File with Your County		Exen	nption A	Application	า	I	FORM
Assessor on or Before December 31 fo	r Tax Exemption o	on Real ar	nd Personal	Property by Qu	alifying Organiza	tions	451
F	ailure to properly com				n a denial of the exem	ption.	-101
Name of Organization Dimensions Educationa	Research Found	ation		County Name		Tax Year	
Name of Owner of Property			· · · · · · · · · · · · · · · · · · ·	Lancaster State Where Incorpora	lod	2019	
Dimensions Educationa	I Research Founda	ation		Nebraska	leu		
Street or Other Mailing Address of	f Applicant			Total Actual Value of Re	eal and Personal Property	Parcel ID N	lumber
7700 A St	State			\$1,400,000.00			03-030-000
Lincoln	NE	_{בוم} 685	Code 10	Contact Name Rick Reeble		Phone Nur 402.467	
Email Address	,,,		10	TRICK TREEDIE		402.407	.0112
rickr@dimensionsfound	lation.org						
Type of Ownership	al Society 🛛 Educat	tional Organiza	ation 🔲 F	eligious Organization	Charitable Organiz	ation	Cemetery Organization
Name	Title of 0 Directors, c			Addre	ess, City, State, Zip Co	de	
Nancy Rosenow	Executive	Director	7700 A St I	incoln NE 68510			
Marjorie Koestne	- Presia	lert	7700 A	St Unco	In NE 68:	610	•
U Legal description of real property	and general description of	all deprociable	tangible paracas	proporty overat lies	nd motor unki-l-	100	
Wedgewood Manor Fi			- ranginie heizous	a property, except license	eu motor venicies:	KE	UEIVED
770	A CC	4				D	EC 1 9 2018
				-		N	ORMAN H. AGENA
Property described above is used		_		ble boxes):		- LANCAS RI	TER COUNTY ASSESSOR/ EGISTER OF DEEDS
Agricultural and Horticult	ural Society 🔀 Educa	ational	Religious	Charitable	Cemetery		
Give a detailed description of the	use of the property:						
Connections with the wo We leased Christensen All organizations, except for a Is all of the property used exc Is the property used for finance Is a portion of the property use	Dert of the <u>wed out</u> M n Agricultural and Hortic usively as described above ial gain or profit to either the	build <u>ach</u> cultural Socie ? e owner or own	≥18 ¥ bty, must completion ner or organization	Christerse	と <i>い</i> タイズを tions. 		re building
If Yes, state the number of h Is the property owned or used	ours per week	discriminates in	- n membership or (employment based on ra			
or national origin?	• • • • • • • • • • • • • • • • • • • •				YE	S NO	
complete. I also de	s' of law, I deelare that that clare that I am duly authori	zed to sign this	nis exemption ap s exemption appli	plication and, to the bes cation.	t of my knowledge and be	lief, it is corre	ect and .
sign	$K \sim$	2		Fin	ance Director		12/17/2018
here Autiforized Sign	ature	X		Title		· Dat	
				or your records.			
•	Ĺ	For Cour	nty Assessor	s Recommendation	on		
X, Approval	COMM	IENTS: '					
Approval of a Portion			$\left(\right) \right)$	101	$\overline{\mathcal{A}}$		
			1at	-(101	e	2	125/19
Denial		Sig	nature of County	Assessor		Dat	1111
			-	qualization Use O			
I declare that t laws of the State o	o the best of my knowledge f Nebraska.	and belief, the	e determination m	ade by the County Boar	d of Equalization is correct	pursuant to	the
Approved		IENTS:					•
Approved Approved							
Denied							
County Cle	rk: A legible copy o	f this form		final decision of			ation
must be delivered	electronically to the	e Nebraska	a Departmen	t of Revenue with			d's decision. at . §§ 77-202.01 and 77-202.04
96-135-1999 Rev. 4-2018 Supersedes 9				-	Autorized		at . 39 / 1-202.01 and / 1-202.04

File with Your County	Fx	emption /	Application	า	1	FORM
Assessor on or for Tax E				alifying Organiza	tions	
Before December 31		Read instructions	on reverse side.			451
Name of Organization	property complete o	r timely file this ap	County Name	n a denial of the exem	Tax Year	
Bryan Medical Center			Lancaster		2019	
Name of Owner of Property			State Where Incorporat	led	12010	
Bryan Medical Center			Nebraska			
Street or Other Mailing Address of Applicant			Total Actual Value of Re \$894,900.00	eal and Personal Property	Parcel ID N	
1600 S. 48th Street	State	Zip Code	Contact Name		10-36-3 Phone Nur	03-006-000
Lincoln	NE	68506	Julie Lacy		402-481	
Email Address julie.lacy@bryanhealth.org Type of Ownership		······	· · · · · · · · · · · · · · · · · · ·			î
Agricultural and Horticultural Society	Educational O	rganization	Religious Organization	Charitable Organiz	ation	Cemetery Organization
Name	Title of Officers		Addre	ess, City, State, Zip Co	de	
Kim Russel	Directors, or Parti CEO		48th Street, Linc			
Russ Gronewold	CFO		48th Street, Lind			
John Woodrich	000	1600 South	48th Street, Linc	oln, NE 68506		
Legal description of real property and gener. DAVISS SUBDIVISION, LOT 7 PT LOT 27 & LOTS 28 -30 EX	1 - 2, REM PT E>	(164.98 IN NE I	FOR RD & LOTS	ed motor vehicles: 3 - 7 & 20 - 24 & ∖	AC ALLE	EY ADJ & REM
Property described above is used in the follo	wing exempt category (please mark the application	able boxes):			
Agricultural and Horticultural Society	Educational	Religious	X Charitable	Cemetery		CEIVE
All organizations, except for an Agricult Is all of the property used exclusively as Is the property used for financial gain or Is a portion of the property used for the s	described above? profit to either the owner ale of alcoholic beverag	or owner or organization	on making exclusive use o	of the property?	is ∏no is ⊠no	STER COUNTY ASSESS REGISTER OF DEEDS
If Yes, state the number of hours per w Is the property owned or used by an orga		 ates in membership or	employment based on ra	ice, color,		
or national origin? Under penalties of law, I	declare that I have exan	nined this exemption an	pplication and, to the best	t of my knowledge and be		ect and
complete. I also declare that I	am duly authorized to s	ign this exemption appl	ication.			
sign (unull	1- And	well		CFO		0-2-18
here Authorized Signature	-	Retain a copy f	Title or your records.		Dat	e
			's Recommendation	on		
Approval	COMMENTS:					
Approval of a Portion						testa
Denial	1	Signature of County	A			125/19
	, Ear C			~h.	Dat	
I declare that to the best of			qualization Use O	d of Equalization is correct	t pursuant to	the
laws of the State of Nebraska						
Approved	COMMENTS:					
Approval of a Portion						
Denied				_		
	ļ	Signature of County	Board Member		Date	9
must be delivered electro	nically to the Neb				the Board	d's decision.
Nebraska Department of Revenue, Property Assessr 96-135-1999 Rev. 4-2018 Supersedes 96-135-1999 F				Authorized	by Neb. Rev. SI	at . §§ 77-202.01 and 77-202.04

File with Your County Assessor on or

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

FORM

Before December 31		Re	ad instructions	on reverse side.			451
	ailure to properly comple	ete or tim	ely file this app	plication will result i	n a denial of the exem	ption.	
ame of Organization				County Name		Tax Year	
yan Medical Center				Lancaster		2019	
me of Owner of Property				State Where Incorpora	ited		
yan Medical Center				Nebraska			
reet or Other Mailing Address o	f Applicant				eal and Personal Property	Parcel ID Numbe	r
00 S. 48th Street				\$85,200.00		10-36-334-0	09-000
ty .	State	•	Code	Contact Name		Phone Number	
ncoln	NE	685	06	Julie Lacy		402-481-896	66
mail Address						-	
lie.lacy@bryanheath.c	org						
pe of Ownership							
Agricultural and Horticultur	al Society Education	nal Organiz	ation 🗌 F	Religious Organization	Charitable Organiz	ation Ce	metery Organiz
Name	Title of Off			۵ ماماس	and Oits State Zin Or		
	Directors, or	Partners			ess, City, State, Zip Co	ae	
im Russel	CEO			n 48th Street, Lind			
uss Gronewold	CFO			n 48th Street, Lind			
ohn Woodrich	C00		1600 South	n 48th Street, Lind	coln, NE 68506		
egal description of real property		depreciable	e tangible persona	al property, except licens	ed motor vehicles:		
Central Park Subdivisio	on, Block 2, Lot 9						
Proporty Address 001	E Q 15th Q1 1					DECE	
Property Address: 221	io S. Ioth St., Lincolr	1, NE 68	502			RECE	
		Mark Street					
roperty described above is used	I in the following exempt catego	iory (nlease	mark the applica	able boxes).		DEC 3	1 2018
—							
Agricultural and Horticultu	ural Society Education	าเลา	Religious	Charitable	Cemetery	NORMAN LANCASTER COL	H. AGENA
property is used for a co	ommunity garden.					REGISTER	Gr DECD3
Bive a detailed description of the Property is used for a co Il organizations, except for an Is all of the property used excl Is the property used for financ Is a portion of the property used	ommunity garden. n Agricultural and Horticult lusively as described above? ial gain or profit to either the o	wner or ow	mer or organizatio	on making exclusive use	of the property?	ES [] NO ES [] NO	
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File with Your County Assessor on or			Application		FORM
Before December 31			I Property by Qualifying Organiza on reverse side.	tions	451
			plication will result in a denial of the exen		
Name of Organization		· .		Tax Year	ŝ
DIALYSIS CENTER OF LINCO Name of Owner of Property	JLN, INC.		LANCASTER State Where Incorporated	2019	
DIALYSIS CENTER OF LINCO	LN, INC.		NEBRASKA		
Street or Other Mailing Address of Applicant			Total Actual Value of Real and Personal Property	Parcel ID Number	0.000
7910 "O" STREET	State Zip	Code	\$822,423.00	Phone Numper	248
-INCOLN	NE 68510-		KAREL S. SYSEL, CFO	402-742-8556	
Email Address			· · · · · · · · · · · · · · · · · · ·		
ksysel@dialysiscenteroflincoln.	.org				
Agricultural and Horticultural Society	Educational Organiza	ition	Religious Organization X Charitable Organiz		tery Organizat
	Title of Officers,		-		liery Organizat
Name	Directors, or Partners		Address, City, State, Zip Co	de	
		Schedule o	of Directors & Officers attached		
egal description of real property and genera	al description of all depreciable	tangible persona	al property, except licensed motor vehicles:	DECI	
Personal property located at:				RECI	
Address: 3211 Salt Creek Circ				NOV	6 2018
Personal Property Value at 01/	1K Corporate Center A	Addition; Lir	ncoln, Lancaster County Nebraska	NOV 2	0 2010
roperty described above is used in the follow				NORMA LANCASTER C	H. AGENA
roperty described above is used in the follow	wing exempt category (please	mark the applicat	Die Doxes):	LANGASIER	JUNIT HOOL
Agricultural and Horticultural Society	Educational	-		REGISTI	R OF DEEDS
Personal property & equipment	used for dialysis treat	Religious	Charitable Cemetery	REGIST	
ive a detailed description of the use of the p Personal property & equipment Creek Circle, Lincoln, Nebraska Il organizations, except for an Agricultu Is all of the property used exclusively as d	property: used for dialysis treat a 68504 rral and Horticultural Societ lescribed above?	Religious	d-stage renal disease at a 501(c)3 f	REGISTI acility located a	
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Approval Ap	ible copy of this form s	Religious The re	d-stage renal disease at a 501(c)3 free the following questions.	REGIST	t 3211 Sal

File with Your County Assessor on or Before December 31

Exemption Application

FORM 451

r 31	for Tax Exemption on Real and Personal Property by Qualifying Organizations
101	Bead instructions on reverse side

Failure to properly complete or timely file this application will result in a denial of the exemption. Name of Organization County Name Tax Year Christ Lutheran Church Lancaster 2019 Name of Owner of Property State Where Incorporated Christ Lutheran Church Lincoln Nebraska Nebraska Street or Other Mailing Address of Applicant Total Actual Value of Real and Personal Property Parcel ID Number 4325 Sumner Street \$443,200.00 16-21-431-001-000 City State Zip Code Contact Name Phone Number Lincoln NE 68516 Michael Milbourn 402-483-7774 Email Address

mmilbourn@christlincoln.org

Type of Ownership Agricultural and Horticultural Society Educational Organization Religious Organization Charitable Organization Cemetery Organization Title of Officers, Name Address, City, State, Zip Code **Directors**, or Partners Torin Berge Chair 7724 S. 81st St. Lincoln, NE 68516 Kyle Kaldahl Vice Chair 485 Adams St. Bennett, NE 68137 Valerie Dorfmeyer 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: Villiage Meadows 16th Addition, Block 3, Lot1 RECEIVED

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

NOV 1 4 2018

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?	
Is the property used for financial gain or profit to either the owner or owne	r or organization making exclusive use of the property? TYES XO
Is a portion of the property used for the sale of alcoholic beverages? If Yes, state the number of hours per week	
Is the property owned or used by an organization which discriminates in n or national origin?	nembership or employment based on race, color, Sexemption application and, to the best of my knowledge and belief, it is correct and
Under penalties of law, I declare that I have examined this complete. I also declare that I am duly authorized to sign this e	e exemption application and, to the best of my knowledge and belief, it is correct and xemption application.
sign ///////lan	Chief Operating Officer 11/08/2018
here Authorized Signature	Title Date
Retair	a copy for your records.
For County	Assessor's Recommendation
	above 3/25/19 Ture of County Assessor
For County	Board of Equalization Use Only
I declare that to the best of my knowledge and belief, the c laws of the State of Nebraska.	etermination made by the County Board of Equalization is correct pursuant to the
Approved COMMENTS:	
Approval of a Portion	
Denied Signat	ture of County Board Member Date
County Clerk: A legible copy of this form s must be delivered electronically to the Nebraska	howing the final decision of the County Board of Equalization Department of Revenue within seven days after the Board's decision.
Nebraska Department of Revenue, Property Assessment Division 96-135-1999 Rev. 4-2018 Supersedes 96-135-1999 Rev. 1-2014	Authorized by Neb. Rev. Stat . §§ 77-202.01 and 77-202.04
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·

File with Your County	E	cemption	Applicatio	n		FORM
Assessor on or Before December 31			I Property by Q	ualifying Organiza	tions	451
Failure to	properly complete			t in a denial of the exem	ption.	
Name of Organization			County Name		Tax Year	
First Presbyterian Church of Li	ncoln Nebraska		Lancaster		2019	
Name of Owner of Property			State Where Incorpo	rated		
Street or Other Mailing Address of Applicant			Nebraska	Real and Personal Property	Parcel ID N	umber
840 S 17th Street			\$112,500.00	rical and reisonal rioperty		07-001-000
City	State	Zip Code	Contact Name		Phone Nurr	
Lincoln	NE	68508	Cheryl Rennicl	k	402-477	-6037
Email Address				44,4.5.8 (2000)		
finance@fpclincoln.org						
Type of Ownership	· · · · · · · · · · · · · · · · · · ·				. T	7
Agricultural and Horticultural Society	Educational C		Religious Organization	Charitable Organiz	ation	Cernetery Organization
Name	Title of Officer Directors, or Par		Add	ress, City, State, Zip Co	de	
Nate Van Meter	President	118 901 0.284 0.00	Street, Lincoln,	NE 68508		
Sherry Knapp	Treasurer		Street, Lincoln,			
Terri Sherman	Secretary		Street, Lincoln,			
Legal description of real property and gener	al description of all dep	reciable tangible person	al property, except licer	nsed motor vehicles:		
Lincoln Original, Block 183, Lo	it 1				RE	CEIVED
163	TF				J	AN 17 2019
Property described above is used in the follo		please mark the application	able boxes):			
Agricultural and Horticultural Society		Religious	Charitable	Cemetery	LANCASTE	ROB OGDEN R COUNTY ASSESSOR
Give a detailed description of the use of the				Contentry		ISTER OF DEEDS
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Is all of the property used exclusively as						
Is the property used for financial gain or Is a portion of the property used for the s						
If Yes, state the number of hours per w	eek					
Is the property owned or used by an orga	nization which discrimi	nates in membership or	employment based on	race, color,		
or national origin? Under penalties of law, 1				est of my knowledge and be		ct and
complete. I also declare that I						
sign Masthe 11-	-1161W		_ Preside	in A	/	110/19
here Authorized Signature			Title		Date	
		Retain a copy f	or your records	·		
	For	County Assessor	's Recommendat	ion		
🕅 Approval	COMMENTS:				······	
Approval of a Portion		O	$\overline{\mathcal{A}}$	/		1 1
		Taba (101	Le	2	125/19
Denial		Signature of County	Assessor		Date	125/11
	For C	ounty Board of E		Only		· · · · · · · · · · · · · · · · · · ·
	f my knowledge and be			ard of Equalization is correct	pursuant to the	19
laws of the State of Nebraska	COMMENTS:					
	COMMENTS.					
Approval of a Portion						
Denied		Signature of County	Board Member	·····	Date	
County Clerk: A lec	ible copy of this	form showing the	e final decision of	f the County Board o	f Equaliza	tion
must be delivered electron Nebraska Department of Revenue, Property Assessm	nically to the Neb	raska Departmen	t of Revenue with			s decision.
96-135-1999 Rev. 4-2018 Supersedes 96-135-1999 R	ev. 1-2014			Autorized L	ALON LON OLD	. 33 11-202.01 310 11 202.04

	File with Your County	Exen	nption /	Application		FORM
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Incoln NE 68510 Brad Schiltz 402-475-7666 Brank Advances Enabled Advances Incolneration Connection Incolneration Connection Incolneration Connection Incolneration Connection Incolneration Connection Incolneration Incol	City	State Zin	Code			
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Name Title of Officers, Directors, or Partners Address, City, State, Zip Code See Attached	•	Educational Organiz	ation T F	Religious Organization	Charitable Organization	
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JAN 11 2019 Property described above is used in the following exempt category (please mark the applicable boxes): LANCASTER COUNTY Assess LANCASTER COUNTY Assess Carried of the property: Provide specialized residential treatment services for adolescent males ages 12-18 who have been sexually abusive. Progr also includes day treatment for youth that do not require 24 hour placement. All organizations, except for an Agricultural and Horifoultural Society, must complete the following questions. Is all ot he property used for the sale of alconect bewarger? If yes, state the number of hours per weak Is a portion of the property used for the sale of alconect bewarger? If yes, state the number of hours per weak Is the property used for the sale of alconect bewarger? If yes, state the number of hours per weak Is a portion of the property used for the sale of alconect bewarger? If yes, state the number of hours per weak Is a portion of the property used for the sale of alconect bewarger? If yes, state the number of hours per weak Is a portion of the property used for the sale of alconect bewarger? If yes, state the number of hours per weak Is a portion of the property used for the sale of alconect bewarger? If yes, state the number of hours per weak Is a portion of the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the property used for the sale of alconect bewarger? If the	BORGELTS SUBDIVISION (O	F BLOCK 17 SOUTH	ILINCOLN)	, Lot 7 - 8	RF	CENCO
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Property described above is used in the following exempt category (please mark the applicable boxes): Agricultural and Horticultural Society		U14 51	Minar	- lat		IAN 1 1 2010
Agricultural and Horticultural Society Educational Peligious Charitable Cemetery NAASI ER USUNITY ASSES NeGISTER OF DEEDS Sile 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. Progr residential treatment for youth that do not require 24 hour placement. If organizations, except for an Agricultural and Horticultural Society, must complete the following questions. Is all of the property used exclusively as described above?			una	A	· · · · ·	
	Property described above is used in the follo	wing exempt category (please	mark the applica	ble boxes):	LANCAS	ROB COUNTY ADDESO
Bile 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. Progri liso includes day treatment for youth that do not require 24 hour placement. Ill organizations, except for an Agricultural and Hortloultural Society, must complete the following questions. Is a did the property used exclusively as described above? Is the property used for thancial gain or profit to either the owner or owner or organization making exclusive use of the property exclusively as described above? I'Yes, state the number of hours per week Is the property used for the sale of alcoholic beverages? I'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 orgin? Ounder penalties of law, I declare that I have examplion application. I'Yes, Salo No Under penalties of law, I declare that I have examplion application. Signature Finance Director Title Retain a copy for your records. For County Assessor's Recommendation Signature of County Assessor's Recommendation Signature of County Assessor's Recommendation Signature of County Board of Equalization Use Only I declare that I and where and belief, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of New, Revedege and belief, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of New Lews and the determination for the determination of Revenue within seven days after the Board's decision. Authorized Signature of County Board Member Date Date Date Date Signature of County Board Member Date Date Date Date Date Date Date Date Dat	Agricultural and Horticultural Society	Educational	Religious	Charitable	Cemetery . P	EGISTER OF DEEDS
Is all of the property used exclusively as described above? Is the property used of financial gain or profit to either the owner or owner or organization making exclusive use of the property? Is the property used of financial gain or profit to either the owner or owner or owner or organization making exclusive use of the property? Is the property used of the safe of alcoholic beverages? 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? Under penalties of law, I declare that I have examined this exemption application and, to the best of my knowledge and bellef, It is correct and complete. I also declare that I any duly authorized to sign this exemption application. Sign Mathorized Signature Authorized Signature Approval Commentation Approval of a Portion Is declare that to the best of my knowledge and bellef, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of Nebraska. Approval 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 Reveux. Progret yssessement Division						
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?	All organizations, except for an Agricultu	Iral and Horticultural Socie	ety, must compl	ete the following questions.	NIVES F	
Is a portion of the property used for the sale of alcoholic beverages?						
Is the property owned or used by an organization which discriminates in membership or employment based on race, color, ornalized orgin?	Is a portion of the property used for the s	ale of alcoholic beverages? .				
or national origin? YES NO Under genalties of law, 1 declare that 1 have examined this exemption application and, to the best of my knowledge and belief, it is correct and complete. I also declare that 1 am duly authorized to sign this exemption application. Sign Sign Finance Director 12/31/18 Authorized Signature Finance Director 12/31/18 Date Date Date Authorized Signature County Assessor's Recommendation Approval COMMENTS: Approval of a Portion J255/119 Date Signature of County Assessor Date Authorized New Yee Reverse Signature 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: Date Denied Signature of County Board Member<			-			
Under penalties of law, I declare that I have examined this exemption application and, to the best of my knowledge and bellef, it is correct and complete. I also declare that I and uly authorized to sign this exemption application. Sign Authorized Signature Finance Director It/_3///8 Date Retain a copy for your records. For County Assessor's Recommendation Approval COMMENTS: For County Assessor's Recommendation Signature of County Assessor For County Board of Equalization Use Only I declare that to the best of my knowledge and bellef, the determination made by the County Board of Equalization is correct pursuant to the laws of the State of Newtraska. Approved COMMENTS: Signature of County Board Member County Clerk: A legible copy of this form showing the final decision of the County Board of Equalization Signature of County Board Member County Clerk: A legible copy of this form showing the final decision of the Board's decision. Authorized by Neb, Rev. Stat. §5 77-202.01 and T	or national origin?	nization which discriminates in	n membership or	employment based on race, colo	r, ∏yes 🕅	INO
Sign here Sign Stature Finance Director 12/31/18 Authorized Signature Retain a copy for your records. Date For County Assessor's Recommendation Image: Date Date Approval COMMENTS: Image: Date Image: Date Approval of a Portion Image: Date Image: Date Image: Date Ideclare 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. Image: Date Image: Date Approved COMMENTS: Image: Date Image: Date Image: Date Ideclare 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. Image: Date Image: Date Approved COMMENTS: Image: Date Image: Date Image: 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. Authorized by Neb. Rev. Stat. §8 77-202.01 and T Date Date Authorized by Neb. Rev. Stat. §8 77-202.01 and T	Under penalties of law, I of	declare that I have examined I	this exemption ap	plication and, to the best of my h		
Authorized Signature Title Title Authorized Signature Retain a copy for your records. For County Assessor's Recommendation Approval COMMENTS: Approval of a Portion 3/25/179 Denial Signature of County Assessor 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: Approved COMMENTS: Signature of 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 Date 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. Authorized by Neb. Rev. Stat. §5 77-202.01 and T Approvenue, Property Assessment Division		and ouly authorized to sign thi	s exemption appli	ication.		
Retain a copy for your records. For County Assessor's Recommendation Approval COMMENTS: Approval of a Portion 3/25/19 Denial Signature of County Assessor 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 Date Denied Signature of County Board Member 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.		tra			Director	12/31/18
For County Assessor's Recommendation Approval Approval of a Portion Denial COMMENTS: Signature of County Assessor Signature of County Assessor Signature of County Board of Equalization Use Only Ideclare 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: Signature of County Board Member Denied Signature of County Board Member 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. Authorized by Neb. Rev. Stat. §§ 77-202.01 and 7	here 'Authorized Signature	Pote	ain a conv f			Date
Approval COMMENTS:					······	
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Signature of County Assessor Date For County Board of Equalization Use Only I declare that to the best of my knowledge and bellef, 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. Authorized by Neb. Rev. Stat. §§ 77-202.01 and 7. Authorized by Neb. Rev. Stat. §§ 77-202.01 and 7.	Approval of a Portion		A	-()		alatic
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.	Denial	b	CO CO	Call	-	3/25/19
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.						Date
Iaws 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. braska Department of Revenue, Property Assessment Division	I declare that to the best				alization is correct survey	ant to the
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.			e determination n	have by the County board of Equ	anzation is correct pursua	
Denied Signature of County Board Member Date 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. Bebraska Department of Revenue, Property Assessment Division	Approved	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. Date ebraska Department of Revenue, Property Assessment Division Authorized by Neb. Rev. Stat. §§ 77-202.01 and 77.	Approval of a Portion					
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. Authorized by Neb. Rev. Stat. §§ 77-202.01 and 77. Authorized by Neb. Rev. Stat. §§ 77-202.01 and 77.	Denied	•				Dete
must be delivered electronically to the Nebraska Department of Revenue within seven days after the Board's decision. ebraska Department of Revenue, Property Assessment Division Authorized by Neb. Rev. Stat. §§ 77-202.01 and 77		-				
ebraska Department of Revenue, Property Assessment Division Authorized by Neb. Rev. Stat. §§ 77-202.01 and 77	County Clerk: A leg	lible copy of this form	a Departmen	e final decision of the Co	ounty Board of Equ	alization
-135-1999 Rev. 4-2018 Supersedes 96-135-1999 Rev. 1-2014	ebraska Department of Revenue, Property Assessm	nent Division	pur union	. et norende widdin Sev		

	P .		A	
File with Your County Assessor on or for Tax F	Exemption on Be	Cemption /	Application I Property by Qualifying Orga	FORM
Before December 31		Read instructions	on reverse side.	451
Failure to Name of Organization	properly complete	or timely file this ap	plication will result in a denial of the	
HopeSpoke			County Name Lancaster	Tax Year
Name of Owner of Property			State Where Incorporated	2019
HopeSpoke			Nebraska	\cap
Street or Other Mailing Address of Applican	it		Total Actual Value of Real and Personal Pro	operty Paca N Nurber - 10-XAF
2444 O Street			\$350,600.00	10-35-210-008-000
City	State	Zip Code	Contact Name	Phone Number
Lincoln Email Address	NE	68510	Brad Schiltz	402-475-7666
bschiltz@hopespoke.org				
Agricultural and Horticultural Society	Educational C		Religious Organization 🛛 🕅 Charitable C	rganization
	Title of Officer			
Name	Directors, or Part		Address, City, State, Z	ip Code
See Attached		·		
Legal description of real property and gener BORGELTS SUBDIVISION (C				RECEIVED
		N LINGOLIN		
/ MAA 7.	()	KANN	Monoration	JAN 02 2018
907 Sum	ner-t		property	01414 0 2 2010
	•	,	bla havea's	NORMAN H. AGENA
Property described above is used in the follo				LANCASTER COUNTY ASSESSOR/ REGISTER OF DEEDS
Agricultural and Horticultural Societ	ty Educational	Religious	Cemetery	
Give a detailed description of the use of the			males ages 12-18 who have b	
	described above?			
	sale of alcoholic beverag	-	n making exclusive use of the property?	
Is the property owned or used by an orgation or the property owned or used by an orgation of the property of t	anization which discrimin			YES XNO
complete. I also declare that I			plication and, to the best of my knowledge a cation.	nd belief, it is correct and
sign, Bund Sch			Finance Director	12/2/118
here Authorized Signature	Ht.		Finance Director	12/3//18 Date
nere		Retain a copy for	or your records.	
	For	County Assessor	's Recommendation	
X Approval	COMMENTS:	:		
	COMMENTO.		100	
Approval of a Portion		- tal		Eb~lig
Denial)	1921	John	
		Signature of County	//	Dâte 🖌
			gualization Use Only	
I dealars that to the best of		ounty Board of E		perrect pursuant to the
l declare that to the best o laws of the State of Nebraska	of my knowledge and be		ade by the County Board of Equalization is o	correct pursuant to the
	of my knowledge and be a.	lief, the determination m		
laws of the State of Nebraska	of my knowledge and be a.	lief, the determination m	ade by the County Board of Equalization is o	
laws of the State of Nebraska	of my knowledge and be a.	lief, the determination m	ade by the County Board of Equalization is o	
laws of the State of Nebraska	of my knowledge and be a.	lief, the determination m	ade by the County Board of Equalization is o	
laws of the State of Nebraska Approved Approval of a Portion Denied County Clerk: A leg	of my knowledge and be a. COMMENTS: 	lief, the determination m Signature of County I form showing the	ade by the County Board of Equalization is o Board Member 9 final decision of the County Bo	Date ard of Equalization
laws of the State of Nebraska Approved Approval of a Portion Denied County Clerk: A leg	of my knowledge and be a. COMMENTS: 	lief, the determination m Signature of County I form showing the	Board Member binal decision of the County Bo t of Revenue within seven days a	Date ard of Equalization

File with Your County		Exem	ption /	Application	า		FORM
Assessor on or Before December 31 for Tax Ex	cemption or			I Property by Qu on reverse side.	alifying Organiza	tions	451
	roperly compl	lete or time	ely file this ap	plication will result in	a denial of the exen	ption.	
Name of Organization			r	County Name		Tax Year	
HopeSpoke Name of Owner of Property				Lancaster		2019	
HopeSpoke				State Where Incorporation	ed ·		
Street or Other Mailing Address of Applicant					al and Personal Property	Parcel ID N	lumber
2444 O Street				\$1,269,400.00		10-24-4	39-014-000
City	State	Zip	Code	Contact Name		Phone Nur	
_incoln	NE	685	10	Brad Schiltz		402-475	-7666
Email Address bschiltz@hopespoke.org Type of Ownership							
Agricultural and Horticultural Society	Educatio	onal Organiza	ation 🗌 F	Religious Organization	Charitable Organiz	ation	Cemetery Organization
Name	Title of Of Directors, or			Addre	ss, City, State, Zip Co	ode	
See Attached							
Legal description of real property and genera KINNEYS O STREET ADDITIC					ed motor vehicles:	RE(CEIVED
24	43	P :	St			JA	N. 0 2 2019
Property described above is used in the follow	ving exempt cate	gory (please	mark the applica	ble boxes):		LANCAST	IMAN H. AGENA
Agricultural and Horticultural Society	Educati	ional	Religious	Charitable	Cemetery	REG	R COUNTY ASSESSOR
Give a detailed description of the use of the p							
Provide outpatient therapy servi treatment to at-risk youth. Provid difficulties.	de therapeut	tic after-s	chool day ti	eatment for child		th emotio	nal & behavioral
All organizations, except for an Agricultu Is all of the property used exclusively as d Is the property used for financial gain or pi Is a portion of the property used for the sa If Yes, state the number of hours per we Is the property owned or used by an orgar or national origin?	escribed above? rofit to either the le of alcoholic be ek nization which dis	owner or owr everages?	ner or organizatio	on making exclusive use of the second s	f the property? YE	s ⊠no s ⊠no	
Under penalties of law, I de complete. I also declare that I a	eclare that I have am duly authorize	e examined the	his exemption appli	plication and, to the best cation.	of my knowledge and be	lief, it is corre	ect and
sign <u>Authorized Signature</u>	hito			Fin	ance Director	Date	12/31/18
	·,			or your records.			· · ·
		For Coun	ty Assessor	's Recommendatio	n		
🗙 Approval	COMME	NTS:		,	4		<u></u>
Approval of a Portion			Δ / l	\square	1		
Denial		Sign	alure of County	Assessor	2	<u>3</u>	25/19
	and the second se			qualization Use O			
I declare that to the best of	my knowledge a	nd belief, the	e determination n	ade by the County Board	l of Equalization is correc	t pursuant to	the
laws of the State of Nebraska.		NTC.	· · : · · · ·	• • • • •	in the second second		
	COMME	NIS: <u> </u>	· · · · ·			;	
Approval of a Portion	· · ·	<u> </u>	· ·· · _ ·	·····			••••
Denied	. · ·				· .		
_		•	nature of County		· · ·	Date	
County Clerk: A leg must be delivered electron					n seven days after	the Board	l's decision.
lebraska Department of Revenue, Property Assessme 6-135-1999 Rev. 4-2018 Supersedes 96-135-1999 Re	ent Division						at . §§ 77-202.01 and 77-202

File with Your County	Exemp	otion A	pplication		FORM
Assessor on or Before December 31 for Tax E	xemption on Real and	Personal	Property by Qualifying Organ reverse side.	anizations	451
Failure to			lication will result in a denial of the	e exemption,	
Name of Organization		٢	County Name	Tax Year	
HopeSpoke		• •	Lancaster	2019	
Name of Owner of Property HopeSpoke			State Where Incorporated		
Street or Other Mailing Address of Applicant			Total Actual Value of Real and Personal F	Property Parcel ID N	lumber
2444 O Street			\$85,500.00		40-006-000
City	State Zip Cod	le	Contact Name	Phone Nur	
Lincoln	NE 68510		Brad Schiltz	402-475	5-7666
Email Address bschiltz@hopespoke.org Type of Ownership					
Agricultural and Horticultural Society	Educational Organization	Re Re	eligious Organization Charitable	Organization	Cernetery Organization
Name	Title of Officers, Directors, or Partners		Address, City, State,	Zip Code	
See Attached	Directors, or rathers				
				· · · · · · · · · · · · · · · · · · ·	
Legal description of real property and gener KINNEYS O STREET ADDITIO				REC	EIVED
2	501 P St	Ļ		JAN	0 2 .2019
Property described above is used in the follo	wing exempt category (please mar	rk the applicab	le boxes):	NORN	IAN H. AGENA
Agricultural and Horticultural Society	Educational	Religious	Charitable Cemeter	y REGIS	COUNTY ASSESSOR/ TER OF DEEDS
Give a detailed description of the use of the	property:				
Parking lot for HopeSpoke to pr abuse education and treatment emotional & behavioral difficulti	to at-risk youth. Provide es.	therapeu	tic after-school day treatment		
All organizations, except for an Agricult			te the following questions.	. XYES INO	
			making exclusive use of the property? .		
Is a portion of the property used for the s If Yes, state the number of hours per w	ale of alcoholic beverages?			. YES NO	
Is the property owned or used by an orga	nization which discriminates in me	mbership or e	molovment based on race, color.		
or national origin?			lication and, to the best of my knowledge	. YES NO	
Complete. I also declare that I	am duly authorized to sign this exe	exemption app emption applic	lication and, to the best of my knowledge ation.	and belief, it is corr	ect and
sign, Brad &			Finance Diverte		2 /2 lia
here Authorized Signature	With		Finance Directo	Dat	
nere	Retain	a copy fo	r your records.		
	For County	Assessor's	Recommendation		
Approval	COMMENTS:				-
		ΩI	2		1
Approval of a Portion		1 ato	C		12-19
Denial	Signatu	re of County A	CENTRAL CONTRAL	<u>2/</u>	25/11
[ualization Use Only		
I declare that to the best of			ade by the County Board of Equalization is	correct pursuant to	
laws of the State of Nebraska			, , ,		
Approved	COMMENTS:				X
Approval of a Portion					
Denied			oard Member		
Ocumente Olanda Alta-				Date	
must be delivered electron	nically to the Nebraska De	epartment	final decision of the County Be of Revenue within seven days	after the Board	l's decision.
Nebraska Department of Revenue, Property Assessm 96-135-1999 Rev. 4-2018 Supersedes 96-135-1999 R	nent Division				at . §§ 77-202.01 and 77-202.04

File with Your County **Exemption Application** FORM Assessor on or for Tax Exemption on Real and Personal Property by Qualifying Organizations 451 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 County Name Tax Year HopeSpoke Lancaster 2019 Name of Owner of Property State Where Incorporated HopeSpoke Nebraska Street or Other Mailing Address of Applicant Total Actual Value of Real and Personal Property Parcel ID Number \$82,700.00 2444 O Street 10-24-440-013-000 City State Zip Code Contact Name Phone Number Lincoln NE 68510 Brad Schiltz 402-475-7666 Email Address bschiltz@hopespoke.org Type of Ownership Agricultural and Horticultural Society Educational Organization Religious Organization Charitable Organization Cemetery Organization Title of Officers, Name Address, City, State, Zip Code **Directors**, or Partners 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 RECEIVED JAN 02 2018 Property described above is used in the following exempt category (please mark the applicable boxes): NORMAN H. AGENA Agricultural and Horticultural Society Educational Religious X Charitable **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 agees 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? **V**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 **N**NO Is a portion of the property used for the sale of alcoholic beverages? **MNO** 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? ØNOYES Under penalties of law, I declare that I have examined this exemption application and, to the best of my knowledge and bellef, it is correct and complete. I also declare that I am duly authorized to sign this exemption application. sign Brad 12/31/18 **Finance Director** Authorized Signature Title here Retain a copy for your records. For County Assessor's Recommendation Approval COMMENTS: Approval of a Portion Denial Signature of County As 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. Nebraska Department of Revenue, Property Assessment Division Authorized by Neb. Rev. Stat . §§ 77-202.01 and 77-202.04 96-135-1999 Rev. 4-2018 Supersedes 96-135-1999 Rev. 1-2014

Selore December 31	xemption on Real an	nd Personal ad instructions	on reverse side.	alifying Organiza	ption.	451
Name of Organization League of Human Dignity Inc Name of Owner of Property _eague of Human Dignity Inc Street or Other Mailing Address of Applicant	properly complete or time	ely file this app		a denial of the exem		
League of Human Dignity Inc Name of Owner of Property League of Human Dignity Inc Street or Other Mailing Address of Applicant			County Namo			
Name of Owner of Property _eague of Human Dignity Inc Street or Other Mailing Address of Applicant	· · · · · · · · · · · · · · · · · · ·				Tax Year	
eague of Human Dignity Inc Street or Other Mailing Address of Applicant		•	Lancaster State Where Incorporate	ed	2019	
Street or Other Mailing Address of Applicant			Nebraska			
701 P St	ſ_			al and Personal Property	Parcel ID Nu	mber
			\$280,530.00		10-24-32	5-011-000
City		Code	Contact Name		Phone Numb	
_incoln Email Address	NE 68508-	.1741	Kathy Kay		402-441-	7871
kkay@leagueofhumandignity.c Type of Ownership	om					
Agricultural and Horticultural Society	Educational Organiza		eligious Organization	Charitable Organiz	ation	Cemetery Organization
Name	Title of Officers, Directors, or Partners			ss, City, State, Zip Co	de .	
Kathy A Kay	Co-C.E.O.		Lincoln, NE 6850			
Michael C Schafer Jodi Mason	Co-G.E.O.		Lincoln, NE 6850			
Legal description of real property and generation	CFO al description of all depreciable		Lincoln, NE 6850			
Kinneys O Street addition, Blo 1720 O St						CEIVE
					D	EC 2 0 2018
Property described above is used in the follo	wing exempt category (please	mark the applicat	ble boxes):		LANCAS	DHMAN H. AGENA
Agricultural and Horticultural Society	y 🗌 Educational	Religious	X Charitable	Cemetery	RE	TER COUNTY ASSESSO CISTER OF DEEDS
Give a detailed description of the use of the	property:					
Specialist) and used for storage Previously used by for-profit su Il organizations, except for an Agricultu Is all of the property used exclusively as o	bsidiary, Mobility Optional and Horticultural Societ	ty, must comple	y Options was dis	continued effectiv	ve Septem	ber 1, 2018.
Is the property used for financial gain or p Is a portion of the property used for the s If Yes, state the number of hours per we	ale of alcoholic beverages?					
Is the property owned or used by an orga or national origin?					s 🕅 NO	
. Under penalties of law, I d	declare that I have examined th am duly authorized to sign this	his exemption app	plication and, to the best			and .
here Authorized Signature	Kay		Title	o C.E.O.	<u>12</u> - Date	-18-18
i			or your records.			
	For Count	ty Assessor's	s Recommendatio	n		
🕅 Approval	COMMENTS:		<u>A</u>	Λ		
Approval of a Portion		$-\Omega - \mu$	\square	· · ·		
Denial	Sign	nature of Courty A	Assessor	~		25/19
	For County	Board of Ec	qualization Use On	ly		
I declare that to the best o laws of the State of Nebraska.	of my knowledge and belief, the	determination ma	ade by the County Board	of Equalization is correct	pursuant to the	3
Approved	COMMENTS:					
Approval of a Portion	• · · · · · · · · · · · · · · · · · · ·			· · ·		
Denied	Sign	ature of County B	Board Member		Date	· · · ·
County Clerk: A lea	jible copy of this form				of Equalizat	ion
must be delivered electror	nically to the Nebraska	Department	of Revenue within	seven days after		

File with Your County Assessor on or Before December 31	cemption on Real an	ption A d Personal	Application Property by Qual	ifying Organizat	tions	^{FORM} 451
Failure to p	properly complete or time	ly file this app	lication will result in a	a denial of the exem	ption.	
Name of Organization			County Name		Tax Year	
League of Human Dignity Inc			Lancaster	•	2019	
Name of Owner of Property			State Where Incorporated	. .		**
League of Human Dignity Inc			Nebraska Total Actual Value of Rea	Land Demonal Demorth	Parcel ID N	umbor
Street or Other Mailing Address of Applicant			\$744,144.00	and Personal Property		25-017-000
1701 P St City	State Zip (Code	Contact Name		Phone Num	
Lincoln	NE 68508-		Kathy Kay		402-441	
Email Address			raily ray			
kkay@leagueofhumandignity.c	om					<u> </u>
Agricultural and Horticultural Society	Educational Organiza	tion R	eligious Organization	Charitable Organiz	ation	Cemetery Organization
	Title of Officers,					
Name	Directors, or Partners		Addres	s, City, State, Zip Co	de 、	
Kathy A Kay	Co-C.E.O,		Lincoln, NE 68508			
Michael C Schafer	Co-C.E.O.		Lincoln, NE 68508			
Jodi Mason			Lincoln, NE 68508			
Legal description of real property and genera	•	-		motor vehicles:	DE	CEIVED
Kinneys O Street addition, Blo 1701 P St	ck 30, Lot 4, E 12.5' 8	LOISS&	0			
						EC 2 0 2018
Property described above is used in the follo	wing exempt category (please	mark the applical	ble boxes):		LANCAS	ORMAN H. AGENA TER COUNTY ASSESSOR
Agricultural and Horticultural Society Give a detailed description of the use of the		Religious	Charitable	Cemetery	RI	EGISTER OF DEEDS
2018. Area is now used for stor program.					er for Inde	pendent Living
All organizations, except for an Agricultu Is all of the property used exclusively as of Is the property used for financial gain or p Is a portion of the property used for the s If Yes, state the number of hours per w	described above? profit to either the owner or own ale of alcoholic beverages? eek	ner or organizatio	n making exclusive use of		s 🛛 NO	
Is the property owned or used by an orga	anization which discriminates in	n membership or e	employment based on race	e, color,	s 🖾 NO	
or national origin?	declare that I have examined the am duly authorized to sign this	his exemption ap	plication and, to the best of	of my knowledge and be	lief, it is corre	ect and
sign, Kaind	King		C	o C.E.O.	1.	2-17-18
here Authorized Signature			Title		Date	3
nore			or your records.			······
	For Coun	ity Assessor	's Recommendation	n		
	COMMENTS:		^			-
Approval		\cap /	172	11 .		1
Approval of a Portion		66	(-) - (/		tatig
Denial		100	$\bigcirc \bigcirc \bigcirc \bigcirc \bigcirc$		$= \frac{2}{4}$	125/17
	- 5	hature of County	//			
	For Count of my knowledge and belief, the	y Board of E	qualization Use On	of Equalization is correct	t oursuant to	the
I declare that to the best of laws of the State of Nebraska		e determination n	lade by the County Board	of Equalization is conice	(purbuant to	
Approved	COMMENTS:					
Approval of a Portion						
Denied	•					
	0	nature of County		,	Date	
must be delivered electro		showing the a Departmen	e final decision of t t of Revenue withir	n seven days after	the Board	r's decision.
Nebraska Department of Revenue, Property Assessi 96-135-1999 Rev. 4-2018 Supersedes 96-135-1999 R	ment Division			Authorized	by Neb. Rev. St	at . §§ 77-202.01 and 77-202.04

		untion /	Innligation	
File with Your County Assessor on or for Tax E		Parsonal	Application Property by Qualifying Organiza	FORM
Before December 31	Rear an Rear an Rear an	ad instructions	on reverse side.	^{tions} 451
	properly complete or time	ely file this app	plication will result in a denial of the exem	
Name of Organization			County Name	Tax Yesr
Hickman Presbyterian Church	<u> </u>	· · · ·	Lancaster State Where Incorporated	2019
Hickman Presbyterian Church	hristry tesd∖ gets: n verse samt som n	nades landataet y Contrato de nada	Nebraska	sur (d. 1915) sath als sine
Street or Other Mailing Address of Applicant			Total Actual Value of Real and Personal Property	Parcel ID Number
PO Box 468	· · · · · · · · · · · · · · · · · · ·		\$147,500.00	1533235004000
City Hičkman Email Address		Code 72	Contact Name Kelly Hoffart	Phone Number 402-750-6217
hickmanchurch@windstream.n	et			
Agricultural and Horticultural Society	Educational Organiza	ition 🕅 R	leligious Organization	ation Cemetery Organization
Name	Title of Officers, Directors, or Partners		Address, Čity, Štate, Žip Co	de
David Dudley		15939 S 96	Roca, NE 68430	·····
Amy Gewecke			ver Dr, Hickman, NE 68372	
see addendum		-William		
Legal description of real property and general GARNERS FIRST ADDITION				RECEIVED
279	F44	H	ckman NE	DEC 2 4 2018
26 '		1 1 1		NORMAN H. AGENA
Property described above is used in the follo Agricultural and Horticultural Society		mark the applical	ble boxes):	REGISTER OF DEEDS
Give a detailed description of the use of the t				
The garage is used for storage contiguous with the rest of the c is not using the house for any p	hurch property. The c	hurch missio organization	on and the remainder as an extensi is seeking to have the house remo	on of the church lawn. It is ved from the property and
ingen og sigter Allen som en	17 7			· · · · · · · · · · · · · · · · · · ·
All organizations, except for an Agricultu is all of the property used exclusively as o is the property used for financial gain or is a portion of the property used for the s	lescribed above?	er or organization	YE	S NO CONTRACTOR
If Yas, slate the number of hours per we is the property owned or used by an orga	11	membership or e	amployment based on race onlor	
or national origin?			YE	S 🖾 NO
Under penalties of law, / d complete liaiso declare that i	lectare that I have examined the	nis exemption applic	plication and, to the best of my knowledge and be	ief, it is correct and
	10-	change and applied	*	10-11-10
sign burner	and they		_ Knewdent HPC	12-14-18
here Authorized Signature Davia	1.	• •	pr your records.	
	/ For Count	ly Assessor'	s Recommendation	• •
X Approval	COMMENTS:			-
Approval of a Portion		Hat	() () ()	3/25/19
Denial		ature of County A	1	Date
			qualization Use Only	
I declare that to the best o laws of the State of Nebraska.			ade by the County Board of Equalization is correct	pursuant to the
Approved	COMMENTS:			
Approval of a Portion				
Denied	Sign	ature of County E	Board Member	Date
must be delivered electron	ible copy of this form nically to the Nebraska	showing the	final decision of the County Board o of Revenue within seven days after t	the Board's decision.
Nebraska Department of Revenue, Property Assassm 98-135-1999 Rev. 4-2018 Supersedes 96-135-1999 Re			d bestrohtuA	y Neb. Rev. Stat . \$\$ 77-202.01 and 77-202.04

Constraint and and a second	1		1/22/19 LM	For-0	rticles
File with Your County	Essen		Amplication	1	50.51/
	EXER EXER		Application I Property by Qualifying Organiza	ations	FORM
Before December 31	Re	ad Instructions	on reverse side.		451
	properly complete or time	ely file this ap	plication will result in a denial of the exer		
Name of Organization	malative R Llecling A.	ta Ina	County Name Lancaster	Tax Year	
Midwest Dharma Wheel Conter Name of Owner of Property	Inplative & nealing Al	15, 110.	State Where Incorporated	2019	
Midwest Dharma Wheel Conter	mplative & Healing Ar	ts, Inc.	Nebraska		
Street or Other Mailing Address of Applicant			Total Actual Value of Real and Personal Property	Parcel ID N	lumber
1900 D Street	State Zip	Code	\$375,000.00	10-25-3 Phone Num	16-007-000
Lincoln	NE 685		Cary Twomey	402-477	
Email Address				102 111	
cary.twomey@gmail.com		•			
Type of Ownership					
Agricultural and Horticultural Society	Educational Organiza	ation 区F	Religious Organization Charitable Organi	zation	Cernetery Organization
Name	Title of Officers, Directors, or Partners		Address, City, State, Zip C	ode	
Cary Twomey	Officer		x Avenue, Lincoln, Nebraska 6850		
Lee Willett	Officer		x Avenue, Lincoln, Nebraska 6850		
Mike Hemmer Legal description of real property and genera	Director		gomery Lane, Bethesda, MD 20814		
				RE	CEIVED
Capitol Addition, Block 6, Lots	7-9, & VV 1/2 LOL 10,	Lancaster U	ounty, Nebraska		
1900	DSt				DEC 31 2018
Property described above is used in the follo	wing exempt category (please	mark the applica	ble boxes):	LANCAS	NORMAN H. AGENA
Agricultural and Horticultural Society		X Religious	Charitable Cemetery	P	REGISTER OF DEEDS
Give a detailed description of the use of the					
The property is owned by Midw used exclusively for the practice so worship. Please see attached	e, furtherance, and er	nrichment of	e & Healing Arts, Inc., a Church (as the Buddhist faith for all people in	s defined b the comm	by the IRS), and unity who wish to
All organizations, except for an Agricultu					
			m making exclusive use of the property?		
Is a portion of the property used for the s	ale of alcoholic beverages? , .				
If Yes, state the number of hours per w Is the property owned or used by an orga		- membership or			
or national origin?			·····	ES 🛛 NO	
Under penalties of law, I o complete. I also decrare toat I	declare that I have examined t am duly authorized to sign this	his exemption ap s exemption appli	plication and, to the best of my knowledge and b cation.	elief, it is corre	ect and
sign,	4				
here Authorized Signature			Attorney for Applican	Date	2.31.18
nore	Reta	ain a copy fo	or your records.		
	For Cour	nty Assessor	's Recommendation		
Approval	COMMENTS:				
Approval of a Portion					
Denial	Sig	nature of County	Assessor	Date	
[For Count	v Board of E	qualization Use Only		·
I declare that to the best of laws of the State of Nebraska	of my knowledge and belief, the	e determination m	hade by the County Board of Equalization is correct	ct pursuant to t	he
Approved					
Approval of a Portion					
Denied	<u> </u>				
	Sig	nature of County	Board Meniber	Date	
County Clerk: A leg	tible copy of this form	showing the	e final decision of the County Board	of Equalization	ation
Nebraska Department of Revenue, Property Assessm	nent Division	a Departmen	t of Revenue within seven days after Authorized	the Board	I's decision. at . §§ 77-202.01 and 77-202.04
96-135-1999 Rev. 4-2018 Supersedes 96-135-1999 R	lev. 1-2014			-,	

Exemption Application File with Your County FORM Assessor on or for Tax Exemption on Real and Personal Property by Qualifying Organizations 451 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 County Name Tax Year Mosaic Lancaster 2019 Name of Owner of Property State Where Incorporated Mosaic Nebraska Street or Other Mailing Address of Applicant Total Actual Value of Real and Personal Property 4980 S. 118th Street \$8,000.00 State City Zip Code Contact Name Phone Number Omaha NE 68137 Greg Paskach 402-896-3884 Email Address greg.paskach@mosaicinfo.org Type of Ownership Agricultural and Horticultural Society Educational Organization Religious Organization X Charitable Organization Cernetery Organization Title of Officers, Name Address, City, State, Zip Code **Directors**, or Partners 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: RECEIVE Furniture and equipment 101 SW 14th Place, Lincoln, NE 221 Sun Valley Blvd, Lincoln, NE DEC 31 2018 6810 P Street, Lincoln, NE Property described above is used in the following exempt category (please mark the applicable boxes): NORMAN H. AGENA LANCASTER COUNTY ASSESSOR/ REGISTER OF DEEDS X Charitable Agricultural and Horticultural Society Educational Religious Cemetery 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. 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 X NO X 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, complete. I also declare that lam duly authorized to sign this exemption application. U sign 12.31.2018 **Director of Fixed Assets** Title Date Authorized Signature here Retain a copy for your records. For County Assessor's Recommendation COMMENTS: Approval Approval of a Portion Denial Signature of County Assessor 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. Nebraska Department of Revenue, Property Assessment Division Authorized by Neb. Rev. Stat . §§ 77-202.01 and 77-202.04 96-135-1999 Rev. 4-2018 Supersedes 96-135-1999 Rev. 1-2014

File with Your County Assessor on or

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations

FC	RM

Before December 31	Reinphon on near an	ad instructions of				451
Failure to p	properly complete or time			a denial of the exem	notion.	
Name of Organization		· · · · ·	County Name		Tax/ear	9 10
lebraska Communities Playho	use		Lancaster		2018	LOIT
Jame of Owner of Property			State Where Incorporate	ed	175	CILEI
lebraska Communities Playhou			Nebraska	·	•	P118
street or Other Mailing Address of Applicant			Total Actual Value of Re	eal and Personal Property	Parcel ID	Number
25 Locust Street			\$150,000.00		15-33-2	220-011-000
ity	State Zip	Code	Contact Name		Phone Nu	V
ickman	NE 683	72	Rex Wamsley		402-61	0-0687
mail Address			1			
ex.wamsley@yahoo.com						
pe of Ownership						
Agricultural and Horticultural Society	Educational Organiza	ation R	eligious Organization	Charitable Organiz	ation	Cemetery Organiz
	Title of Officers,					
Name	Directors, or Partners		Addre	ss, City, State, Zip Co	ode	
obert S. Wamsley	President	1721 Garfie	ld Street, Lincoln	NE 68502		
atherine Gosselin	Secretary		Street, Hickman,			
ou Cinda M. Wamsley	Treasurer			kman, NE 68372		
gal description of real property and generation	al description of all depreciable	tangible persona	in sour Sueet, Fill	ad motor vahiclas		······
Commercial Improved zoned p Nickman, Block 20, Lot 2, S 1/	property in the B-Busir 2 and Lot 3 and Lot 4	ness District N 1/2.	of Hickman, Neb	raska. The legal d		
225	Locust	St,	Hickm	an Ne		NOV 0 5 2018
	wing overnet enterent (nlasse	mark the applice	hla h			1101 0 0 2010
operty described above is used in the follo	wing exempt category (please	main the applica	DIE DOXES):			
				Cemetery		NORMAN H. AGEN
Agricultural and Horticultural Society ive a detailed description of the use of the he property is used as the 50 prague, Firth, and Panama, au	y 🔀 Educational [property: 1(c)(3) non-profit comi nd the unincorporated	Religious Munities pla community	Charitable yhouse for the cit	playhouse is an ec	oca, Prir Jucationa	NORMAN H. AGEN CASTER COUNTY ASS REGISTER OF DEED Inceton, Cortland al non-profit that
Agricultural and Horticultural Society ive a detailed description of the use of the he property is used as the 50 prague, Firth, and Panama, au upports live, all-volunteer com Il organizations, except for an Agricultu Is all of the property used exclusively as Is the property used for financial gain or	v Z Educational [property: 1(c)(3) non-profit comind the unincorporated munity plays and the ural and Horticultural Socie described above?	Religious munities pla d community performing a ty, must comple	Charitable yhouse for the cit of Holland. The p arts, along with ot ete the following ques	ties of Hickman, Re blayhouse is an ec cher charitable acti tions.	oca, Prir Jucationa vities.	CASTER COUNTY ASS REGISTER OF DEED neeton, Cortland al non-profit that
Agricultural and Horticultural Society we a detailed description of the use of the ne property is used as the 50 prague, Firth, and Panama, au upports live, all-volunteer com lorganizations, except for an Agricultur Is all of the property used exclusively as Is the property used for financial gain or p Is a portion of the property used for the s If Yes, state the number of hours per w	y Educational [property: 1(c)(3) non-profit common nd the unincorporated munity plays and the ural and Horticultural Socie described above?	Religious munities pla community performing a aty, must comple ner or organizatio	Charitable yhouse for the cit of Holland. The p arts, along with ot ete the following ques	ies of Hickman, Roblayhouse is an echo cher charitable acti tions.	oca, Prir Jucationa vities.	CASTER COUNTY ASS REGISTER OF DEED neeton, Cortland al non-profit that
Agricultural and Horticultural Society ive a detailed description of the use of the the property is used as the 500 prague, Firth, and Panama, au upports live, all-volunteer com I organizations, except for an Agricultur is all of the property used exclusively as is the property used for financial gain or p is a portion of the property used for the s if Yes, state the number of hours per w is the property owned or used by an orga	y Educational [property: 1(c)(3) non-profit common nd the unincorporated munity plays and the ural and Horticultural Socie described above? profit to either the owner or own sale of alcoholic beverages? eek 2 hOUTS/Week anization which discriminates in	Religious munities pla d community performing a ty, must comple ner or organizatio	Charitable yhouse for the cit of Holland. The p arts, along with ot ete the following ques n making exclusive use of employment based on ra	ies of Hickman, Roblayhouse is an eco ther charitable acti tions.	oca, Prir ducationa vities.	CASTER COUNTY ASS REGISTER OF DEED Inceton, Cortland al non-profit that
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Agricultural and Horticultural Society ive a detailed description of the use of the he property is used as the 50 prague, Firth, and Panama, au upports live, all-volunteer com I organizations, except for an Agricultu Is all of the property used exclusively as Is the property used for financial gain or Is a portion of the property used for the s If Yes, state the number of hours per w Is the property owned or used by an orga or national origin?	y Educational [property: 1(c)(3) non-profit common nd the unincorporated munity plays and the ural and Horticultural Socie described above? profit to either the owner or own sale of alcoholic beverages? eek 2 hOUTS/Week anization which discriminates in	Religious munities pla d community performing a ty, must comple ner or organizatio	Charitable yhouse for the cit of Holland. The p arts, along with ot ete the following ques n making exclusive use of employment based on ra	ies of Hickman, Ro blayhouse is an ec ther charitable acti tions. of the property?	oca, Prir ducationa vities.	CASTER COUNTY ASS REGISTER OF DEED Inceton, Cortland al non-profit that
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and the second sec						
File with Your County	Exen	nption A	Application			FORM
Assessor on or Before December 31	xemption on Real ar	nd Personal ad instructions	Property by Qua	lifying Organizat	tions	451
Failure to	properly complete or time			a denial of the exem	ption.	
Name of Organization		• •	County Name		Tax Year	
VSL Lincoln Sumner, LLC			Lancaster	·	2019	
Name of Owner of Property VSL Lincoln Sumner, LLC			State Where Incorporate	ed		
Street or Other Mailing Address of Applicant				al and Personal Property	Parcel ID N	umber
20220 Harney St.			\$3,186,888.00		terrore another they	36-221-001-000, <u>13-001-000, P008850</u>
City		Code .	Contact Name		Phone Num	iber
Elkhorn	NE 68022-	-2063	Brian Stuhr		402-895	-3932
bstuhr@vhsmail.com						
Agricultural and Horticultural Society	Educational Organiza	ation R	eligious Organization	Charitable Organiza	ation [Cemetery Organization
Name	Title of Officers, Directors, or Partners		Addres	ss, City, State, Zip Co	de	
Jack Vetter	CEO		nev Street, Elkhori			
Glenn Van Ekeren	President		ney Street, Elkhori			
Brian Stuhr Legal description of real property and genera	CFO		ney Street, Elkhorn			
See attached Schedule A			-	a motor venicles.	RE(CEIVED
					DI	EC 2 4 2018
Property described above is used in the follow	wing exempt category (please	mark the applicat	ble boxes):			DRMAN H. AGENA
Agricultural and Horticultural Society	Educational	Religious	Charitable	Cemetery	RE	ER COUNTY ASSESSOR/ GISTER OF DEEDS
Give a detailed description of the use of the	property:					
See attached Schedule B						
All organizations, except for an Agricultu Is all of the property used exclusively as o Is the property used for financial gain or p Is a portion of the property used for the sa If Yes, state the number of hours per we Is the property owned or used by an orga	lescribed above? rrofit to either the owner or own ale of alcoholic beverages? eek	ner or organization	n making exclusive use of		s 🖾 NO	
or national origin?	leclare that I have examined the				s 🛛 NO	
complete. I also declare that I	am duly authorized to sign this	s exemption applic	cation.	or my knowledge and bei	ier, it is corre	ct and
sign, Brun Stuh			CF0		. 111	19/18
Authorized Signature	Reta	in a copy fo	Title		Date	////3
			s Recommendation	1		
Approval	COMMENTS:		1			
Approval of a Portion		Mat	\square		-2	tontio
Denial	Sigr	nature of County A	Assessor		Date	125/19
	For County	Board of Ed	ualization Use On	ly		
I declare that to the best of laws of the State of Nebraska.	f my knowledge and belief, the	determination ma	ade by the County Board	of Equalization is correct	pursuant to the	he
Approved	COMMENTS:					
Approval of a Portion						
Denied	Sign	ature of County E	Board Member		Date	
must be delivered electron	ible copy of this form lically to the Nebraska	showing the Department	final decision of the of Revenue within	seven days after t	he Board	's decision.
Nebraska Department of Revenue, Property Assessm 96-135-1999 Rev. 4-2018 Supersedes 96-135-1999 Re	ent Division			Authorized by	y Neb, Rev. Sta	t. §§ 77-202.01 and 77-202.04

File with Your County Assessor on or for Tax F	Exem Exemption on Real an	ption A	Application Property by Qu) alifving Organiza	ations	FORM
Before December 31	Re	ad instructions	on reverse side.			451
	properly complete or time	ely file this app	County Name	n a denial of the exer		· · · ·
Name of Organization Autism Center of Nebraska, In			Lancaster		Jax Year 2018	2019
Name of Owner of Property			State Where Incorpora	ted .	120,10	2011
Autism Center of Nebraska, In	С.		Nebraska		1	
Street or Other Mailing Address of Applican	nt		and the second	eal and Personal Property		Number
9012 Q Street			\$3,000.00		LPO!	59:24
City		Code	Contact Name		Phone Nu	
Omaha Email Address	NE 681:	27	Richard Lowery		402-31	5-1007
rlowery@ACNomaha.org						
Type of Ownership						
Agricultural and Horticultural Society		Illion LIR	eligious Organization	Charitable Organ	IZATION	Cemetery Organ
Name	Title of Officers, Directors, or Partners		Addre	ess, City, State, Zip C	ode	
Brett Samson	President & CEO	9012 Q Str	eet, Omaha, NE	68127		
Richard Lowery	CFO		eet, Omaha, NE			
Legal description of real property and gene Personal Property the agency						
Property described above is used in the foll Agricultural and Horticultural Socie		Religious		—	RF	CEIVE
tes process respect metric and the second metric second second				Cemetery	0	CT 0 4 2018
The equipment described above disabilities in Lincoln and the s	ve, is used in support o surrounding area.	of our efforts	to serve individu	als with autism a	0 nd other o LANCAS	CT 0 4 2018
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Before Europamber 31	x Exemption	on Real a	nd Persona	Application al Property by Qualifying Of a on reverse side.	rganizations	ғоям 451
Fallure	to properly com	plete or tim	ely file this ap	oplication will result in a denial of	the exemption.	I
Name of Organization			•	County Name Lancaster	Tax Year 2019	
Lincoln Memorial Cemetery Name of Owner of Property				State Where Incorporated	20,19	
The Lincoln Memorial Park		ociation		Nebraska		
Street or Other Mailing Address of Appli No Property Tax, 9th Floor,		18		Total Actual Value of Real and Persona \$1,928,500.00		
	State	Zip	Code	Contact Name	Phone Nur	00-011-000 nber
Houston Email Address	TX	77219	-0548	Matthew Kubecka	713-525	5-7151
matthew.kubecka@sci-us.co	om					
ype of Ownership						·····
Agricultural and Horticultural Soci	·	tional Organiza	ation	Religious Organization Charitab	le Organization	Cemetery Organization
Name	Title of C Directors, o			Address, City, State	e, Zip Code	
anet Key	Director		1929 Allen	Parkway, Houston, TX 7701		
usan Garrett	Director		1929 Allen	Parkway, Houston, TX 7701	9	
ori Spilde	Director		1929 Allen	Parkway, Houston, TX 7701	9	
S13, T9, R6, 6th Principal M	Apridian ITIO		E CANGIOIE PERSONI	al property, except licensed motor vehicle.		CEIVED
cemetery and grounds main	itenance equip	ment	09 3VV & LU	01 77 INVV IN 24-9-6		
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Agricultural and Horticultural Soc	he property:	vements (Religious	ble boxes):	ery RE	TER COUNTY ASSES GISTER OF DEEDS
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File with Your County			Application		1	FORM
Assessor on or Before December 31	Exemption on Real ar	nd Personal ad instructions		lifying Organizat	ions	451
Failure to	properly complete or time			a denial of the exem	ption.	101
Name of Organization			County Name		Tax Year	
NAME OF Property	Church of MAR	TELL	LANCASTER State Where Incorporate	d	2019)
POBIX 68 Street or Other Mailing Address of Applicar						
Street or Other Mailing Address of Applicar	nt		NEBRA-SKA Total Actual Value of Rea	I and Personal Property	Parcel ID N	umber .
City	State Zip	Code	\$ 165,700 Contact Name		08-28 Phone Num	-106-008-000
MARTELL Email Address	-	8404	Rod Hollin			41-6745
						// 0//3
<u>KR HALLMAN (2) add.</u> Type of Ownership				n		
Agricultural and Horticultural Society		ation XF	Religious Organization	Charitable Organiza	ation	Cemetery Organization
Name	Title of Officers, Directors, or Partners		Addres	s, City, State, Zip Coo	de	
Rod Hollmon	CHAIR ADMIN	6175 4	WITTSTRUC	K MARTE	ELL N.	E 68404
LINDA HOLLMAN	SEC ADMIN		1 WITTSTRUC			
<u>Art-Row NELSON</u> Legal description of real property and gene	TREAS eral description of all depreciable	12.400 e tangible persona	SW 58 ^{+h} pal property, except licensed	MARTELL, M motor vehicles:		404
MARTELL, LOT B,	5248,5 N 398.	5'			RE(CEIVED
SITUS ADDRESS	17525 SW25th	^h 5 ^T , m	ARTELL, N.E.		nr	EC 072018
1444-14-1-					DE	
Property described above is used in the fol	-	mark the applica	ble boxes):	Cemetery	ND LANCAST	riman; H. Agena er county assessor/ sister of deeds
Give a detailed description of the use of the Th (S property)	e property:	11 45	A CIEUPCI	EFILOUS	hup H	4U 1=0.R
This property 1	S USIZE SOLE		ACRUACE	(/ Little		
Church MEETING	5 4- EVEN(1),					
			-			
All organizations, except for an Agricul Is all of the property used exclusively as						
Is the property used for financial gain of						
Is a portion of the property used for the If Yes, state the number of hours per v	sale of alcoholic beverages?				-	
Is the property owned or used by an org	ganization which discriminates in					
or national origin? Under penalties of law,	declare that I have examined t	this exemption ap	plication and, to the best of	of my knowledge and beli	B NO ief, it is corre	ct and
	I am duly authorized to sign this Λ	s exemption appli			. 1	- and
sign	Xollow		Chant A	Smin Coun	$\frac{\alpha_1}{\beta_2}$	2-7-2018
here ' Authorized Signature '	Reta	ain a copy fo	or your records.		Date	
	For Cour	nty Assessor	's Recommendation	1		
Approval	COMMENTS:					
Approval of a Portion			\square	//		: 1
Denial		Kab	()	2		3/25/19
		nature of County			Date	7
-	For Count of my knowledge and belief, the		qualization Use Onl			
laws of the State of Nebrask		e determination n	ade by the County Board (or Equalization is correct	puisuantion	
Approved	COMMENTS:					
Approval of a Portion						
Denied	Sig	nature of County	Board Member		Date	
County Clerk: A le	gible copy of this form	showing the	e final decision of th	e County Board o	f Equaliza	ation
must be delivered electro Nebraska Department of Revenue, Property Assess	sment Division	a Departmen	t of Revenue within	seven days after t Authorized b	y Neb. Rev. Sta	'S decision. t . §§ 77-202.01 and 77-202.04
96-135-1999 Rev. 4-2018 Supersedes 96-135-1999	Rev. 1-2014				-	

File with Your County Assessor on or	Exen	nption A	Application			FORM
Before December 31	xemption on Real ar	nd Personal	Property by Qua	lifying Organiza	tions	451
Failure to	properly complete or time			a denial of the exem	nption.	
Name of Organization		1	County Name		Tax Year	
East Lincoln Christian Church Name of Owner of Property			Lancaster		2019	
Same			State Where Incorporate	d		
Street or Other Mailing Address of Applicant			NE			
7001 Edenton Road			SO.00	al and Personal Property		
City	State Zin	Code	Contact Name		P05457	
Lincoln	NE 685		Gayle Gengenba	h	Phone Num 402-486	
Email Address		10	Cayle Congeribe		402-400	-4073
elcc.assistant@gmail.com						
Type of Ownership						
Agricultural and Horticultural Society	Educational Organiza	ation 🛛 🕅 Re	eligious Organization	Charitable Organiz	ation	Cemetery Organization
Name	Title of Officers, Directors, or Partners		Addres	s, City, State, Zip Co	ode	
LeRoy Sievers	Board Moderator	716 Driffwo	od, Lincoln, NE 6			
Todd Gengenbach	Vice Moderator	6024 Culwe	ells Rd. Lincoln, NE 6	6010 E 69516		
Paul Few	Treasurer		ays Blvd., #220 L		1	
Legal description of real property and genera	al description of all depreciable	tangible personal	ays Divu., #220 L	motor vehiclos:		
General Personal Property - co No other significant personal p	property has been play	+ (2010) piac	ed in service in 20	J15 Value of \$538	S.	
disposables, etc.	roperty has been play	ceu in servic	e in the past year,	other than nomin		and the second se
, , , , , , , , , , , , , , , , , , , ,					R	CEIVED
Property described above is used in the follo					a como	
			_		DF	C 1 9 2018
Agricultural and Horticultural Society	Educational	X Religious	Charitable	Cemetery		0 2 0 2010
Give a detailed description of the use of the	property:				ANE	KWAN H. AGERA
Personal property/computer use etc.	∋d for the purpose of	routine religi	ous services, suc	h as record keepi	ng, public	R COUNTY ASSESSOR/ ATTORISF DElicatins,
All organizations, except for an Agricultu	Iral and Horticultural Socie	ty, must comple	te the following question	ons:		
Is all of the property used exclusively as o	lescribed above?			XYE	s 🗌 NO	
Is the property used for financial gain or p	rofit to either the owner or owr	ner or organization	making exclusive use of	the property? YE	S NO	
Is a portion of the property used for the sa If Yes, state the number of hours per we	ale of alcoholic beverages?	•••••	••••••	YE	is 🛛 NO	
Is the property owned or used by an orga	nization which discriminates in	I membership or e	mployment based on race	e, color		
or national origin?					s 🛛 NO	
complete) also declare that I	leclare that I have examined the am duly authorized to sign this	his exemption app exemption applic	lication and, to the best of ation.	of my knowledge and be	lief, it is corre	ot and
sign, Juli A.	Maria Bull			A.A.	Da	110 18
here Authorized Signature	MA GNOWN	}	Title	H3Sti-	_pec	10,10
Tiere	0 Reta	in a copy fo	r your records.		Date	
			Recommendation	•		
N	101000	ty A3323301 3	Recommentation	· .		
Approval	COMMENTS:					
Approval of a Portion			$\square \square$	1		
		1 GJ	0 ()0		2	larta
Denial	Sign	ature of County A	J C	an	$-\frac{3}{2}$	125/17
			/		Date	
I declare that to the best of	f my knowledge and belief, the		ualization Use Onl		numuent to th	
laws of the State of Nebraska.	ing internedge and belief, the	determination ma	de by the County Board t	DI Equalization is correct	pursuant to tr	16
Approved	COMMENTS:					
Approval of a Portion						
Denied		ature of County B				
					Date	
must be delivered electron	ible copy of this form ically to the Nebraska	showing the	final decision of th	e County Board o	f Equaliza	tion
veolaska Department of Revenue. Property Assessm	ent Division	separament	or nevenue within			s decision.
96-135-1999 Rev. 4-2018 Supersedes 96-135-1999 Re	<i>м</i> . 1-2014					d annotanten -



File with Your County Assessor on or I

Exemption Application Beal and Personal Property by Qualifying Organizations

FORM

154

efore December 31		Instructions on reverse side.	
Failure to	properly complete or time	ly file this application will result in a denial of the exem	ption.
ame of Organization		County Name LANCASTER	Tax Year 2019
ADONNA REHABILITATION	HOSPITAL	. State Where Incorporated	2019
ame of Owner of Property ADONNA REHABILITATION	HOSPITAL	NEBRASKA	
treet or Other Mailing Address of Applicant		Total Actual Value of Real and Personal Property	Parcel ID Number
401 SOUTH STREET		\$	16 20 247 005 000
ity		Code Contact Name	Phone Number 402-413-4888
INCOLN	NE 68506-	2150 MICHAEL D. MUNRO	402-413-4000
mail Address			
nmunro@madonna.org			
Agricultural and Horticultural Society	Educational Organiza	tion Religious Organization Charitable Organiz	ation Cemetery Organizat
Name	Title of Officers,	Address, City, State, Zip Co	de
	Directors, or Partners		
lark Fahleson	Chairperson	1128 Lincoln Mall, Suite 300, Lincoln, NE 6850 22621 Homestead Rd, Elkhorn, NE 68022	
ary Perkins	Vice Chairperson Secretary	1612 Old Farm Road, Lincoln, NE 68512	
like McCrory egal description of real property and gener		tangible personal property, except licensed motor vehicles:	RECEIVE
		TION EX 1.11+- AC IN CENTER	
			DEC 27 2018
Situs Address: 7111 STEPH	ANIE LN, LINCOLN, N	IE 68516	
			NORMAN H. AGENA
operty described above is used in the follo	lowing exempt category (please	mark the applicable boxes):	REGISTER OF DEEDS
Agricultural and Horticultural Societ		Religious X Charitable Cemetery	
ive a detailed description of the use of the	a property:		
	and a main and utilization	consistant with Madanna's charitable nurnose (property as a center for
ealthcare for the community. Il organizations, except for an Agricul	Itural and Horticultural Socies	consistent with Madonna's charitable purpose of ety, must complete the following questions.	ES NO
lealthcare for the community. Il organizations, except for an Agricul Is all of the property used exclusively as Is the property used for financial gain or	Itural and Horticultural Socie s described above?	ety, must complete the following questions.	ESNO ES . ∑ NO
the althcare for the community. Il organizations, except for an Agricul Is all of the property used exclusively as Is the property used for financial gain or Is a portion of the property used for the If Yes, state the number of hours per	Itural and Horticultural Socie s described above? r profit to either the owner or ow sale of alcoholic beverages? . week	ety, must complete the following questions. Ner or organization making exclusive use of the property? Y	ESNO ES . ∑ NO
nealthcare for the community. Il organizations, except for an Agricul Is all of the property used exclusively as Is the property used for financial gain or Is a portion of the property used for the If Yes, state the number of hours per Is the property owned or used by an or	Itural and Horticultural Socie s described above? r profit to either the owner or ow sale of alcoholic beverages? . week	ety, must complete the following questions. Ner or organization making exclusive use of the property? Yi - n membership or employment based on race, color,	ESNO ESNO ESNO ESNO
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Nebraska Department of Revenue, Property Assessment Division 96-135-1999 Rev. 4-2018 Supersedes 96-135-1999 Rev. 1-2014

File with Your County Assessor on or Before December 31	Exemption on Real a	nption		1 alifying Organiza	ations	^{FORM}
	properly complete or tim			n a denial of the exer	nption.	
Name of Organization			County Name		Tax Year	
NEBRASKA WESLEYAN UNIV	VERSITY		LANCASTER		2019	
Name of Owner of Property NEBRASKA WESLEYAN UNI	/ERSITY		State Where Incorpora NEBRASKA	ted		
Street or Other Malling Address of Applican	t		and the second	eal and Personal Property		
5000 ST. PAUL AVE	State Zip	Code	\$90,000.00 Contact Name		17-17-21 Phone Numb	4-008-000
LINCOLN	NE 685		Benjamin Dahl		402-465-2	2183
Email Address bda.W.C. Nebrua Type of Ownership	eslevan.edu					402-320-607
Agricultural and Horticultural Society	Educational Organiz	ation 🗍 F	eligious Organization	Charitable Organi	zation	Cemetery Organization
Name	Title of Officers, Directors, or Partners		Addre	ess, City, State, Zip Co	ode	
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 gene BALDWINS SUBDIVISION, lot 5,	S21.7'		i property, except license	ed motor venicles:	_	EIVED
Property described above is used in the follo	wing every astegory (plagge	mark the englise			DEL	<u>21</u> 2018.
Agricultural and Horticultural Societ		Religious	. Charitable	Cernetery	NOR	MAN H. AGENA County Assessor/
All organizations, except for an Agricult Is all of the property used exclusively as Is the property used for financial gain or Is a portion of the property used for the If Yes, state the number of hours per w Is the property owned or used by an org	described above? profit to either the owner or ow sale of alcoholic beverages? veek anization which discriminates i	ner or organizatio	n making exclusive use o	of the property?	ES XNO ES XNO	
or national origin? Under penalties of law, I	declare that I have examined	this exemption ap	plication and, to the best	of my knowledge and be		and
sign Autholized Signature	Am duly authorized to sign thi			FINANCE/ADMIN	Date	12/14/18
			s Recommendatio	NP		
·	101000	ILY A3363301	sheconmentatio			
Approval	COMMENTS:	$\sim \sim$	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	/		
Approval of a Portion		Kall	1/2/	1	.7 /	2-10
Denial .	Sig	mature of County	Assessor		<u></u>	25/17
			qualization Use Or			
I declare that to the best laws of the State of Nebraska	of my knowledge and belief, the	e determination m	ade by the County Board	of Equalization is correc	t pursuant to the	
Approved	COMMENTS:					
Approval of a Portion						
Denied						
County Clerk: A le	Sig	nature of County E	Board Member		Date	
must be delivered electro Nebraska Department of Revenue, Property Assess 36-135-1999 Rev. 4-2018 Supersedes 96-135-1999 R	gible copy of this form nically to the Nebraska ment Division	showing the	final decision of t	n seven days after	the Board's	lon decision. §§ 77-202.01 and 77-202.04