



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490





See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**Department of the Treasury
Internal Revenue Service (77)**Return of Private Foundation**
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

OMB No 1545-0052

2009

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2009, or tax year beginning , and ending

G Check all that apply. ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation DAROLD A NEWBLOM FOUNDATION		A Employer identification number 36-3696589
	Number and street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone number (see page 10 of the instructions) 308-762-4400
	City or town, state, and ZIP code ALLIANCE NE 69301		C If exemption application is pending, check here <input type="checkbox"/>
	H Check type of organization: <input type="checkbox"/> Section 501(c)(3) exempt private foundation <input checked="" type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 250,021		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue				
1 Contributions, gifts, grants, etc., received (attach schedule)				
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	4,026	4,026	4,026	
4 Dividends and interest from securities	1,164	1,164	1,164	
5 a Gross rents		0		
b Net rental income or (loss)	0			
6 a Net gain or (loss) from sale of assets not on line 10	0			
b Gross sales price for all assets on line 6a	0			
7 Capital gain net income (from Part IV, line 2)		0		
8 Net short-term capital gain			0	
9 Income modifications				
10 a Gross sales less returns and allowances	0			
b Less Cost of goods sold	0			
c Gross profit or (loss) (attach schedule)	0			
11 Other income (attach schedule)	0	0	0	
12 Total. Add lines 1 through 11	5,190	5,190	5,190	
Operating and Administrative Expenses				
13 Compensation of officers, directors, trustees, etc	0			
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16 a Legal fees (attach schedule)	0	0	0	0
b Accounting fees (attach schedule)	470	0	470	0
c Other professional fees (attach schedule)	0	0	0	0
17 Interest				
18 Taxes (attach schedule) (see page 14 of the instructions)	95	75	20	0
19 Depreciation (attach schedule) and depletion	0	0	0	
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publication				
23 Other expenses (attach schedule)	3,867	3,075	3,867	0
24 Total operating and administrative expenses. Add lines 13 through 23	4,432	3,150	4,357	0
25 Contributions, gifts, grants paid	12,245			12,245
26 Total expenses and disbursements. Add lines 24 and 25	16,677	3,150	4,357	12,245
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	-11,487			
b Net investment income (if negative, enter -0-)		2,040		
c Adjusted net income (if negative, enter -0-)			833	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Form **990-PF** (2009)

(HTA)

RECEIVED
MAY 20 2010
OGDEN, UT
7
NE

Part II Balance Sheets		Beginning of year (a) Book Value	End of year	
			(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	121,003	160,124	160,124
	3 Accounts receivable <input type="checkbox"/> 0			
	Less allowance for doubtful accounts <input type="checkbox"/> 0	0	0	0
	4 Pledges receivable <input type="checkbox"/> 0			
	Less allowance for doubtful accounts <input type="checkbox"/> 0	0	0	0
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)	0	0	0
	7 Other notes and loans receivable (attach schedule) <input type="checkbox"/> 0			
	Less allowance for doubtful accounts <input type="checkbox"/> 0	0	0	0
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10 a Investments—U S and state government obligations (attach schedule)	0	0	0
	b Investments—corporate stock (attach schedule)	41,440	88,135	89,897
	c Investments—corporate bonds (attach schedule)	104,149	0	0
Liabilities	11 Investments—land, buildings, and equipment basis <input type="checkbox"/> 0			
	Less accumulated depreciation (attach schedule) <input type="checkbox"/> 0	0	0	0
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	0	0	0
	14 Land, buildings, and equipment basis <input type="checkbox"/> 0			
	Less accumulated depreciation (attach schedule) <input type="checkbox"/> 0	0	0	0
	15 Other assets (describe <input type="checkbox"/>)	0	0	0
	16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	266,592	248,259	250,021
	17 Accounts payable and accrued expenses			
	18 Grants payable			
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons	0	0	
	21 Mortgages and other notes payable (attach schedule)	0	0	
	22 Other liabilities (describe <input type="checkbox"/>)	0	0	
	23 Total liabilities (add lines 17 through 22)	0	0	
	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	306,186	306,186	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	-39,594	-57,927	
	30 Total net assets or fund balances (see page 17 of the instructions)	266,592	248,259	
	31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	266,592	248,259	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	266,592
2 Enter amount from Part I, line 27a	2	-11,487
3 Other increases not included in line 2 (itemize) <input type="checkbox"/> ROUNDING	3	1
4 Add lines 1, 2, and 3	4	255,106
5 Decreases not included in line 2 (itemize) <input type="checkbox"/> LOSS ON SALE OF INVESTMENTS/CAPITAL GAIN DISTRIB	5	6,847
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	248,259

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a See Attached Statement		P	VARIOUS	VARIOUS
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a 140,899	0	147,746	-6,847	
b 0	0	0	0	
c 0	0	0	0	
d 0	0	0	0	
e 0	0	0	0	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
a 0	0	0	0	
b 0	0	0	0	
c 0	0	0	0	
d 0	0	0	0	
e 0	0	0	0	
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			2	-6,847
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8 }			3	0

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☐ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	18,043	263,811	0.068394
2007	15,871	290,057	0.054717
2006	13,660	271,265	0.050357
2005	17,191	286,120	0.060083
2004	15,291	268,571	0.056935
2 Total of line 1, column (d)			2 0.290486
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0.058097
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5			4 253,565
5 Multiply line 4 by line 3			5 14,731
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 20
7 Add lines 5 and 6			7 14,751
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.			8 12,245

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		1	41
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0
3 Add lines 1 and 2		3	41
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	41
6 Credits/Payments			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a	0	
b Exempt foreign organizations—tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	0	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	0	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	41	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	0	
11 Enter the amount of line 10 to be. Credited to 2010 estimated tax <input type="checkbox"/> 0 Refunded <input type="checkbox"/> 0	11	0	

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input type="checkbox"/> NE		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► NONE	13	X	
14	The books are in care of ► BANK OF THE WEST Telephone no ► 308-762-4400 Located at ► DRAWER A ALLIANCE NE ZIP+4 ► 69301			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>	1b	N/A
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20 _____, 20 _____, 20 _____, 20 _____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b	N/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20 _____, 20 _____, 20 _____, 20 _____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	3b	N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?
- (3) Provide a grant to an individual for travel, study, or other similar purposes?
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

☐ Yes ☒ No

☒ Yes ☐ No

☐ Yes ☒ No

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)?

☐ Yes ☒ No

5b

X

Organizations relying on a current notice regarding disaster assistance check here

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

6b

X

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

7b

X

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
FRANK TOLSTEDT 137 W 21ST ST ALLIANCE NE 69301	PRESIDENT/DIRECTOR PARTTIME	0	0	0
WALLY SEILER 1208 LARAMIE AVE ALLIANCE NE 69301	TREASURER/DIRECTOR PARTTIME	0	0	0
HERBERT SAMPSON III 9202 W DODGE RD SUITE 307 OMAHA NE	V PRES/DIRECTOR PARTTIME	0	0	0
		.00	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None				

Total number of other employees paid over \$50,000

1

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		0
		0
		0
		0
		0
		0
Total number of others receiving over \$50,000 for professional services		1

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 TO PROVIDE SCHOLARSHIPS FOR DESERVING YOUNG MEN & WOMEN OF WHATEVER ORIGIN & TO ASSIST THEM IN ATTENDING ANY EDUCATION INSTITUTION IN THIS COUNTRY OR ABROAD SCHEDULE ATTACHED (10 STUDENTS)	5,000
2 TO ASSIST IN & FUND EQUIPMENT OR PROVIDE FOR THE MAINTENANCE OF INSTITUTIONS OR ASSOCIATIONS FOR THE ADVANCEMENT OF LEARNING, ART APPRECIATION, ELDER CARE IN THIS COUNTRY - SCHEDULE ATTACHED (5 ORGANIZATIONS/ENTITIES SERVED)	7,245
3	
4	

Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1	
2	
All other program-related investments. See page 24 of the instructions	
3	0
Total. Add lines 1 through 3	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	116,862
b	Average of monthly cash balances	1b	140,564
c	Fair market value of all other assets (see page 24 of the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	257,426
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	257,426
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of the instructions)	4	3,861
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	253,565
6	Minimum investment return. Enter 5% of line 5	6	12,678

Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	12,678
2a	Tax on investment income for 2009 from Part VI, line 5	2a	41
b	Income tax for 2009 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	41
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	12,637
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	12,637
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	12,637

Part XII Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	12,245
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	12,245
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	41
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,204

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				12,637
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only			0	
b Total for prior years. 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2009:				
a From 2004	2,002			
b From 2005	2,995			
c From 2006	211			
d From 2007	1,762			
e From 2008	5,002			
f Total of lines 3a through e	11,972			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 12,245				
a Applied to 2008, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
c Treated as distributions out of corpus (Election required—see page 26 of the instructions)	0			
d Applied to 2009 distributable amount				12,245
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	392			392
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	11,580			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions		0		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions			0	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	1,610			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	9,970			
10 Analysis of line 9:				
a Excess from 2005	2,995			
b Excess from 2006	211			
c Excess from 2007	1,762			
d Excess from 2008	5,002			
e Excess from 2009	0			

N/A

- N/A

- ☐ 4942(j)(3) or ☐ 4942(j)(5)

- | Tax year | Prior 3 years | | | (e) Total |
|----------|---------------|----------|----------|-----------|
| (a) 2009 | (b) 2008 | (c) 2007 | (d) 2006 | |
| 0 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 |
| 0 | 0 | 0 | 0 | 0 |
| | | | | 0 |
| 0 | 0 | 0 | 0 | 0 |
| | | | | 0 |
| 0 | 0 | 0 | 0 | 0 |
| | | | | 0 |
| | | | | 0 |
| 0 | 0 | 0 | 0 | 0 |
| | | | | 0 |
| | | | | 0 |
| | | | | 0 |
| | | | | 0 |

Form **990-PF** (2009)

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CARNEGIE ARTS CENTER			ARTS DEVELOPMENT	
ALLIANCE NE 69301	NONE			1,175
KEEP ALLIANCE BEAUTIFUL			COMMUNITY DEVELOPMENT	
ALLIANCE NE 69301	NONE			1,000
CRAWFORD RSVP			COMMUNITY DEVELOPMENT	
CRAWFORD NE 69339	NONE			1,250
POST PLAYHOUSE			ARTS DEVELOPMENT	
CRAWFORD NE 69339	NONE			2,820
TEAMMATES MENTORING PROGRAM			EDUCATION/COMMUNITY DEVELOPMENT	
ALLIANCE NE 69301	NONE			1,000
JOSEPH R HAAS			EDUCATION	
CHADRON STATE COLLEGE HEMINGFORD NE 69301	NONE			500
ALLISON A PANCOST			EDUCATION	
UNIVERSITY OF WYOMING ALLIANCE NE 69301	NONE			500
ROBERT A PLACEK III			EDUCATION	
CREIGHTON UNIVERSITY ALLIANCE NE 69301	NONE			500
NATHANIEL L SNYDER			EDUCATION	
CHADRON STATE COLLEGE ALLIANCE NE 69301	NONE			500
KYLEE V STANLEY			EDUCATION	
UNIVERSITY OF NE MEDICAL CENTER ALLIANCE NE 69301	NONE			500
KIRSTEN E SWANSON			EDUCATION	
COLORADO STATE UNIVERSITY ALLIANCE NE 69301	NONE			500
AMY L WATSON			EDUCATION	
UNIVERSITY OF NEBRASKA ALLIANCE NE 69301	NONE			500
SARA M WATSON			EDUCATION	
UNIVERSITY OF NEBRASKA ALLIANCE NE 69301	NONE			500
KATHERINE M HUGHART			EDUCATION	
CHADRON STATE COLLEGE CRAWFORD NE 69339	NONE			500
AUGUST E DARVEAU			EDUCATION	
SCHOOL OF AUTOMOTIVE MACHINISTS ALLIANCE NE 69301	NONE			500
				0
Total			3a	12,245
b <i>Approved for future payment</i>				
				0
				0
				0
				0
				0
				0
				0
				0
				0
Total			3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.					
	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____		0		0	0
b _____		0		0	0
c _____		0		0	0
d _____		0		0	0
e _____		0		0	0
f _____		0		0	0
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments		4,026	14		
4 Dividends and interest from securities		1,164	14		
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory				0	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a _____		0		0	0
b _____		0		0	0
c _____		0		0	0
d _____		0		0	0
e _____		0		0	0
12 Subtotal Add columns (b), (d), and (e)		5,190		0	0
13 Total. Add line 12, columns (b), (d), and (e)					

13 **5,190**

(See worksheet in line 13 instructions on page 28 to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- | | Yes | No |
|--|-------|----|
| a Transfers from the reporting foundation to a noncharitable exempt organization of: | | |
| (1) Cash | 1a(1) | |
| (2) Other assets | 1a(2) | |
| b Other transactions: | | |
| (1) Sales of assets to a noncharitable exempt organization | 1b(1) | |
| (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | |
| (3) Rental of facilities, equipment, or other assets | 1b(3) | |
| (4) Reimbursement arrangements | 1b(4) | |
| (5) Loans or loan guarantees | 1b(5) | |
| (6) Performance of services or membership or fundraising solicitations | 1b(6) | |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | |
- d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		

- 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☐ No

- b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer or trustee <u>Darold A. Newblom, Sec. - Treas</u> Date <u>5-6-10</u> Title <u>Sec. - Treas</u>	
	Preparer's signature <u>Karen M. Johnson</u> Date <u>5/5/2010</u>	Check if self-employed <input checked="" type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP code <u>JOHNSON & ASSOCIATES</u> <u>803 BOX BUTTE AVE, ALLIANCE, NE 69301</u>	Preparer's identifying number (see Signature on page 30 of the instructions) <u>507-72-1324</u> EIN <u>80-0001929</u> Phone no. <u>(308) 762-5100</u>

Form **8868**

(Rev. April 2009)

Department of the Treasury
Internal Revenue Service**Application for Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box. ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed)A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns***Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization DAROLD A NEWBLOM FOUNDATION		Employer identification number 36-3696589
	Number, street, and room or suite no. If a P O box, see instructions 1208 LARAMIE AVE		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions ALLIANCE NE 69301		

Check type of return to be filed (file a separate application for each return):

- | | | |
|---|---|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **BANK OF THE WEST DRAWER A ALLIANCE NE ALLIANCE NE 69301**

Telephone No. ▶ **308-762-4400**

FAX No. ▶

- If the organization does not have an office or place of business in the United States, check this box. ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box. ☐ If it is for part of the group, check this box. ☐ and attach a list with the names and EINs of all members the extension will cover.

- I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **8/15/2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ ☒ calendar year **2009** or▶ ☐ tax year beginning _____, and ending _____

- If this tax year is for less than 12 months, check reason. ☐ Initial return ☐ Final return ☐ Change in accounting period

3 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	41
b If this application is for Form 990-PF or 990-T, enter any refundable credits and 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, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	41

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 4-2009)

(HTA)

Line 16b (990-PF) - Accounting Fees

		470	0	470	0
	Name of Organization or Person Providing Service	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	JOHNSON & ASSOCIATES	470		470	
2					
3					
4					
5					
6					
7					
8					
9					
10					

Line 18 (990-PF) - Taxes

		95	75	20	0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Real estate tax not included in line 20				
2	Tax on investment income	75	75		
3	Income tax				
4	Occupation tax	20		20	
5					
6					
7					
8					
9					
10					

Line 23 (990-PF) - Other Expenses

		3,867	3,075	3,867	0
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Amortization. See attached statement	0	0	0	0
2	Fund Raising				
3	SUPPLIES				
4	CONSULTING FEE	1,500	1,500	1,500	
5	SELECTION COMMITTEE EXPENSE	785		785	
6	FEES	1,575	1,575	1,575	
7	SCHOLARSHIPS				
8	GRANTS				
9	MISCELLANEOUS				
10	ADVERTISING	7		7	

Part II, Line 10b (990-PF) - Investments - Corporate Stock

		Num. Shares/ Face Value	Book Value Beg. of Year	Book Value End of Year	FMV Beg. of Year	FMV End of Year
1	SEE ATTACHMENT		41,440	88,135	34,527	89,897
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						

Part II, Line 10c (990-PF) - Investments - Corporate Bonds

	Description	Interest Rate	Maturity Date	Book Value Beg. of Year	Book Value End of Year	FMV Beg. of Year	FMV End of Year
1	SEE ATTACHMENT			54,618	0	35,719	0
2	TREASURY BOND			49,531	0	50,594	0
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							

104,149 0 86,313 0

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

Long Term CG Distributions													Amount	
Short Term CG Distributions													0	
	Kind(s) of Property Sold	CUSIP #	How Acquired	Date Acquired	Date Sold	Totals	Gross Sales Price	Depreciation Allowed	Cost or Other Basis Plus Expense of Sale	Gain or Loss	F M V as of 12/31/69	Adjusted Basis as of 12/31/69	Excess of FMV Over Adj Basis	Gains Minus Excess of FMV Over Adjusted Basis or Losses
1	APPLE INC CM		P	4/21/2006	5/21/2009		377		202	175			0	-175
2	BMC SOFTWARE INC COM		P	2/28/2008	5/21/2009		379		356	23			0	23
3	BOEING CO COM		P	2/28/2008	5/21/2009		308		583	-275			0	-275
4	BRISTOL MYERS SQUIBB CO COM		P	4/21/2006	6/3/2009		2		0	2			0	2
5	CITIGROUP INC COM		P	4/21/2006	3/3/2009		64		981	-917			0	-917
6	COLGATE PALMOLIVE CO COM		P	2/28/2008	5/21/2009		448		544	-96			0	-96
7	CONOCOPHILLIPS COM		P	11/28/2006	5/21/2009		863		1,349	-486			0	-486
8	DANAHER CORP COM		P	11/28/2006	5/21/2009		294		362	-68			0	-68
9	EXPRESS SCRIPTS INC COM		P	8/13/2007	5/21/2009		351		300	51			0	51
10	EXXON MOBIL CORP COM		P	2/28/2008	5/21/2009		282		358	-76			0	-76
11	FRANKLIN RES INC COM		P	4/21/2006	5/21/2009		887		1,354	-467			0	-467
12	GILEAD SCIENCES INC COM		P	4/21/2006	5/21/2009		389		292	97			0	97
13	INTEL CORP COM		P	2/23/2004	5/21/2009		153		292	-139			0	-139
14	ITT CORP NEW COM		P	2/23/2004	5/21/2009		326		305	21			0	21
15	JOHNSON & JOHNSON COM		P	4/21/2006	5/21/2009		613		641	-28			0	-28
16	METLIFE INC COM		P	4/21/2006	5/21/2009		606		1,002	-396			0	-396
17	MFS INSTITUTIONAL EQUITY		P	8/13/2007	3/9/2009		1,870		4,026	-2,156			0	-2,156
18	MFS INTL NEW DISCOVERY		P	8/13/2007	3/9/2009		917		2,618	-1,701			0	-1,701
19	MICROSOFT CORP COM		P	11/28/2006	5/21/2009		814		1,094	-280			0	-280
20	PHILIP MORRIS INTL INC COM		P	4/21/2006	5/21/2009		340		299	41			0	41
21	TEXAS INSTRUMENTS INC COM		P	4/21/2006	5/21/2009		601		1,257	-656			0	-656
22	UNITEDHEALTH GROUP INC COM		P	4/21/2006	12/17/2009		15		0	15			0	15
23	FEDERAL NATL MTG ASSN MED TERM		P	6/24/2004	4/29/2009		50,000		49,531	469			0	469
24	WESTERN HERITAGE CU CD		P	7/1/2005	1/2/2009		20,000		20,000	0			0	0
25	WESTERN HERITAGE CU CD		P	7/1/2005	10/15/2009		60,000		60,000	0			0	0

7

[illegible]

Part

	0	0	0	0
	Compensation	Benefits	Expense Account	Explanation
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Statement of Account

January 1, 2009 to December 31, 2009

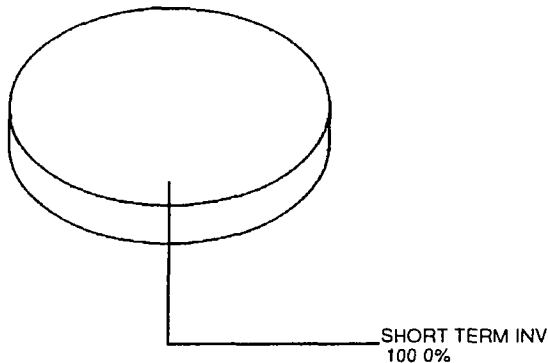
Account Name: Darold Newblom (Fixed Income) Agency
Account Number: 61-C431-01-4

Administrator Joan D Wrolstad
 (701) 293-2321
 Toll Free Number
 (888) 222-1003

Recipient DAROLD NEWBLOM FOUNDATION
 C/O WALLY SEILER, SEC-TREAS
 1208 LARAMIE AVE
 ALLIANCE NE 69301

Investment Objective: No Investment Duty

	Market Value	Percent
Short Term Inv	152,888.79	100.0%
Market Value	152,888.79	100.0%
Total Portfolio Value Plus Accrued Income	153,514.32	



Activity Summary

Market Value At Beginning of Period	164,593.63
Receipts and Income	4,565.94
Expenses and Disbursements	-15,676.78
Realized Gain/Loss	468.75
Unrealized Gain/Loss	-1,062.75
Market Value At End of Period	152,888.79

For Your Information

SECURITY PRICES CONTAINED IN THIS STATEMENT ARE OBTAINED FROM THE MOST RELIABLE SOURCES AVAILABLE BUT ARE NOT GUARANTEED BY BANK OF THE WEST. QUOTED PRICES MAY NOT EQUAL ACTUAL PRICES BECAUSE OF SECURITY SIZE, MARKET PRICE, TERM AND DEMAND.



Statement of Account

January 1, 2009 to December 31, 2009

 Account Name: Darold Newblom (Fixed Income) Agency
 Account Number: 61-C431-01-4

Short Term Investments

Description	Shares	Total Market Total Cost	Market Price Cost Price	Est Ann Inc Accrued Inc	Yld To Mat Curr Yld
Principal Cash		0 00 0 00			
Income Cash		0 00 0 00			
Goldman Sachs Fin Sq MMF #474	112,888 790	112,888 79 112,888 79	1 00 1 00	31 8 51	0 03
Western Heritage Credit Union, Alliance NE C/D #231160/7 3.060% Dtd 01/07/2009 Due 01/07/2010	40,000 000	40,000 00 40,000 00	1 00	1,224 617 02	3 06
Total Short Term Investments		152,888.79 152,888.79		1,255 625.53	0.82

Statement of Account

January 1, 2009 to December 31, 2009

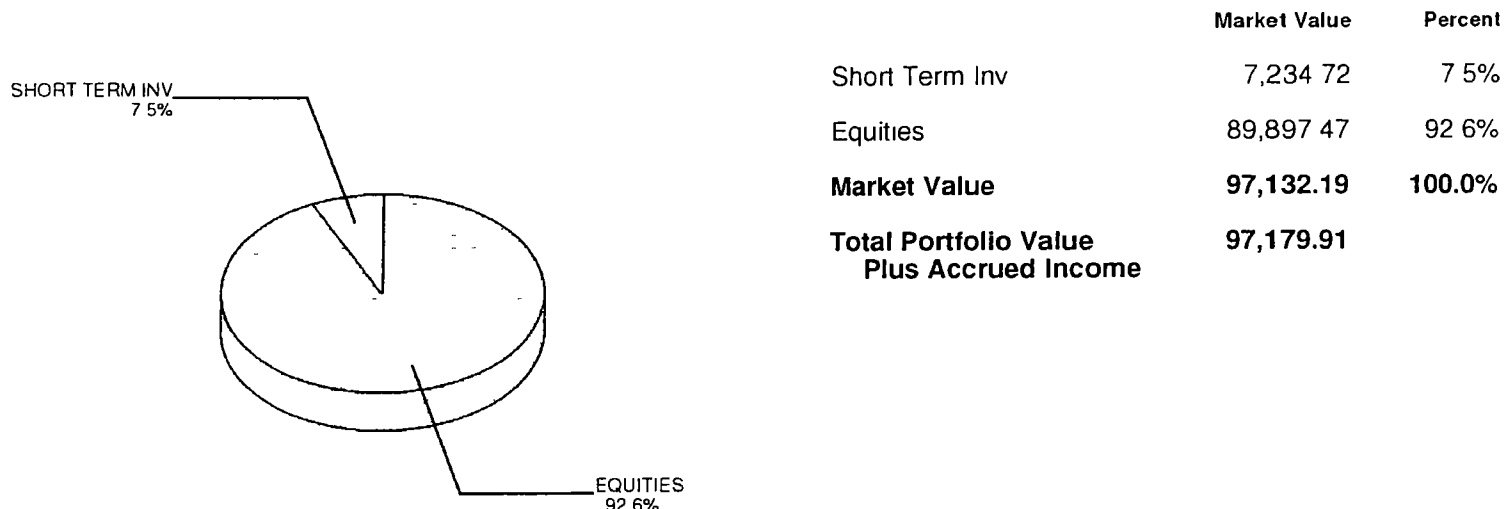
Account Name: Darold Newblom (Equities) Fndn AGCY
Account Number: 61-C432-01-2

Administrator Joan D Wrolstad
 (701) 293-2321
 Toll Free Number
 (888) 222-1003

Investment Representative Michael Neunsinger
 (701) 293-2315

Recipient DAROLD NEWBLOM FOUNDATION
 C/O WALLY SEILER, SEC-TREAS
 1208 LARAMIE AVE
 ALLIANCE NE 69301

Investment Objective: Equity Management



Activity Summary

Market Value At Beginning of Period	77,249.18
Receipts and Income	1,202.09
Expenses and Disbursements	-1,577.77
Asset Changes	0.00
Realized Gain/Loss	-7,315.74
Unrealized Gain/Loss	27,574.43
Market Value At End of Period	97,132.19

For Your Information

SECURITY PRICES CONTAINED IN THIS STATEMENT ARE OBTAINED FROM THE MOST RELIABLE SOURCES AVAILABLE BUT ARE NOT GUARANTEED BY BANK OF THE WEST. QUOTED PRICES MAY NOT EQUAL ACTUAL PRICES BECAUSE OF SECURITY SIZE, MARKET PRICE, TERM AND DEMAND.



Statement of Account
January 1, 2009 to December 31, 2009
Account Name: Darold Newblom (Equities) Fndn AGCY
Account Number: 61-C432-01-2

Short Term Investments

Description	Shares	Total Market Total Cost	Market Price Cost Price	Est Ann Inc Accrued Inc	Yld To Mat Curr Yld
Principal Cash		0 00 0 00			
Income Cash		0 00 0 00			
Goldman Sachs Fin Sq MMF #474	7,145 060	7,145 06 7,145 06	1 00 1 00	1 0 53	0 03
Goldman Sachs Fin Sq MMF #474 (Invested Income)	89 660	89 66 89 66	1 00 1 00		0 03
Total Short Term Investments		7,234.72 7,234.72		1 0.53	0.03

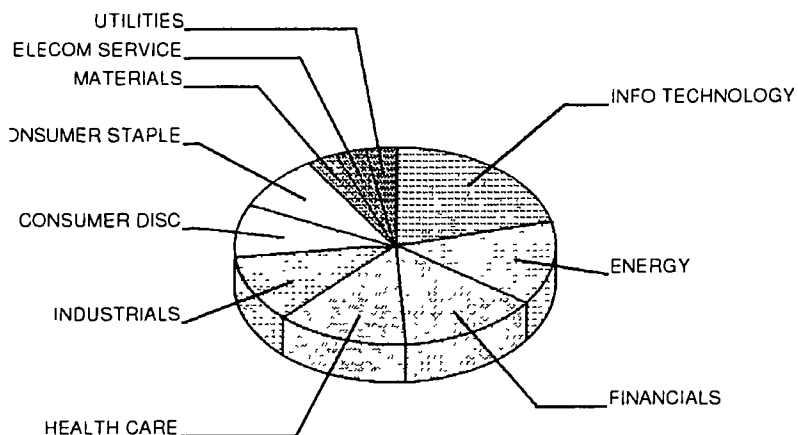
Statement of Account

January 1, 2009 to December 31, 2009

 Account Name: Darold Newblom (Equities) Fndn AGCY
 Account Number: 61-C432-01-2

Common Stock Diversification Summary
Investment Objective: Equity Management

Industry Sector	Market Value	Percent
Consumer Disc	4,031.58	9.4%
Consumer Staple	3,834.65	8.9%
Energy	6,003.52	14.0%
Financials	6,057.61	14.1%
Health Care	5,743.31	13.4%
Industrials	4,839.65	11.3%
Info Technology	8,862.09	20.7%
Materials	1,286.21	3.0%
Telecom Service	1,143.37	2.7%
Utilities	1,106.74	2.6%
Total	42,908.73	100.0%
<i>Equity Funds</i>	<i>46,988.74</i>	
	<i>89,897.47</i>	


Equities

Description	Shares	Total Market Total Cost	Market Price Cost Price	Est Ann Inc Accrued Inc	Current Yield
Consumer Discretionary					
Best Buy Inc Com	10 000	394 60 193 06	39 46 19 31	5 1 40	1 42
Coach Inc Com	17 000	621 01 599 08	36 53 35 24	5	0 82
Disney Walt Co Com	28 000	903 00 803 09	32 25 28 68	9 9 80	1 09
Gamestop Corp New Cl A	10 000	219 40 209 20	21 94 20 92		
Nike Inc Cl B	10 000	660 70 480 66	66 07 48 07	10 2 70	1 63
Starbucks Corp Com	22 000	507 32 415 72	23 06 18 90		
Target Corp Com	15 000	725 55 578 09	48 37 38 54	10	1 41
Total Consumer Discretionary		4,031.58 3,278.90		39 13.90	



Statement of Account
January 1, 2009 to December 31, 2009
Account Name: Darold Newblom (Equities) Fndn AGCY
Account Number: 61-C432-01-2

Equities

Description	Shares	Total Market Total Cost	Market Price Cost Price	Est Ann Inc Accrued Inc	Current Yield
Consumer Staples					
CVS Caremark Corp Com	19 000	611 99 767 91	32 21 40 42	5	0 95
Pepsico Inc Com	17 000	1,033 60 547 48	60 80 32 21	30 7 65	2 96
Procter & Gamble Co Com	22 000	1,333 86 1,060 99	60 63 48 23	38	2 90
Wal Mart Stores Inc Com	16 000	855 20 841 94	53 45 52 62	17 4 36	2 04
Total Consumer Staples		3,834.65 3,218.32		90 12.01	
Energy					
Apache Corp Com	10 000	1,031 70 751 70	103 17 75 17	6	0 58
Baker Hughes Inc Com	15 000	607 20 1,171 95	40 48 78 13	9	1 48
Exxon Mobil Corp Com	20 000	1,363 80 944 57	68 19 47 23	33	2 46
National Oilwell Varco Inc	18 000	793 62 622 24	44 09 34 57		
Noble Energy Inc Com	15 000	1,068 30 822 67	71.22 54 85	10	1 01
Occidental Pete Corp Com	14 000	1,138 90 1,111 41	81 35 79 39	18 4 62	1 62
Total Energy		6,003.52 5,424.54		76 4.62	
Financials					
AFLAC Inc Com	18 000	832 50 630 20	46 25 35 01	20	2 42
Goldman Sachs Group Inc Com	3 000	506 52 321 74	168 84 107 25	4	0 83
Intercontinentalexchange Inc Com	5 000	561 50 565 93	112 30 113 19		

Statement of Account
January 1, 2009 to December 31, 2009
Account Name: Darold Newblom (Equities) Fndn AGCY
Account Number: 61-C432-01-2

Equities

Description	Shares	Total Market Total Cost	Market Price Cost Price	Est Ann Inc Accrued Inc	Current Yield
Invesco LTD	58 000	1,362 42 886 76	23 49 15 29	23	1 75
Nyse Euronext Com	14 000	354 20 723 03	25 30 51 65	16	4 74
Prudential Finl Inc Com	12 000	597 12 392 65	49 76 32 72	8	1 41
Suntrust Bks Inc Com	27 000	547 83 495 89	20 29 18 37	1	0 20
Wells Fargo & Co New Com	48 000	1,295 52 1,175 35	26 99 24 49	9	0 74
Total Financials		6,057.61 5,191.55		81	
Health Care					
Abbott Laboratories Com	18 000	971 82 981 56	53 99 54 53	28	2 96
Bard C R Inc Com	5 000	389 50 480 93	77 90 96 19	3	0 87
Biogen IDEC Inc Com	13 000	695 50 730 80	53 50 56 22		
Express Scripts Inc Com	8 000	691 36 311 17	86 42 38.90		
Gilead Sciences Inc Com	11 000	475 97 357 16	43 27 32 47		
McKesson Corp Com	12 000	750 00 592 80	62 50 49 40	5 1 44	0 77
Medtronic Inc Com	10 000	439 80 350 17	43 98 35 02	8	1 86
Mylan Labs Inc Com	30 000	552 90 398 12	18 43 13 27		
Stryker Corp Com	5 000	251 85 327 54	50 37 65 51	3 0 75	1 19



Statement of Account
January 1, 2009 to December 31, 2009
Account Name: Darold Newblom (Equities) Fndn AGCY
Account Number: 61-C432-01-2

Equities

Description	Shares	Total Market Total Cost	Market Price Cost Price	Est Ann Inc Accrued Inc	Current Yield
Wellpoint Inc Com	9 000	524 61 430 71	58 29 47 86		
Total Health Care		5,743.31 4,960.96		47 2.19	
Industrials					
Danaher Corp Com	7 000	526 40 229 99	75 20 32 86	1 0.28	0 21
Emerson Elec Co Com	14 000	596 40 685 18	42 60 48 94	18	3 15
Expeditors Intl Wash Inc Com	6 000	208 62 197 19	34 77 32 87	2	1 09
Fedex Corp Com	6 000	500 70 696 24	83 45 116 04	2 0 66	0 53
Flowserve Corp Com	4 000	378 12 282 64	94 53 70 66	4 1 08	1 14
General Elec Co Com	36 000	544 68 1,429 75	15 13 39 72	14 3 60	2 64
ITT Corp New Com	11 000	547 14 361 88	49 74 32 90	9 2 33	1 71
Jacobs Engr Group Inc Com	7 000	263 27 279 29	37 61 39 90		
Precision Castparts Corp Com	4 000	441 40 323 84	110 35 80 96		0 11
United Technologies Corp Com	12 000	832 92 341 73	69 41 28 48	18	2 22
Total Industrials		4,839.65 4,827.73		68 7.95	
Information Technology					
Altera Corp Com	22 000	497 86 336 73	22 63 15 31	4	0 88
Apple Inc Com	10 000	2,107 32 673 30	210 73 67 33		

Statement of Account
January 1, 2009 to December 31, 2009
Account Name: Darold Newblom (Equities) Fndn AGCY
Account Number: 61-C432-01-2

Equities

Description	Shares	Total Market Total Cost	Market Price Cost Price	Est Ann Inc Accrued Inc	Current Yield
BMC Software Inc Com	11 000	441 10 356 15	40 10 32 38		
Cisco Sys Inc Com	43 000	1,029 42 1,382 74	23 94 32 16		
Cognizant Tech Solutions Crp Com	16 000	725 28 660 93	45 33 41 31		
Google Inc Cl A	1 000	619 98 473 01	619 98 473 01		
Hewlett Packard Co Com	13 000	669 63 426 79	51 51 32 83	4 1 04	0 62
Intel Corp Com	32.000	652 80 672 30	20 40 21 01	17	2 75
Mastercard Inc Cl A	2 000	511 96 343 56	255 98 171 78	1	0 23
Microchip Technology Inc Com	19 000	551 95 394 14	29 05 20 74	25	4 68
Oracle Corp Com	43 000	1,054 79 815 77	24 53 18 97	8	0 82
Total Information Technology		8,862.09 6,535.42		59 1.04	
Materials					
Air Prods & Chems Inc Com	3 000	243 18 193 02	81 06 64 34	5 1 35	2 22
Allegheny Technologies Inc Com	6 000	268.62 436 72	44 77 72 79	4	1 61
Du Pont E I De Nemours & Co Com	23 000	774 41 1,091 90	33 67 47 47	37	4 87
Total Materials		1,286.21 1,721.64		46 1.35	



Statement of Account

January 1, 2009 to December 31, 2009

Account Name: Darold Newblom (Equities) Fndn AGCY
Account Number: 61-C432-01-2

Equities

Description	Shares	Total Market Total Cost	Market Price Cost Price	Est Ann Inc Accrued Inc	Current Yield
Telecommunication Services					
American Tower Corp Cl A	7 000	302 47 227 79	43 21 32 54		
AT&T Inc Com	30 000	840 90 772 74	28 03 25 76	50	5 99
Total Telecommunication Services		1,143.37 1,000.53		50	
Utilities					
Exelon Corp Com	14 000	684 18 819 04	48 87 58 50	29	4 30
FPL Group Inc Com	8 000	422 56 390 58	52 82 48 82	15	3 58
Total Utilities		1,106.74 1,209.62		44	
Equity Funds					
Accessor Small To Mid Cap Fund-Instl	580 653	14,121 48 13,306 09	24 32 22 92	76	0 54
Accessor Strategic Alternatives Fund Instl	646 933	7,381 51 7,833 72	11 41 12 11	65	0 89
JP Morgan Emerging Markets Equity Fund - Ins	260 435	5,458 72 2,791 86	20 96 10 72	22	0 41
Mfs Institutional Equity Fd #403	775 022	12,702.61 16,076 82	16 39 20 74	220	1 74
Mfs Intl New Discovery Fund Instl	352.225	6,544 34 9,887 79	18 58 28 07	84	1 29
Spdr Tr Unit Ser 1 Standard & Poors	7 000	780 08 869 63	111 44 124 23	16 4 13	2 12
Total Equity Funds		46,988.74 50,765.91		483 4.13	
Total Equities		89,897.47 88,135.12		1,083 47.19	1.23

DAROLD A. NEWBLOM FOUNDATION

Application for Grant – Form A (Individuals)

TO: Board of Directors
Darold A. Newblom Foundation
P.O. Box A
Alliance, Nebraska 69301

NOTE: If insufficient space is provided on this form, please attach additional pages as necessary to furnish the information requested.

Applicant's Name_____

Home Address_____

Street or P.O. Box City, State, Zip

Telephone No: Home_____Business_____

Date of Birth_____Occupation_____

Date Graduated from High School_____

Degrees Received in College_____

List any special honors and awards received at any time:

1. Show the amount requested and explain in detail how it will be used.
Give separate amounts for tuition, books and supplies, travel, etc.

2. Have you ever received a grant from this Foundation previously? If so, when and for what amount?

3. State whether you are receiving other funds (scholarships, student loans, etc.) for the same purpose for which this grant application is submitted. If so, from whom and in what amounts?

4. Give beginning and ending dates of the academic year during which the funds will be used, and furnish information as to where and when grant funds should be paid.

5. Give the following financial information to show financial need.

Applicant's Net Worth \$ _____

Married: Yes _____ No _____ Separated or Divorced _____

If "Yes", is spouse employed: Yes _____ No _____

Approximate annual net earnings: \$ _____

All dependents (give number and ages): _____

Will you be employed or receiving income from any other source?

_____ If so, give source and approximate amount annually.

Give any other information and describe any special circumstances showing financial need.

6. With this application, please submit an original transcript of your high school grades (if you are not yet in college) or your college grades (if you have previously attended, or are currently attending, college). In addition, furnish at least one letter of recommendation from an appropriate adult. You must also provide a personal letter in which, among other things, you tell of your long-term educational and career goals and the manner in which you plan to finance the achievement of those goals besides a grant which might be provided to you by the Darold A. Newblom Foundation.

Under penalties of perjury, the undersigned certifies that the information furnished in this Application is true and complete, and that the undersigned agrees to comply with all policies of the Foundation for the use of any funds granted pursuant to this Application, as such policies are set forth in the "Statement of Policies and Procedures" of the Foundation, a copy of which has been furnished to the undersigned.

Dated: _____
Signature

DAROLD A. NEWBLOM FOUNDATION

Application for Grant – Form B (Organizations)

TO: Board of Directors
Darold A. Newblom Foundation
P.O. Box A
Alliance, Nebraska 69301

NOTE: If insufficient space is provided on this form, please attach additional pages as necessary to furnish the information requested.

Applicant's Name _____ Telephone No. _____

Address _____
Street or P.O. Box City, State, Zip

Give name, address and telephone number of person who will be overseeing the project for which the grant is being requested.

Name _____ Telephone No. _____

Address _____
Street or P.O. Box City, State, Zip

1. If an organization other than a political subdivision or governmental agency, please answer the following:

Have you received a determination letter from the Internal Revenue Service as to:

	Yes	No
(a) Exempt status as a 501(c) (3) organization	_____	_____
(b) Private foundation status	_____	_____
(c) Grant-making procedure	_____	_____

Attach photocopies of any such determination letters. If you answered "No" to all three, please explain why your organization would be qualified for a grant.

2. Describe the applicant's purposes and activities in general.

3. Give the name, address and title of each member of the applicant's governing board.

4. Have you ever received a grant from this Foundation previously? If so, when and in what amount?

5. Show the amount requested and explain in detail how it will be used. State whether the grant is to be earmarked for the use or benefit of any one person, group, or class of people. If so, for whom?

6. Give starting and ending dates of the program for which funds are to be used.

7. Please supply a proposed budget of your organization for the period during which the funds will be used, showing all receipts for the project or program (grants, public donations, gifts from individuals or other organizations, etc.) and all estimated disbursements for such project or program (wages and salaries, payroll taxes, supplies, equipment, rent, postage, utilities, telephone, travel, etc.). If the grant for which this application is submitted is to be used for a limited purpose within a broader program, please identify that portion of receipts and disbursements germane to such limited purpose. (Attach proposed budget).

Under penalties of perjury, the undersigned certifies that the information furnished in this Application is true and complete, and that the Applicant agrees to comply with all policies of the Foundation for the use of any funds granted pursuant to this Application, as such policies are set forth in the "Statement of Policies and Procedures" of the Foundation, a copy of which has been furnished to the undersigned.

Dated: _____
_____ Applicant

By _____

Title _____