>			State Where Incorporated <u>NEBRASKA</u>	
Street or Other Mailing Address of Applicant			Total Actual Value of Real and Personal Property <u>\$ 165,700</u>	Parcel ID Number <u>08-28-106-008-000</u>
City <u>MARTELL</u>	State <u>NE</u>	Zip Code <u>68404</u>	Contact Name <u>ROD HALLMAN</u>	Phone Number <u>402-641-6745</u>
Email Address <u>RR.HALLMAN@aol.com</u>				
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
<u>Rod Hallman</u>	<u>CHAIR ADMIN</u>	<u>6125 W WITTSTUCK, MARTELL, NE 68404</u>
<u>LINDA HALLMAN</u>	<u>SEC ADMIN</u>	<u>6125 W WITTSTUCK, MARTELL, NE 68404</u>
<u>ARROW NELSON</u>	<u>TREAS</u>	<u>12400 SW 58th MARTELL, NE 68404</u>

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

MARTELL, LOT B, S248.5' N398.5'
SITUS ADDRESS 17525 SW 25th ST, MARTELL, NE.

RECEIVED

DEC 07 2018

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. AGEMA
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

Give a detailed description of the use of the property:

THIS PROPERTY IS USED SOLELY AS A CHURCH FELLOWSHIP HALL FOR CHURCH MEETINGS & EVENTS.

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

Rodney Hallman
Authorized Signature

CHAIR ADMIN COUNCIL
Title

12-7-2018
Date

Retain a copy for your records.

For County Assessor's Recommendation

- Approval
 Approval of a Portion
 Denial

COMMENTS: _____

Rob Ogden
Signature of County Assessor 3/25/19
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.

File with Your County Assessor on or Before December 31

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 East Lincoln Christian Church		County Name Lancaster	Tax Year 2019
Name of Owner of Property Same		State Where Incorporated NE	
Street or Other Mailing Address of Applicant 7001 Edenton Road		Total Actual Value of Real and Personal Property \$0.00	Parcel ID Number P054574
City Lincoln	State NE	Zip Code 68516	Contact Name Gayle Gengenbach
Email Address elcc.assistant@gmail.com		Phone Number 402-486-4673	

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
LeRoy Sievers	Board Moderator	716 Driftwood, Lincoln, NE 68510
Todd Gengenbach	Vice Moderator	6024 Culwells Rd. Lincoln, NE 68516
Paul Few	Treasurer	2425 Folkways Blvd., #220 Lincoln, NE 68521

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

General Personal Property - computer's value \$224 (2018) placed in service in 2015 value of \$538.
No other significant personal property has been placed in service in the past year; other than nominal office supplies, disposables, etc.

RECEIVED

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

Agricultural and Horticultural Society Educational Religious Charitable Cemetery

DEC 19 2018

Give a detailed description of the use of the property:

Personal property/computer used for the purpose of routine religious services, such as record keeping, publications, bulletins, etc.

ARMAN H. AGENA
LANCASTER COUNTY ASSESSOR/
PUBLICATIONS BUREAU

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: *Gayle A. Gengenbach*

Title: *Treasurer Asst.*

Date: *Dec 18, 18*

Retain a copy for your records.

For County Assessor's Recommendation

Approval

Approval of a Portion

Denial

COMMENTS: _____

Signature of County Assessor: *Rob Ogden* Date: *3/25/19*

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.

File with Your County Assessor on or Before December 31

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

FORM 451

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

Name of Organization MADONNA REHABILITATION HOSPITAL	County Name LANCASTER	Tax Year 2019
Name of Owner of Property MADONNA REHABILITATION HOSPITAL	State Where Incorporated NEBRASKA	
Street or Other Mailing Address of Applicant 5401 SOUTH STREET	Total Actual Value of Real and Personal Property \$	Parcel ID Number 16 20 247 005 000
City LINCOLN	State NE	Zip Code 68506-2150
Contact Name MICHAEL D. MUNRO		Phone Number 402-413-4888
Email Address mmunro@madonna.org		

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
Mark Fahleson	Chairperson	1128 Lincoln Mall, Suite 300, Lincoln, NE 68508
Gary Perkins	Vice Chairperson	22621 Homestead Rd, Elkhorn, NE 68022
Mike McCrory	Secretary	1612 Old Farm Road, Lincoln, NE 68512

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

ASPEN 16TH ADDITION, Lot 1, REMAINING PORTION EX 1.11+- AC IN CENTER

Situs Address: 7111 STEPHANIE LN, LINCOLN, NE 68516

RECEIVED

DEC 27 2018

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:

Madonna Rehabilitation Hospital owns and operates this property as part of its rehabilitation services for the community of Lincoln. Madonna seeks a percentage property tax exemption of up to 100%, due to the use of the property as a center for rehabilitation of patients and predominant utilization consistent with Madonna's charitable purpose of comprehensive healthcare for the community.

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

Michael D. Munro
Authorized Signature

General Counsel

12-27-2018
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 on or Before December 31

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 NEBRASKA WESLEYAN UNIVERSITY		County Name LANCASTER	Tax Year 2019
Name of Owner of Property NEBRASKA WESLEYAN UNIVERSITY		State Where Incorporated NEBRASKA	
Street or Other Mailing Address of Applicant 5000 ST. PAUL AVE		Total Actual Value of Real and Personal Property \$90,000.00	Parcel ID Number 17-17-214-008-000
City LINCOLN	State NE	Zip Code 68504	Contact Name Benjamin Dahl
Phone Number 402-465-2183		Email Address bdahl@nebrwesleyan.edu	

402-380-6078

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
FRED OHLES	PRESIDENT	5000 ST. PAUL AVE LINCOLN, NE 68504
TISH GADE-JONES	VP - FINANCE	5000 ST. PAUL AVE LINCOLN, NE 68504
GREG MASCHMAN	CONTROLLER	5000 ST. PAUL AVE LINCOLN, NE 68504

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
BALDWINS SUBDIVISION, lot 5, S21.7'

2730 N 48

RECEIVED

DEC 21 2018

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:

BUILDING USED FOR GENERAL STORAGE FOR CAMPUS/MAINTENANCE DEPARTMENT.

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

[Signature]
Authorized Signature

VP - FINANCE/ADMIN

12/14/18

Title

Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval

COMMENTS: _____

Approval of a Portion

Denial

[Signature]
Signature of County Assessor

3/25/19
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.