

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 Boys and Girls Clubs of Lincoln/Lancaster County		County Name Lancaster	Tax Year 2019
Name of Business if Different than Organization		State Where Incorporated Nebraska	
Name of Owner of Property		Total Actual Value of Real and Personal Property \$2814	Parcel ID Number P059590
Street or Other Mailing Address of Applicant P O Box 22344		Contact Name Michelle Birkel	Phone Number 402 477 4134
City Lincoln	State NE	Zip Code 68516	Email Address mbirkel@lincolnbgc.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
Jessica Erstad	President	6230 Doe Creek Circle, Lincoln, NE 68516
Katie Thompson	Treasurer	4243 Pioneer Woods Drive, Lincoln, NE 68501
Jill Becker	VP - Operations	P. O. Box 83008, Lincoln, NE 68501

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

700 R St, Ste 321

RECEIVED

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

- Agricultural and Horticultural Society
 Educational
 Religious
 Charitable
 Cemetery

JUN 20 2019

Give a detailed description of the primary use of the property and any other uses of the property:
Used by club members for educational and physical fitness purposes.

ROB UGDEN
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

Michelle Birkel
Authorized Signature

Executive Director
Title

6/20/19
Date

Retain a copy for your records.

For County Assessor's Recommendation

- Approval
 Approval of a Portion
 Denied

COMMENTS: _____

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

- Approved
 Approval of a Portion
 Denied

If the County Board's determination is different from the County Assessor's recommendation, an explanation is required.

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.

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 CHI Nebraska			County Name Lancaster	Tax Year 2019
Name of Business if Different than Organization			State Where Incorporated Nebraska	
Name of Owner of Property CHI Nebraska, c/o Property Management			Total Actual Value of Real and Personal Property \$1,576,000.00	Parcel ID Number 16-29-103-002-000
Street or Other Mailing Address of Applicant 12809 West Dodge Road			Contact Name Don Mandel	Phone Number (402) 343-4431
City Omaha	State NE	Zip Code 68154	Email Address donald.mandel@alegent.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
Cliff Robertson	CEO & President	12809 West Dodge Road, Omaha, NE 68154
Jeanette Wojtalewicz	CRO	12809 West Dodge Road, Omaha, NE 68154
Richard Herink	Board Chair	6600 South 27th Street, Lincoln, NE 68512

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

Property Address: 4055 Yankee Hill Road, Lincoln, NE 68516

Legal Description: Wilderness Heights 2nd Addition, Block 1, Lot 2

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 primary use of the property and any other uses of the property:

Land is owned by CHI Nebraska a non-profit health care organization providing medical services including charitable care for those without funds for payment.

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

Donald Mandel
Authorized Signature

Regional Director of Real Estate
Title

1/27/19
Date

Retain a copy for your records.

For County Assessor's Recommendation

- Approval
- Approval of a Portion
- Denied

COMMENTS: _____

Signature of County Assessor

Date

For County Board of Equalization Use Only

- Approved
- Approval of a Portion
- Denied

If the County Board's determination is different from the County Assessor's recommendation, an explanation is required.

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.

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 JOSHUA COLLINGSWORTH MEMORIAL FOUNDATION		County Name LANCASTER	Tax Year 2019
Name of Owner of Property W. BLAKE COLLINGSWORTH		State Where Incorporated NEBRASKA	
Street or Other Mailing Address of Applicant 9435 HOLLOW TREE COURT		Total Actual Value of Real and Personal Property \$17,710.00	Parcel ID Number P055654
City LINCOLN	State NE	Zip Code 68512	Contact Name W. BLAKE COLLINGSWORTH
Phone Number 402-730-5838			

Email Address
BLAKE@JOSHUAMEMORIAL.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
W. BLAKE COLLINGSWORTH	Director	9435 HOLLOW TREE COURT LINCOLN NE 68512
KATHLEEN C. COLLINGSWORTH	Director	9435 HOLLOW TREE COURT LINCOLN NE 68512
KERRY LASSELY-MILLER	Director	505 PARK GATE CT ATLANTA GA 30342

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

MASCOT SUITS
APPLE COMPUTER

9435 Hollow Tree Ct

RECEIVED
APR 29 2019

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

Agricultural and Horticultural Society
 Educational
 Religious
 Charitable
 Cemetery

JOE GIBBEN
LANCASTER COUNTY ASSESSOR/
REGISTER OF DEEDS

Give a detailed description of the use of the property:

Josh the Otter is included as part of the preschool, kindergarten and elementary schools water safety programs. 66 Mascot suites are utilized in Josh the Otter programs in US, Canada and Australia.

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

W Blake Collingsworth
Authorized Signature

director

04-26-2019
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 Christ's Place Church	County Name Lancaster	Tax Year 2019
Name of Owner of Property 1111 Old Cheney Road	State Where Incorporated NE	
Street or Other Mailing Address of Applicant Lincoln NE 68512	Total Actual Value of Real and Personal Property \$ 7 million	Parcel ID Number 0914200001000
City Lincoln	Contact Name Terry Brown	Phone Number (402) 421-1111
Email Address tbrown@christplace.church		

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
Richard Lorimer	President	6052 Chartwell Ln. Lincoln NE 68516
Mark Balschweid	Secretary	900 Plum Ridge Road Lincoln NE 68527
Lyle Neal	Treasurer	8100 Rainy River Road Lincoln NE 68505

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

S14, T9, R6, 6th Principal Meridian, LOT 94 NE

Situs Address: 1111 Old Cheney Road, Lincoln, NE

RECEIVED

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

Agricultural and Horticultural Society
 Educational
 Religious
 Charitable
 Cemetery

MAY 21 2019

Give a detailed description of the use of the property:

Upon the closing of Brandy's Bunch day care (closed) the church property is used exclusively for religious and charitable purposes such as worship, religious instruction & fellowship.

ROB OGDEN
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

Authorized Signature

Senior Associate Pastor

Title

Date

5-16-19

Retain a copy for your records.

For County Assessor's Recommendation

- Approval
 Approval of a Portion
 Denial

COMMENTS: _____

Signature of County Assessor

Date

For County Board of Equalization Use Only

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

- Approved
 Approval of a Portion
 Denied

COMMENTS: _____

Signature of County Board Member

Date

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

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 Montessori School For Young Children Inc.		County Name Lancaster	Tax Year 2019
Name of Business if Different than Organization		State Where Incorporated Nebraska	
Name of Owner of Property Montessori School For Young Children Inc.		Total Actual Value of Real and Personal Property \$ 176,400.00	Parcel ID Number 17-32-129-006-000
Street or Other Mailing Address of Applicant 4727 A St.		Contact Name Emily Dutter	Phone Number 402-489-4366
City Lincoln	State NE	Zip Code 68510	Email Address montessorischool@windstream.net

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

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
Jenna Vitosh	President	7510 Lincolnshire Rd. Lincoln, NE 68506
Laura Bartels	Secretary	4150 S. 28th St. Lincoln, NE 68522
Bowdy Ehler	Treasurer	1941 Harwood St. Lincoln, NE 68502

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

SHURTLEFFS PIEDMONT PARK, BLOCK 1, lot 6, Ex House, shed, lot @ 4717 A St. Lincoln, NE 68510

RECEIVED
JUN 28 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 primary use of the property and any other uses of the property:

Montessori School for Young Children will be demoing the house and shed on the property and plans to build a new commercial building per the state's requirements. The new building will house additional classrooms for early childhood education

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

* See attached *

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

Emily E. Dutter
Authorized Signature

Executive Director
Title

6-27-19
Date

Retain a copy for your records.

For County Assessor's Recommendation

- Approval
- Approval of a Portion
- Denied

COMMENTS: _____

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

- Approved
- Approval of a Portion
- Denied

If the County Board's determination is different from the County Assessor's recommendation, an explanation is required.

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.

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 LOCUS Impact Investing	County Name Henrico-Lancaster	Tax Year 2019
Name of Owner of Property	State Where Incorporated Virginia	
Street or Other Mailing Address of Applicant 7814 Carousel Lane, Suite 100	Total Actual Value of Real and Personal Property \$1,527.57	Parcel ID Number P056530
City Richmond	State VA	Zip Code 23294
Email Address santonelli@vccva.org	Contact Name Stacey Antonelli	Phone Number 804-793-0984

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 List		

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
770 North Cotner Blvd., Suite 400, Lincoln NE 68505
 See Attached List for Personal Property

RECEIVED
APR 01 2019
 ROB 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:
Foster sustainable and wealth creating economic development strategies for regions. Educate foundations and other interested persons engaging in mission related and impact investing.

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

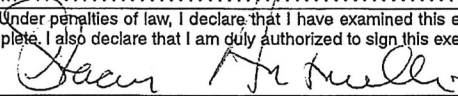
Is the property used for financial gain or profit to either the owner or owner or organization making exclusive use of the property? .. YES NO

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  Corporate Governance Administrator 4/1/19
 Authorized Signature Title Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion _____

Denial _____

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

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

Approved COMMENTS: _____

Approval of a Portion _____

Denied _____

Signature of County Board Member _____ Date _____

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

File with Your County Assessor 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 State AFL-CIO Building Corporation	County Name Lancaster	Tax Year 2018 2019
Name of Owner of Property Nebraska State AFL-CIO Building Corporation	State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 2012 S 13th Street, Lincoln, NE 68502	Total Actual Value of Real and Personal Property \$	Parcel ID Number P059591
City Lincoln	State NE	Zip Code 68502
Email Address neafcio@neaf-cio.org	Contact Name Susan Martin	Phone Number 402-476-0002

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
Susan L Martin	President/Secretary	2012 S 13th Street, Lincoln, NE 68502

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

2012 S 13 St

RECEIVED
MAY 01 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:
The purpose of the building corporation is to use offices for meetings and educational training.

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

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

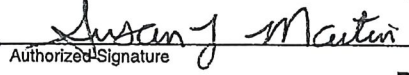
Is the property used for financial gain or profit to either the owner or owner or organization making exclusive use of the property? .. YES NO

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

If Yes, state the number of hours per week _____

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

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

sign here  _____ Title President/Secretary-Treas Date 4-29-19

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

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 2019
Name of Owner of Property Nebraska Communities Playhouse		State Where Incorporated Nebraska	
Street or Other Mailing Address of Applicant 217 Locust Street		Total Actual Value of Real and Personal Property \$ 200,000	Parcel ID Number 15-33-220-009-000
City Hickman	State NE	Zip Code 68372	Contact Name Rex Wamsley, Director / CEO
Email Address NC Playhouses @ yahoo.com / Rex's : rex.wamsley @ yahoo.com		Phone Number 402-610-0687	

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 / Director	1721 Garfield St., Lincoln, NE 68502
Kathryn Gosselin	Secretary / Director	
Rex Wamsley	CEO / Director	1854S South 90th Street, Hickman, NE 68372

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
2 1/2 Commercial lots with parcel ID: 15-33-220-009-000 located in downtown Hickman, Nebraska
Hickman, Block 20, lot 4, st 1/2 : lots 5-6 217 Locust St Hickman

RECEIVED
JUN 11 2019

ROB 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:
The Nebraska Communities Playhouse is a 501(c)(3) nonprofit organization. This lot will be used as a part of the next door (225 Locust Street) existing, tax exempt communities playhouse. The lot is currently under construction and will be attached to the existing playhouse. Lancaster County has allocated \$239,313 toward this construction.

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**
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 Executive Officer / Director** **6/8/2019**
Authorized Signature Title Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____
 Approval of a Portion _____
 Denial _____

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

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

Approved COMMENTS: _____
 Approval of a Portion _____
 Denied _____

Signature of County Board Member _____ Date _____

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

File with Your County Assessor 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 United Yezidi Community Of America, Inc.		County Name Lancaster	Tax Year 2019
Name of Owner of Property Yezidi Community		State Where Incorporated Ne	
Street or Other Mailing Address of Applicant 305 West Belmont Ave		Total Actual Value of Real and Personal Property \$1,500.50	Parcel ID Number 05-28-300-022-00
City Lincoln	State Ne	Zip Code 68521	Contact Name Khalaf Hesso
Email Address uyca.yezidi@gmail.com		Phone Number 402 310-3703	

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
Khalaf Hesso	Treasurer	305 West Belmont Ave Lincoln Ne 68521

Legal description of real property and general description of all depreciable tangible personal property, except licensed motor vehicles:
The property is a 20 acres land that is owned by the Yezidi community. Its used for cemetery currently and evently build a temple there

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

Agricultural and Horticultural Society
 Educational
 Religious
 Charitable
 Cemetery

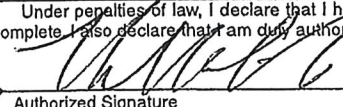
RECEIVED
MAY 28 2019
LANCASTER COUNTY ASSESSOR
REGISTER OF DEEDS

Give a detailed description of the use of the property:
Its just used for cemetery now

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

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

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

sign here  _____ Title **Treasurer** Date **5/27/2019**
Authorized Signature

Retain a copy for your records.

For County Assessor's Recommendation

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

For County Board of Equalization Use Only

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

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

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

File with
Your County
Assessor

Exemption Application

for Tax Exemption on Real and Personal Property by Qualifying Organizations

Read instructions on reverse side.

FORM
451

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

Name of Organization Region V Foundation		County Name Lancaster	Tax Year 2019
Name of Owner of Property Region V Foundation		State Where Incorporated NE	
Street or Other Mailing Address of Applicant 3600 Union Drive		Total Actual Value of Real and Personal Property \$ 263,852.00	Parcel ID Number 17-24-115-003-020
City Lincoln	State NE	Zip Code 68516	Contact Name Kevin Jeppson
Type of Ownership <input type="checkbox"/> Agricultural and Horticultural Society <input checked="" type="checkbox"/> Educational Organization <input type="checkbox"/> Religious Organization <input type="checkbox"/> Charitable Organization <input type="checkbox"/> Cemetery Organization		Phone Number 4024716400	

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
Kevin Jeppson	Treas	3600 Union Drive, Lincoln, NE 68516
Dave Merrill	Secr	3600 Union Drive, Lincoln, NE 68516
Julianne Spatz	Pres	3600 Union Drive, Lincoln, NE 68516

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

Lot 3, Block 2, Waterford Estates 17th Addition, Lincoln, Lancaster County, NE
10001 White Pine Road

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:

Group home for individuals with developmental disabilities.

RECEIVED

APR 05 2019

ROB OGDEN
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

Authorized Signature

Title

Treasurer

3/29/2019

Date

Retain a copy for your records.

For County Assessor's Recommendation

- Approval
- Approval of a Portion
- Denial

COMMENTS: _____

Signature of County Assessor

Date

For County Board of Equalization Use Only

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

- Approved
- Approval of a Portion
- Denied

COMMENTS: _____

Signature of County Board Member

Date

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

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 <i>Word of Life Lutheran Church, Inc.</i>	County Name <i>Lancaster</i>	Tax Year 2018 <i>2019</i>
Name of Business If Different than Organization	State Where Incorporated <i>Nebraska</i>	
Name of Owner of Property <i>Word of Life Lutheran Church, Inc.</i>	Total Actual Value of Real and Personal Property \$	Parcel ID Number <i>P058101</i>
Street or Other Mailing Address of Applicant <i>200 Fletcher Ave.</i>	Contact Name <i>Denise Christensen</i>	Phone Number <i>402-217-2035</i>
City <i>Lincoln</i>	State <i>NE</i>	Zip Code <i>68521</i>
	Email Address <i>dchristensen@a1yahoo.com</i>	

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
<i>Gason Windhorst</i>	<i>President</i>	<i>3000 W. Raymond Rd Raymond, NE 68428</i>
<i>Philip Dani</i>	<i>Vice-President</i>	<i>724 A St. Lincoln, NE 68502</i>
<i>Denise Christensen</i>	<i>Treasurer</i>	<i>1527 146th Garland NE 68360</i>

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

*RELIG ORG 200 FLETCHER AVE
Chairs, tables, office furniture, sound system, 2 TV's, 2 laptops and printer, refrigerator, dishwasher, drum set, microphones*

RECEIVED
JUN 25 2019

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 primary use of the property and any other uses of the property:
Used for Sunday morning services. There are various services during Lent and Advent. It is also used for church meetings, Bible study and youth classes.

POB OGDEN
LANCASTER COUNTY ASSESSOR
REGISTERED 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 *Denise Christensen* _____ *Treasurer* _____ *6-24-19*
Authorized Signature Title Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval

Approval of a Portion

Denied

COMMENTS: _____

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

Approved

Approval of a Portion

Denied

If the County Board's determination is different from the County Assessor's recommendation, an explanation is required.

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.

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 <i>Citylight Lincoln Church of The Christian and Missionary Alliance</i>	County Name <i>Lancaster</i>	Tax Year <i>2019</i>
Name of Business if Different than Organization <i>same</i>	State Where Incorporated <i>NE</i>	
Name of Owner of Property <i>same</i>	Total Actual Value of Real and Personal Property <i>\$ 1,284,400</i>	Parcel ID Number <i>17-19-332-012-000</i>
Street or Other Mailing Address of Applicant <i>2820 O St.</i>	Contact Name <i>Barb Vanderbeek</i>	Phone Number <i>402-261-8007</i>
City <i>Lincoln NE</i>	State <i>NE</i>	Zip Code <i>68510</i>
Email Address <i>barb@citylightlincoln.org</i>		
Type of Ownership <input type="checkbox"/> Agricultural and Horticultural Society <input type="checkbox"/> Educational Organization <input checked="" type="checkbox"/> Religious Organization <input type="checkbox"/> Charitable Organization <input type="checkbox"/> Cemetery Organization		

Name	Title of Officers, Directors, or Partners	Address, City, State, Zip Code
<i>Mozart Dixon Jr</i>	<i>President</i>	<i>434 N 26th Lincoln NE 68503</i>
<i>Eric Knoll</i>	<i>Secretary</i>	<i>2865 Katelyn Cir Lincoln NE 68516</i>
<i>Jared Froehlich</i>	<i>Treasurer</i>	<i>5541 S 38th Lincoln NE 68516</i>

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

Sunnyside Addition, Block 9, Lot 8-14, Ex St

Church building includes worship center, offices and gym.

RECEIVED

JUL 01 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 primary use of the property and any other uses of the property:

Church / Religious organization that performs religious activities such as serving communion, conducting weddings and funerals, and meeting the needs of the community around us. We host regular worship services and other gatherings.

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 *B. Vanderbeek* Executive Admin *6-30-19*
Authorized Signature Title Date

Retain a copy for your records.

For County Assessor's Recommendation

Approval COMMENTS: _____

Approval of a Portion

Denied

Signature of County Assessor _____ Date _____

For County Board of Equalization Use Only

Approved If the County Board's determination is different from the County Assessor's recommendation, an explanation is required.

Approval of a Portion

Denied

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.

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.