Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2018, or fiscal year beginning <u>APR 1</u>, 2018, and ending <u>MAR 31</u> **Do not send to the IRS. Keep for your records.**

Go to www.irs.gov/Form8879EO for the latest information.

Department of the Treasury Internal Revenue Service Name of exempt organization

Employer identification number

23-7093415

, 2019

ACLU NEBRASKA

Double Truce of Detrume and Detrume Information	
EXECUTIVE DIRECTOR	
DANIELLE CONRAD	
Name and life of onicer	

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	157,735.
2a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	Зb	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here b Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X lauthorize HBE LLP	to enter my PIN 93415
ERO firm name	Enter five numbers, but do not enter all zeros
, , , , , , , , , , , , , , , , , , , ,	filed return. If I have indicated within this return that a copy of the return f the IRS Fed/State program, I also authorize the aforementioned ERO to
	re on the organization's tax year 2018 electronically filed return. If I have with a state agency(ies) regulating charities as part of the IRS Fed/State reen.
Officer's signature	Date
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification	
number (EFIN) followed by your five-digit self-selected PIN.	47127893415 Do not enter all zeros
I certify that the above numeric entry is my PIN, which is my signature on th confirm that I am submitting this return in accordance with the requirements <i>e-file</i> Providers for Business Returns.	, ,
ERO's signature HBE LLP	Date 🕨 11/06/19
ERO Must Retain This I	Form - See Instructions
Do Not Submit This Form to the	IRS Unless Requested To Do So
LHA For Paperwork Reduction Act Notice, see instructions.	Form 8879-EO (2018)
823051 10-26-18	

			EXTENDED TO FEBRUARY 18, 2	2020	
For	 9	90	Return of Organization Exempt Froi Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code	m Income Tax	OMB No. 1545-0047
			Do not enter social security numbers on this form as it r		
		of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the I		Open to Public Inspection
Α	For th	e 2018 calend		g MAR 31, 2019	
Β	Check if applicab	le: C Name o	forganization	D Employer identified	cation number
	Addre		NEBRASKA		
	Name		usiness as	23-7	093415
	 		and street (or P.O. box if mail is not delivered to street address) Room/	suite E Telephone numbe	r
	Final	13/	S 13 ST STE 1010		476-8091
	termi ated	n-	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	157,735.
	Amer returr	LINC	OLN, NE 68508-3608	H(a) Is this a group re	eturn
	Appli tion	^{ca-} F Name a	nd address of principal officer: DANIELLE CONRAD	for subordinates	
	pend	ing SAME	AS C ABOVE	H(b) Are all subordinates in	
		empt status: [501(c)(3) X 501(c) (4) ◀ (insert no.) 4947(a)(1) or	527 If "No," attach a	list. (see instructions)
			ACLUNEBRASKA.ORG	H(c) Group exemptio	
				Year of formation: 1972	State of legal domicile: NE
Pa	art I				
ø	1	Briefly describ	be the organization's mission or most significant activities: FOR OVE	R 50 YEARS IN 1	NEBRASKA,
Governance			U HAS WORKED IN COURTS, LEGISLATURES	•	
ern	2	Check this bo	x ▶ ☐ if the organization discontinued its operations or disposed of	more than 25% of its net as	
Š	3				21
	4		lependent voting members of the governing body (Part VI, line 1b)		21
Activities &	5		of individuals employed in calendar year 2018 (Part V, line 2a)		0
tivit	6	Total number	of volunteers (estimate if necessary)		25
Act			d business revenue from Part VIII, column (C), line 12		0.
	b	Net unrelated	business taxable income from Form 990-T, line 38		
		o		Prior Year 94,193.	Current Year 157,735.
Iue	8		and grants (Part VIII, line 1h)	0	0.
Revenue	9	•	ce revenue (Part VIII, line 2g)		0.
Re	10		come (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	04 100	157,735.
	13		milar amounts paid (Part IX, column (A), lines 1-3)		0.
			to or for members (Part IX, column (A), line 4)		0.
S	40	<u> </u>		10,974.	20,057.
Expenses	16a	Professional f	r compensation, employee benefits (Part IX, column (A), lines 5-10) undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) 3 , 184.	0.	0.
bei	b	Total fundrais	ing expenses (Part IX, column (D), line 25) \blacktriangleright 3, 184.		
ũ			es (Part IX, column (A), lines 11a-11d, 11f-24e)	37,552.	32,255.
	18		es. Add lines 13-17 (must equal Part IX, column (A), line 25)	48,526.	52,312.
	19	Revenue less	expenses. Subtract line 18 from line 12	45,667.	105,423.
or				Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	98,739.	206,052.
tAs	21	Total liabilities	(Part X, line 26)	8,962.	10,852.
_			fund balances. Subtract line 21 from line 20	89,777.	195,200.
	art II	5			
			I declare that I have examined this return, including accompanying schedules and s		y knowledge and belief, it is
true	, corre	ct, and complete	. Declaration of preparer (other than officer) is based on all information of which pre	eparer has any knowledge.	
_		Cionature	e of officer	Date	
C:	-			Udic	

Sign	Signature of officer	Date				
Here	DANIELLE CONRAD, EXECUTIVE DIRECTOR					
	Type or print name and title					
	Print/Type preparer's name Preparer's signature Date	Check PTIN				
Paid	PATRICK A MEYER, CPA CFE PATRICK A MEYER, CPA11/06	/19 self-employed P00283870				
Preparer		Firm's EIN 47-0677245				
Use Only	Firm's address 7140 STEPHANIE LANE, P.O. BOX 23110					
	LINCOLN, NE 68542-3110	Phone no. (402) 423-4343				
May the IF	May the IRS discuss this return with the preparer shown above? (see instructions)					
832001 12-3	332001 12-31-18 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018)					

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	m 990 (2018) ACLU NEBRASKA	23-7093415 Page 2			
Pa	art III Statement of Program Service Accomplishments				
	Check if Schedule O contains a response or note to any line in this Part III	X			
1	Briefly describe the organization's mission: FOR OVER 50 YEARS IN NEBRASKA, THE ACLU HAS				
	LEGISLATURES, AND COMMUNITIES TO PROTECT TH				
	INDIVIDUAL RIGHTS OF ALL PEOPLE. WITH A NAT				
	AND MILLIONS OF MEMBERS AND SUPPORTERS, INC				
2	Did the organization undertake any significant program services during the year which				
	prior Form 990 or 990-EZ?	Yes X No			
	If "Yes," describe these new services on Schedule O.				
3	Did the organization cease conducting, or make significant changes in how it conducts	s, any program services? Yes X No			
	If "Yes," describe these changes on Schedule O.				
4	Describe the organization's program service accomplishments for each of its three larg				
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and				
	revenue, if any, for each program service reported.				
4a	(Code:) (Expenses \$ 36,784. including grants of \$ WE PROVIDE RESEARCH AND TESTIMONY TO INDIVI				
	LEGISLATIVE COMMITTEES ON BILLS AND RESOLUT				
	LIBERTIES; WE CONTACT MEMBERS OF NEBRASKA'S				
	ISSUES AFFECTING THE SAME.	CONGRESIONAL DELEGATION ON			
	1550E5 AFFECTING THE SAME.				
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)			
4c					
40	(Code:) (Expenses \$ including grants of \$) (Revenue \$)			
4d	Other program services (Describe in Schedule O.)				
Ŧŭ	(Expenses \$ including grants of \$) (Revenue \$)			
4e	26 794				
		Form 990 (2018)			
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Form	990	(2018)

 Form 990 (2018)
 ACLU
 NEBRASKA

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		x
2				X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2		
-	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			37
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
10	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X	10		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		x
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	л	
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			<u> </u>
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		v
00-	complete Schedule G, Part III	19		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		- 22
р 21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
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Form 990 (2	2018)	ACLU	NEBRASKA
Part IV	Checklist	of Required	Schedules (continued)

ACLU NEBRASKA

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete	05h		x
26	Schedule L, Part I	25b		- 23
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disgualified persons? <i>If</i> "Yes,"			
		26		x
27	<i>complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		- 23
27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
•	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	<u> </u>		
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	1		
Der	Note. All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	ć		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	4		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?		990	
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Sta	itements Regardin	g Other IRS Filin	gs and Tax Com	pliance (continued)

Form 990 (2018)

Part V

			Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return 2a 0						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)						
	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?						
	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O						
4a	4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?						
b	If "Yes," enter the name of the foreign country:						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	F -		x			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		- 73			
C 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50					
Ud	any contributions that were not tax deductible as charitable contributions?	6a		x			
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ua					
Ň	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).	00					
'a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		x			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required						
	to file Form 8282?	7c		x			
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e					
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the						
	sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12 10a						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b						
11	Section 501(c)(12) organizations. Enter:						
	Gross income from members or shareholders 11a						
D	Gross income from other sources (Do not net amounts due or paid to other sources against						
122	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12.0					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
	Is the organization licensed to issue qualified health plans in more than one state?	13a					
-	Note. See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
-	organization is licensed to issue qualified health plans						
с	Enter the amount of reserves on hand 13c						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or						
	excess parachute payment(s) during the year?	15		X			
	If "Yes," see instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X			
	If "Yes," complete Form 4720, Schedule O.						

Form **990** (2018)

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Sec	Check if Schedule O contains a response or note to any line in this Part VI			Σ
000	tion A. doverning body and Management		Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 23	1	100	
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 21	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
-	officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		┢
Ŭ	of officers, directors, or trustees, or key employees to a management company or other person?	3		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		
6	Did the organization become aware during the year of a significant diversion of the organization s assets?	6	x	+
0 7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	-		+
1a		7a	x	
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<i>1</i> a	- 23	┢
D		76	x	
•	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		+
8		0-	x	
а	The governing body?	8a	X	┝
	Each committee with authority to act on behalf of the governing body?	8b		┢
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			1.
			Yes	
	Did the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	X	┢
		13	X	+
14 45	Did the organization have a written document retention and destruction policy?	14	- 11	+
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			.
	The organization's CEO, Executive Director, or top management official			H
b	Other officers or key employees of the organization	15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			.
	taxable entity during the year?	16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) avail	abl
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	nd finar	ncial	
	statements available to the public during the tax year.	iui ui		
20	State the name, address, and telephone number of the person who possesses the organization's books and records \blacktriangleright			
	134 S 13 STE 1010, LINCOLN, NE 68508			
3200		Forn	n 990	101
3200	6 12-31-18 6	TUI	. 530	120
21	106 758603 1543-000 2018.04030 ACLU NEBRASKA	15	43-	0

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Employees, and Independent Contractors	

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

	1	l	11120			npe	iout			(E)
(A)	(B)			(0 Pos				(D)	(E)	(F)
Name and Title	Average		not c	heck	more	than		Reportable	Reportable	Estimated
	hours per					is bot pr/trus		compensation	compensation	amount of
	week	2					,	from the	from related organizations	other
	(list any hours for	lirect				_		organization	(W-2/1099-MISC)	compensation from the
	related	e or c	stee			sated		(W-2/1099-MISC)	(00-2/1033-10100)	organization
	organizations	truste	al trus		yee	mper				and related
	below	d ual 1	ution	_	mplo	est co	5			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			0
(1) BRENDA EALEY	1.00			_			_			
DIRECTOR	1.00	x		x				0.	0.	0.
(2) A'JAMAL BYNDON	0.50									
1ST VICE PRESIDENT	0.50	X		Х				0.	0.	0.
(3) JOAN BIRNIE	0.50									
2ND VICE PRESIDENT	0.50	Х		Х				0.	0.	0.
(4) MICHAEL BERRY	0.50									
TREASURER	0.50	Х		Х				0.	0.	0.
(5) DARLA ZINK	1.00									
DIRECTOR	1.50	Х		Х				0.	0.	0.
(6) LESLIE J. SEYMORE	0.50									
DIRECTOR	0.50	Х						0.	0.	0.
(7) GLORIA ROMERO-DOWNING	0.50									_
DIRECTOR	0.50	х						0.	0.	0.
(8) DESTINY BURKETT	0.50									•
DIRECTOR	0.50	х						0.	0.	0.
(9) NANCY BARE	0.50									•
DIRECTOR	0.50	х						0.	0.	0.
(10) SHAUN ILAHI	0.50									•
DIRECTOR	0.50	х						0.	0.	0.
(11) NATASHA NASEEM	0.50									_
DIRECTOR	0.50	Х						0.	0.	0.
(12) JAMES DAKE	0.50									
DIRECTOR	0.50	Х						0.	0.	0.
(13) RICH JURO	0.50									
DIRECTOR	0.50	Х						0.	0.	0.
(14) STEPHEN JACKSON	0.50									
DIRECTOR	0.50	Х						0.	0.	0.
(15) DANIELLE POWELL	0.50									
DIRECTOR	0.50	Х						0.	0.	0.
(16) MADELINE ROEBKE-CURNS	0.50							_	_	_
DIRECTOR	0.50	X						0.	0.	0.
(17) MARY CAMPBELL	0.50							_		-
DIRECTOR	0.50	Х						0.	0.	0.
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rm 990 (2018) ACLU NEBRASKA 23-7093415 Page 8						ige 8						
Part VII Section A. Officers, Directors, Trus	stees, Key Em	ploy	vees,	an	d Hi	ighe	st C	ompensated Employe	es (continued)			
(A) (B) Name and title Average hours per week			Average Position hours per box, unless person is both officer and a director/truste					(D) Reportable compensation from	(E) Reportable compensation from related	am	(F) timate nount c other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fro orga and	pensat om the anizatio d relate nizatio	e on ed
(18) LAURIE THOMAS LEE	0.50	x						0.	0	•		0.
(19) MARJ PLUMB	0.50								_			_
PRESIDENT	0.50	х						0.	0	•		0.
(20) LINDA PRATT	0.50											•
DIRECTOR	0.50	X						0.	0	•		0.
(21) LUIS SOTELO DIRECTOR	0.50	x						0.	0	•		0.
(22) LUCAS LAROSE	0.50											
DIRECTOR	0.50	X						0.	0	•		0.
(23) ASHLEI SPIVEY DIRECTOR	0.50	x						0.	0	•		0.
(24) DANIELLE CONRAD EXECUTIVE DIRECTOR	1.00 2.00			х				0.	96,683	. 19	9,6	72.
1b Sub-total								0.	96,683		9,6	
c Total from continuation sheets to Part V								0.	0	-		0.
d Total (add lines 1b and 1c)								0.	96,683	<u> </u>	9,6	/2.
2 Total number of individuals (including but r compensation from the organization ►	not limited to th	iose	liste	ed a	bove	e) wł	no re	eceived more than \$100	0,000 of reportable			0
											Yes	No
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s				-	•	•		highest compensated e		3		Х
4 For any individual listed on line 1a, is the s	um of reportab											
and related organizations greater than \$15 5 Did any person listed on line 1a receive or										4		X
rendered to the organization? If "Yes," con								0		5		Х
Section B. Independent Contractors						-					t	
1 Complete this table for your five highest co the organization. Report compensation for	•	•								isation fr	rom	
(A)	the calendar y	car	criai	ig v	VILII			(B)		(C		
Name and business	address	NC	ONE	2				Description of s	ervices	Comper		<u>ו</u>
2 Total number of independent contractors (including but n	ot li	mito	d to	the	وم انو		above) who received m	ore than			

Total number of independent contractors (including but not limited to those listed above) who received more than
 \$100,000 of compensation from the organization

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Form **990** (2018)

	rt VII	I Statement of Rever	nue					
		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d f f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines Total. Add lines 1a-1f	1b 1c 1d ions) 1e ts, and 1f ve 1f	2,334. 155,401. Business Code	157,735.			
Program Service Revenue		All other program service reve Total. Add lines 2a-2f	enue	►				
	3 4 5	Investment income (including other similar amounts) Income from investment of ta Royalties	x-exempt bond p	proceeds				
	b c	Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss)	(i) Real	(ii) Personal				
	7 a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities	(ii) Other				
		Gain or (loss)						
Other Revenue		Net gain or (loss) Gross income from fundraisin including \$ contributions reported on line Part IV, line 18	g events (not of e 1c). See					
the	b	Less: direct expenses						
Ó	с	Net income or (loss) from func Gross income from gaming ac Part IV, line 19	draising events ctivities. See					
		Less: direct expenses						
	10 a b	Net income or (loss) from gam Gross sales of inventory, less and allowances Less: cost of goods sold	returns a					
	С	Net income or (loss) from sale						
ł	11 a	Miscellaneous Revenu		Business Code				
	b c							
	d e	All other revenue						
	12	Total revenue. See instructions			157,735.	0.	0.	0.
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	ion 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All oth	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respons		this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
-	trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	14,196.	10,546.	2,442.	1,208
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	2,106.	1,565.	362.	179
9	Other employee benefits	2,651.	1,969.	456.	226
0	Payroll taxes	1,104.	820.	190.	94
1	Fees for services (non-employees):				
а	Management				
b					
с	Accounting	1,504.	1,117.	259.	128
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
-	column (A) amount, list line 11g expenses on Sch 0.)				
2	Advertising and promotion				
13	Office expenses	5,391.	5,391.		
4	Information technology	1,867.		1,249.	618
5	Royalties				
6	Occupancy	4,033.	2,996.	694.	343
7	Travel	849.	631.	146.	72
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	7,638.	1,287.	6,204.	147
0	Interest				
21	Payments to affiliates				
2	Depreciation, depletion, and amortization				
3	Insurance	1,261.	937.	217.	105
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	PUBLIC EDUCATION	5,179.	5,179.		
b	CONTRACT LABOR	3,804.	3,804.		
с	MISCELLANEOUS	529.	393.	91.	45
d	BANK FEES	200.	149.	34.	17
е	All other expenses	52,312.	36,784.	12,344.	3,184

 $\ensuremath{\textit{Joint costs}}$. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here _____ if following SOP 98-2 (ASC 958-720)

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Form **990** (2018)

ACLU NEBRASKA

Form 990 (2018)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	90,465.	1	167,094.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	8,274.	4	37,864.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
ts		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	1,094.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	98,739.	16	206,052.
	17	Accounts payable and accrued expenses	8,962.	17	10,852.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
iabi		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	8,962.	26	10,852.
		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗴 and			
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	89,777.	27	195,200.
3al	28	Temporarily restricted net assets		28	
Β	29	Permanently restricted net assets		29	
Fu		Organizations that do not follow SFAS 117 (ASC 958), check here			
p		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	89,777.	33	195,200.
	34	Total liabilities and net assets/fund balances	98,739.	34	206,052. Form 990 (2018)

Form **990** (2018)

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Form	990 (2018) ACLU NEBRASKA	23-709	<u>3415</u>	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
			1		25
1	Total revenue (must equal Part VIII, column (A), line 12)	1			$\frac{35}{10}$
2	Total expenses (must equal Part IX, column (A), line 25)	2			12.
3	Revenue less expenses. Subtract line 2 from line 1	3			23.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8.	9,1	77.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		1.01		~ ~
	column (B))	10	19:	5,2	00.
Ра	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	L
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	•			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
				ααη /	(2012)

Form **990** (2018)

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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

2018 Open to Public Inspection

OMB No. 1545-0047

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

 Section 501(c)(4), 	(5), or (6) organizations: Complete Part III.
Nome of exception	

inar	ACLU NE	BRASKA		Empio	23-7093415
Pa		ganization is exempt unde	r section 501(c) o	or is a section 527 or	
1 2 3	Provide a description of the organi	ization's direct and indirect political	campaign activities in	Part IV.	-
Pa	art I-B Complete if the or	ganization is exempt unde	r section 501(c)(3	3).	
1	Enter the amount of any excise tax				
2	Enter the amount of any excise tax	incurred by organization managers	s under section 4955	▶\$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720 fo	r this year?		Yes No
4a	a Was a correction made?				Yes No
_	o If "Yes," describe in Part IV.	ganization is exempt unde		and and the FOM	
	Enter the amount directly expende		-		
2	Enter the amount of the filing organ		0		
				►\$	
3	1 1			•	
4	Did the filing organization file Form	• · · · · · · · · · · · · · · · · · · ·			
5	made payments. For each organize contributions received that were p	mployer identification number (EIN) ation listed, enter the amount paid t romptly and directly delivered to a s additional space is needed, provid	from the filing organiza separate political orga	ation's funds. Also enter the nization, such as a separat	e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

Schedule C (Form 990 or 990-EZ) 2018

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Schedule C (Form 990 or	990-EZ) 2018 ACLU	NEBRASKA
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section 501(h)).	inization is ex	empt under sectio	on 501(c)(3) and file	ed Form 5768 (e	election under
A Check if the filing organization	on belongs to an a	ffiliated group (and list	in Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and share	of excess lobbying	g expenditures).			
B Check ▶ if the filing organization	on checked box A	and "limited control" pr	rovisions apply.		•
	on Lobbying Exp tures" means amo	enditures ounts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public opinior	n (grass roots lobbying)			
b Total lobbying expenditures to influe	ence a legislative b	ody (direct lobbying)			
c Total lobbying expenditures (add line	es 1a and 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures	(add lines 1c and	1d)			
f Lobbying nontaxable amount. Enter	the amount from t	he following table in bo	th columns.		
If the amount on line 1e, column (a) or	(b) is: The lo	obbying nontaxable an	nount is:		
Not over \$500,000	20% c	of the amount on line 1	е.		
Over \$500,000 but not over \$1,000,	. ,	000 plus 15% of the ex	· ,		
Over \$1,000,000 but not over \$1,50		000 plus 10% of the ex			
Over \$1,500,000 but not over \$17,0	ess over \$1,500,000.				
Over \$17,000,000	\$1,000	0,000.			
g Grassroots nontaxable amount (ente	or 25% of line 1f				
h Subtract line 1g from line 1a. If zero					
i Subtract line 1f from line 1c. If zero					
i If there is an amount other than zero			-		
reporting section 4911 tax for this ye		<i>,</i> 0			Yes No
		veraging Period Unde			
(Some organizations that		501(h) election do no arate instructions for l		of the five columns	below.
	Lobbying Exp	enditures During 4-Ye	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

832042 11-08-18

 $15421106 \ 758603 \ 1543-000$

Schedule C (Form 990 or 990-EZ) 2018 ACLU NEBRASKA

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a	a)	(b)
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				Х
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No," Ol	R (b) Par	t III-A, lir	ne 3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politi	cal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year				
с					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	oolitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part I	I-A, lines 1 a	and 2 (see	
	Ictions); and Part II-B, line 1. Also, complete this part for any additional information.				

LOBBYING ACTIVITIES FOR ISSUES REGARDING CIVIL LIBERTIES

832043 11-08-18

15421106 758603 1543-000

Schedule C (Form 990 or 990-EZ) 2018

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form	990)
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Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Name of the organization

Employer identification number

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes' on Form 980, Part IV, lies 6. I Total number at end of yes: (a) Donor advised funds (b) Funds and other accounts Aggregate value of contributions to (dumg year) (a) Donor advised funds (b) Funds and other accounts Aggregate value of contributions to (dumg year) (b) Honor advised funds (c) Donor advised funds B Dd the organization inform at donors and donor advisors in writing that the assets held in donor advised funds (c) Particle Control Yes No 6 Dd the organization inform at grantes, donors, and donor advisors in writing that grant funds can be used only for charatise purposes and not the benefit Of the donor of donor advisor, or for any tother purpose conterming important inform at grantes, donors, and donor advisor or for any tother purpose conterming Yes No Part IC Conservation Easements. Complete if the organization intek ck all that goply. Preservation of a certified historic structure Yes No Part IC Conservation assements 2a 2a 2a 2a 2a 2a 1 Preservation of a certified historic structure 2a 2a<		ACLU NEBRASKA			23-7093415
(a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (during year)	Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accou	nts.Complete if the
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 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$	_				
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 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ✓ ✓ Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ✓ \$ S Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ✓ Yes No 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part IIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answerd "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, the following amounts relating to these items: i) Revenue included on Form 990, Part X § 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X §<th>5</th><th></th><th></th><th></th><th></th>	5				
 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$					
 \$	6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation ease	ements during the year
 \$	_	·			
 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 95	7		dling of violations, and enforcing conservation	ion easement	ts during the year
 and section 170(h)(4)(B)(ii)? Yes No 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X \$ Assets includ					
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 b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part X b Assets included in Form 990, Part X c S 		historical treasures, or other similar assets held for public ex	hibition, education, or research in furtheran	ice of public :	service, provide, in Part XIII,
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 (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X b S 		treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	lic service, p	rovide the following amounts
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a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X	-				
b Assets included in Form 990, Part X \$	я			¢ 🖌	

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Sche	dule D (Form 990) 2018 ACLU NE	EBRASKA						23-70	9341	5 Pa	age 2
Par	t III Organizations Maintaining	Collections of A	rt, Hist	orical Tr	easures, o	or Oth	er Simil	ar Asse	ts (contii	nued)	
3	Using the organization's acquisition, access	sion, and other record	ls, check	any of the	following that	t are a s	ignificant	use of its	collectio	n item	iS
	(check all that apply):										
а	Public exhibition	c	ı 🛄 ı	oan or exc	hange progra	ams					
b	Scholarly research	e	e 🗆 c	Other							
с	Preservation for future generations										
4	Provide a description of the organization's of	collections and explai	n how the	ey further t	he organizati	on's exe	empt purpo	ose in Par	t XIII.		
5	During the year, did the organization solicit	or receive donations	of art, his	storical trea	asures, or oth	er simila	r assets	_	-		-
	to be sold to raise funds rather than to be m		U						Yes		No
Par	t IV Escrow and Custodial Arrar		ete if the	organizatio	on answered '	'Yes" or	n Form 990), Part IV,	line 9, o	r	
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custoo								-		7
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XII	I and complete the fo	llowing ta	able:							
									Amoun	t	
	Beginning balance										
	Additions during the year										
e	Distributions during the year										
T	Ending balance										
	Did the organization include an amount on F								Yes		_ No □
Par	If "Yes," explain the arrangement in Part XII t V Endowment Funds. Complete										<u></u>
I UI		(a) Current year		rior year	(c) Two year		(d) Three y	ware back	(e) Fou	voare	hack
10	Paginning of year balance	(a) Current year	(D) Pr	lor year		SDACK	(a) Thee y	Cais Dack	(e) i ou	years	Dack
1a 5	Beginning of year balance										
0	Contributions										
с А	Grants or scholarships										
	Other expenditures for facilities										
C											
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cu		ce (line 1 c	a, column (a)) held as:						
_ a	Board designated or quasi-endowment		%	,							
b	Permanent endowment	%									
c	Temporarily restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c sh	ould equal 100%.									
3a	Are there endowment funds not in the poss	-	ation that	t are held a	and administe	red for t	he organiz	zation			
	by:	C C					Ū.			Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiz	ations listed as requi	red on So	chedule R?					Зb		
4	Describe in Part XIII the intended uses of th	e organization's endo	owment fi	unds.							
Par	t VI Land, Buildings, and Equipr	nent.									
	Complete if the organization answere	ed "Yes" on Form 990	0, Part IV	, line 11a. S	See Form 990), Part X	, line 10.				
	Description of property	(a) Cost or c basis (investr		. ,	t or other (other)	• •	ccumulate preciation	ed	(d) Boo	k valu	Ð
1a	Land		,		. ,	-					
	Buildings										
	Leasehold improvements										
	Equipment										
	Other										
	Add lines 1a through 1e. (Column (d) must		X, colum	nn (B), line i	10c.)						0.
					,			Sobodulo		- 000)	0040

Schedule D (Form 990) 2018

832052 10-29-18

Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	aluation: Cost or end	of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV	, line 11c. See Form 990, I	Part X, line 13.	
(a) Description of investment	(b) Book value		aluation: Cost or end	of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11d. See Form 990	Part X line 15	
	Description	, 1110 1110. 000 1 0111 000,		(b) Book value
(1)				(1) 20011 10.00
(2)				
(3)				
<u>(4)</u>				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	9 15.)			
Part X Other Liabilities.				
Complete if the organization answered "Yes"	on Form 990, Part IV		n 990, Part X, line 25.	
1.(a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)			
, , , , , , , , , , , , , , , , , , , ,	, F			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2018

832053 10-29-18

Sche	dule D (Form 990) 2018 ACLU NEBRASKA		23-709	3415 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statem	ents With Reve		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.		
1	Total revenue, gains, and other support per audited financial statements		1	157,735.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	. 2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			157,735.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		_
с	Add lines 4a and 4b			0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			157,735.
Pa	t XII Reconciliation of Expenses per Audited Financial Staten	-	enses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			
1	Total expenses and losses per audited financial statements			52,312.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2 a		
b	Prior year adjustments	2b		
с	Other losses	2 c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			52,312.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			52,312.
Da	t XIII Supplemental Information.			

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

THE	AMERI	CAN	CIVI	LГ	IBERI	IES	UNION	I OF	NEB	RASK	A (ACLU	NEBR	ASKA)	IS	EXEM	IPT
FROM	I FEDE	RAL	INCO	ME	TAXES	5 UNI	DER SE	CTI	ON 5	01(C)(4	L) OF	THE	INTEF	NAL	REVE	INUE
CODE	E. AC	LU :	NEBRA	SKA	BELI	EVE	5 ТНАТ	' IT	HAS	APP	ROF	RIATI	E SUF	PORT	FOR	ANY	TAX
POSI	TIONS	TA:	KEN, Z	AND	ASS	UCH	, DOES	S NO	г на	VE A	NY	UNCER	RTAIN	I TAX	POSI	TION	IS
THAT	ARE	MAT	ERIAL	то	THE	FINZ	ANCIAI	J STZ	ATEM	ENTS	•						

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Schedule D (Form 990) 2018

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.

ACLU NEBRASKA

Inspection Employer identification number 23-7093415

OMB No 1545-0047

Open to Public

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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PROTECT THE CONSTITUTIONAL AND INDIVIDUAL RIGHTS OF ALL PEOPLE. WITH A

NATIONWIDE NETWORK OF OFFICES AND MILLIONS OF MEMBERS AND SUPPORTERS,

INCLUDING AN EVER-GROWING PRESENCE IN NEBRASKA, WE TAKE UP THE TOUGHEST

CIVIL LIBERTIES FIGHTS. BEYOND ONE PERSON, ONE PARTY, OR ONE SIDE - WE

THE PEOPLE DARE TO CREATE A MORE PERFECT UNION.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PRESENCE IN NEBRASKA, WE TAKE UP THE TOUGHEST CIVIL LIBERTIES FIGHTS.

BEYOND ONE PERSON, ONE PARTY, OR ONE SIDE - WE THE PEOPLE DARE TO

CREATE A MORE PERFECT UNION.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS MEMBERS WHO CAN ELECT THE GOVERNING BODY.

FORM 990, PART VI, SECTION A, LINE 7A:

THE ORGANIZATION HAS MEMBERS WHO CAN ELECT THE GOVERNING BODY.

FORM 990, PART VI, SECTION A, LINE 7B:

THE ORGANIZATION HAS MEMBERS WHO CAN APPROVE CHANGES TO THE ORGANIZATIONS BYLAWS.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 IS EMAILED TO ALL BOARD MEMBERS PRIOR TO SUBMISSION TO THE IRS.

	FORM	990,	PART	VI,	SECTION	в,	LINE	12C:	8		
	LHA For	Paperwo	ork Redu	ction Ac	t Notice, see th	e Inst	ructions fo	or Form	990 or 9	90-EZ.	Schedule O (Form 990 or 990-EZ) (2018)
;	832211 10-	10-18									
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Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization ACLU NEBRASKA	Employer identification number 23-7093415
ALL BOARD MEMBERS HAVE A COPY OF ALL BOARD POLICIES. THE	POLICY HANDBOOK
IS UPDATED ANNUALLY. BOARD MEMBERS AND BOARD COMMITTEE M	EMBERS ARE
EXPECTED TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST AS T	HE OCCASIONS
ARISE. THE BOARD PRESIDENT AND EXECUTIVE DIRECTOR ARE ID	ENTIFIED IN THE
POLICY AND GIVEN THE MUTUAL RESPONSIBILITY OF INTERPRETIN	G THE POLICY OR
REFERRING MATTERS TO THE FULL BOARD AS APPROPRIATE.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ARTICLES OF INCORPORATION ARE ON FILE AT THE SECRETAR	Y OF STATE'S
OFFICE; OTHER GOVERNING DOCUMENTS AND CONFLICT OF INTERES	T POLICY ARE
AVAILABLE UPON REQUEST; THE FINANCIAL STATEMENTS ARE PUBL	ISHED IN THE
ANNUAL REPORT WHICH IS MAILED TO ALL MEMBERS AND IS AVAIL	ABLE TO THE PUBLIC
UPON REQUEST.	

FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED.

Department of the Treasu Internal Revenue Service	лгу	► Go to www.irs.gov/Form990 fo	or instructions and the late	est information.			Inspec	
Name of the organ	ization ACLU NEBRASKA						dentification 093415	number
Part I Identifi	cation of Disregarded Entities. Comple	ete if the organization answered "Yes"	on Form 990, Part IV, line 3	33.				
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) Dr Total inco	(e) me End-of-year a	assets D	(f) Direct controlli entity	ing
		_						
		_						
		-						
		_						
	cation of Related Tax-Exempt Organiz ations during the tax year.	zations. Complete if the organization a	answered "Yes" on Form 99	0, Part IV, line 34, l	because it had one o	or more related	:ax-exempt	
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct contro entity	lling _{co}	(g) on 512(b)(13) ontrolled entity?
ACLU NEBRASKA 134 s 13 ste 1	FOUNDATION INC - 23-7259984 010	PROVIDING LEGAL ASSISTANCE AND FINANCIAL SUPPORT FOR						
LINCOLN, NE 6	8508	CIVIL LIBERTIES ISSUES.	NEBRASKA	501(C)(3)				X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

■ Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

. . . .

OMB No. 1545-0047

2018 Open to Public Inspection

22

Part III Identification of Related O organizations treated as a p	rganizations Taxable partnership during the	as a Partn ax year.	ership. Complete i	f the organi	zation answe	ered "Ye	es" on Fori	n 990, P	Part IV, line	e 34, b	ecaus	e it had one or	more re	lated	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or	(d) Direct controlling entity	Predomin (related)	(e) Predominant income (related, unrelated, cluded from tax under		(f) e of total come	end-of-yea		re of Disprop		(i) Code V-UB amount in bo 20 of Schedu	x mana	ral or Pe	(k) ercentag wnership
		foreign country)		sections	s 512-514)			as	sets	Yes	No	K-1 (Form 106			
	_														
	_														
	-														
	-														
	_														
	-														
Part IV Identification of Related O organizations treated as a c	rganizations Taxable orporation or trust dur	as a Corp ing the tax	oration or Trust. C year.	omplete if t	he organizat	ion ansv	wered "Ye	s" on Fo	rm 990, P	art IV,	line 34	1, because it ha	ad one c	or more	e related
(a) Name, address, and EIN of related organization		(b) Primary activity		(c) Legal domicile (state or foreign	(d) Direct controlling entity ((olling (c) Type of entity (C corp, S corp or trust)		entity Share o S corp, inco			(g) Share of end-of-year assets	(h) Percent owners	hip	(i) Section 512(b)(13) controlled entity?
				country)										<u> </u>	<u>res No</u>

Schedule R (Form 990) 2018 ACLU NEBRASKA

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.							
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		Yes	No			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X			
	Gift, grant, or capital contribution to related organization(s)	1b		X			
	Gift, grant, or capital contribution from related organization(s)	1c		X			
	Loans or loan guarantees to or for related organization(s)	1d		X			
	Loans or loan guarantees by related organization(s)	1e		X			
f	Dividends from related organization(s)	1f		X			
g		1g		X			
h	Purchase of assets from related organization(s)	1h		X			
i	Exchange of assets with related organization(s)	1i		X			
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X			
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X			
I.	Performance of services or membership or fundraising solicitations for related organization(s)	11		X			
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X			
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X			
	Sharing of paid employees with related organization(s)	10		X			
р	Reimbursement paid to related organization(s) for expenses	1p	Х				
q	Reimbursement paid by related organization(s) for expenses	1q		X			
r	Other transfer of cash or property to related organization(s)	1r		X			
	Other transfer of cash or property from related organization(s)	1s		X			
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.						

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
<u>(</u> 3)			
<u>(</u> 4)			
(5)			
_(6)			

Schedule R (Form 990) 2018 ACLU NEBRASKA

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are a partners 501(c) orgs. Yes) ill (3) ? No	(f) Share of total income	(g) Share of end-of-year assets	(H Dispr tior alloca Yes	n) opor- iate tions? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr Yes) ral or F ging ner? NO	(k) Percentage ownership

Schedule R (Form 990) 2018

ACLU NEBRASKA

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

832165 10-02-18

(Rev. January 2019)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

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гие а	separate	applicatio	n ior ea	icn retur	п.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

				Enter file	er's identify	ing number		
Туре о	r Name of exempt organization or other filer, see instru	Employer identification number (EIN) c						
print								
File by the	ACLU NEBRASKA	23-7093415						
due date filing your return. Se	for Number, street, and room or suite no. If a P.O. box, s	Social security number (SSN)						
instructio		oreign add	lress, see instructions.					
Enter th	ne Return Code for the return that this application is for (fi	le a separa	te application for each return)					
Applica		Return						
ls For		Code	Is For					
Form 9	90 or Form 990-EZ	01	Form 990-T (corporation)		07			
Form 9	90-BL	02	Form 1041-A			08		
Form 4	720 (individual)	03	Form 4720 (other than individual)			09		
Form 9	90-PF	04	Form 5227			10		
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 9	90-T (trust other than above) THE ORGANIZATI	06	Form 8870			12		
• If thi box 1 the second seco	request an automatic 6-month extension of time until ne organization named above. The extension is for the org ↓	Group Exe and atta FEBRI ganization's , an check reas	emption Number (GEN) I ich a list with the names and EINs o UARY 15, 2020 , to file s return for: d ending MAR 31, 2019 on: Initial return	f this is fo f all memb	r the whole ers the extension of the organiza	group, check this		
	3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a							
b lf	this application is for Forms 990-PF, 990-T, 4720, or 606	9, enter an	y refundable credits and			0.		
estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b								
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by								
u	using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$							
Cautio instruct	n: If you are going to make an electronic funds withdrawa tions.	l (direct de	bit) with this Form 8868, see Form 8	453-EO a	nd Form 88	79-EO for payment		
LHA	For Privacy Act and Paperwork Reduction Act Notice	, see instr	uctions.		Form	8868 (Rev. 1-2019)		