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Form **990-EZ**

Department of the Treasury Internal Revenue Service

For the 2009 calendar year, or tax year beginning

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

and ending

06/30/10

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

07/01/09

2009

OMB No 1545-1150

Open to Public Inspection

Name of organization Employer identification number Check if applicable Please use IRS Address change label or 47-0629493 NEBRASKA TRUCKING FOUNDATION INC. Name change print or Telephone number Number and street (or P O box, if mail is not delivered to street address) Room/suite Initial return type. See 402-476-8504 1701 'K' STREET Termination Specific **Group Exemption** City or town, state or country, and ZIP + 4 Amended return Instruc-LINCOLN NE 68508 Number Application pending tions Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach X G Accounting method a completed Schedule A (Form 990 or 990-EZ). Other (specify) N/A Check ▶ if the organization is not Website: ▶ required to attach S 990-EZ, or 990-PF) Schedule B (Form 990, 4947(a)(1) or 527 X 501(c) (3) **◀** (insert no) Tax-exempt status (check only one) -If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ 28,578 Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) 1,450 Contributions, gifts, grants, and similar amounts received 1 2 2 Program service revenue including government fees and contracts 3 3 Membership dues and assessments 26,657 4 Investment income 471 5a Gross amount from sale of assets other than inventory 5b Less cost or other basis and sales expenses 5c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) See Stmt Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here of contributions Gross revenue (not including \$ reported on line 1) 6a 6b Less direct expenses other than fundraising expenses Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6c c Gross sales of inventory, less returns and allowances 7a 7a 7b b Less cost of goods sold Gross profit or (loss) from sales of invention 7c C 8 Other revenue (describe 8 28,578 9 Total revenue. Add lines 1, 2, 3, 4, 5¢ 9 Grants and similar amounts paid (attach schedule) Stmt 10 10 11 Benefits paid to or for members 11 12 12 Salaries, other compensation, and employee benefits 1,050 13 13 Professional fees and other payments to independent contractors 14 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 15 16 Other expenses (describe 16 22,300 17 Total expenses. Add lines 10 through 16 17 CIB 18 6,278 Excess or (deficit) for the year (Subtract line 17 from line 9) Æ Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 612,499 end-of-year figure reported on prior year's return) 19 See Statement 3 23,696 **20**a Other changes in net assets or fund balances (attach explanation) 20 642,473 21 Net assets or fund balances at end of year. Combine lines 18 through 20 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (A) Beginning of year (B) End of year (See the instructions for Part II) 612,459 642,473 22 Cash savings, and investments 22 Landand buildings 23 See Statement 4 40 Other assets (describe . 24 612,499 642,473 Total ássets 25 Total liabilities (describe 26 612,499 642,473 Net assets or fund balances (line 27 of column (B) must agree with line 21)

Form 990-EZ (2009)

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2009) NEBRASKA TRUCKING FOUNDATION	INC. 47	-0629493			Р	age 2
Part III Statement of Program Service Accomplishments (S	See the instruct	ions for Part III	.)]	Expenses	
What is the organization's primary exempt purpose?					ed for section	
SUPPORT OF PROGRAMS RELATED TO THE MOTOR CARRIERS INDUSTRY				501(c)(3) and 501(c)(4)	
Describe what was achieved in carrying out the organization's exempt purposes. In a continuous				organiz	ations and section	on
manner, describe the services provided, the number of persons benefited, or other rela	evant information fo	r		4947(a)	(1) trusts, optior	nal
each program title		.		for othe	<u>rs)</u>	
28 PROGRAMS TO SUPPORT MOTOR CARRIERS INDUSTRY, INCLUDING						
SCHOLARSHIPS						
			<u></u> -	1 1		
(Grants \$ 21,250) If this amount includes foreign grants, che	eck here			28a	21,	525
29						
			<u></u>			
(Grants \$) If this amount includes foreign grants, che	eck here	<u>_</u>		29a		
30				1		
(Const. C.) If the amount includes foreign and a short	al bass	_	<u>Γ</u>	200		
(Grants \$) If this amount includes foreign grants, che	eck nere	<u></u>	<u> </u>	30a		
 31 Other program services (attach schedule) (Grants \$) If this amount includes foreign grants, che 	ock here		\Box	31a		
32 Total program service expenses (add lines 28a through 31a)	eck fiere		<u></u> _	32	21,	525
Part IV List of Officers, Directors, Trustees, and Key Employees. List each	ch one even if not co	mnensated (See t	he in			<u> </u>
Taxe to Chicoro, Director, Tracticos, and Ney Employees. Edit date	(b) Title and average	(c) Compensation	(d)	Contributions t	(e) Expens	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0)		oyee benefit plan rred compensati		
AL HINGST	DIRECTOR	,				
	2.00				0	c
BOB CLARK	PRESIDENT					
	2.00	<u> </u>			o	c
RICK GOMEL	SECR/TREAS					
	2.00	0			0	0
GREG REITMEIER	ASST SECR/TR	RAS				
	2.00	<u> </u>			0	
TREVOR ADEN	DIRECTOR				ĺ	
	2.00	0			0	0
LARRY JOHNSON	DIRECTOR					
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DAA		l	<u> </u>		Form 990-EZ	(2000
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Form 990-EZ (2009)

٣a	It V Other Information (Note the statement requirements in the instructions for	Part V.)			
				Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed				v
	description of each activity		33		<u> </u>
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of		34	İ	x
	the changes	ronorted	34		
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not	reported		-	
	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			Ī	
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section		35a		x
	6033(e) notice, reporting, and proxy tax requirements?		35b		
b	If "Yes," has it filed a tax return on Form 990-T for this year?		335		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets		36		х
A7-	during the year? If "Yes," complete applicable parts of Schedule N Enter amount of political expenditures, direct or indirect, as described in the instr	. 1	- 55		
37a		-	37ь	1	х
b 	Did the organization file Form 1120-POL for this year? Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or wer	a	37.0		
38a	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	5	38a		х
	-		000		
20 20					É
39	Section 501(c)(7) organizations Enter. Initiation fees and capital contributions included on line 9 398				Ė
a	Gross receipts, included on line 9, for public use of club facilities 391				
b 40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under	·			É
→ ∪d	section 4911 > ; section 4912 ; section 4915 > ; section 4955				Ė
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefits	it			É
	transaction during the year or is it 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 Schedule L, Part I		40b		х
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on				
•	organization managers or disqualified persons during the year under sections 4912,				Ė
	4955, and 4958				ĺ
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c				
	reimbursed by the organization				
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter				
	transaction? If "Yes," complete Form 8886-T		40e		X
41	List the states with which a copy of this return is filed None				
42a	The organization's books are in care of ► KEITH NESJA 1701 K STREET		-47	6-8	504
	Located at LINCOLN, NE	ZIP+4 ▶ 685	808		
b	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			Yes	No
	account)?		42b	ļ	X
	If "Yes," enter the name of the foreign country				l
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank				
	and Financial Accounts.		42-	•	х
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		42c	Щ.	
40	If "Yes," enter the name of the foreign country.				▶ [
43	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-EZ in lieu of Form 1041—Check here	▶ 43			
	and enter the amount of tax-exempt interest received or accrued during the tax year	F [43]	···········		
				Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of				
	Form 990-EZ		44	L '	x
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If		ı,		
	"Yes," Form 990 must be completed instead of Form 990-EZ		45_	<u> </u>	<u> </u>
			00	10 E Z	(2009)

Form **990-EZ** (2009)

Form	1 990-EZ (2009) NEBRASKA TRUCKING FOUNDATION		<u>-0629493</u>			Page 4
Pa	art VI Section 501(c)(3) organizations and section 4947(a					
	501(c)(3) organizations and section 4947(a)(1) nonex	cempt charitable	e trusts must a	nswer question	is 46-4	9b
	and complete the tables for lines 50 and 51.					
46	Did the organization engage in direct or indirect political campaign activities on t	pehalf of or in opposi	tion to		Y	es No
	candidates for public office? If "Yes," complete Schedule C, Part I				46	X
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule	C, Part II			47	X
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If		hedule E		48	X
49a	Did the organization make any transfers to an exempt non-charitable related org				49a	X
b	If "Yes," was the related organization a section 527 organization?	•			49b	
50	Complete this table for the organization's five highest compensated employees	(other than officers.	directors, trustees	and kev		
•	employees) who each received more than \$100,000 of compensation from the					
	(a) Name and address of each employee paid more	(b) Title and average	(c) Compensation	(d) Contributions to	(e) E	
	than \$100,000	hours per week devoted to position		employee benefit plans & deferred compensation		nt and owances
None	Δ	COVERED TO POSICION				
HOIL	G	1			ļ	
				 		
		1				
	 					
		-	 -			
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		1			1	
	Total number of other employees paid over \$100,000	<u> </u>	<u>!</u>	1	·	
				_		
	\$100,000 of compensation from the organization. If there is none, enter "None" (a) Name and address of each independent contractor paid more than \$100,000		Type of service	(c) C	ompensat	ion
No	one					
		1				
d	Total number of other independent contractors each receiving over \$100,000	•				
	,					
	Under penalties of perjury, I declare that I have examined this return, including a	accompanying schedule	s and statements, an	d to the best of my kno	wledge	
	and belief, it is true confect, and complete Declaration of preparer (other than o	officer) is based on all in	formation of which pr	eparer has any knowle	dge	
Sig	n Cath		11/10	12010		
Her		1.	Date			
	Larry A Johnson Presede	ext				
	Type or print name and title					
	Preparer's 101 0	Date	Check if	Preparer's Ider	itifying Numb	er (See instr)
Pai		11/09	9/10 self- employed	▶□ P0076	7944	
	parer's Firm's name (or your Buckley & Sitzman CPA		- / = of employed)			50235
	e Only of self-employed). 3901 Normal Blvd Ste			Phone	., 55	
	address, and ZIP +4 Lincoln, NE 68506-52				-484	-7676
May	y the IRS discuss this return with the preparer shown above? See instructions			1 10 2 202	Yes	
	, and and another than the property effects above. Occ methodions			<u>_</u>	103	

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No_1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NEBRASKA TRUCKING FOUNDATION INC.

Employer identification number 47 - 0629493

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public X described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated Type III-Other b Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (III) below, the governing body of the supported organization? 11g(i) 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (vi) Is the (i) Name of supported (ii) EIN (III) Type of organization (iv) is the organization (v) Did you notify (vii) Amount of organization in col the organization in (described on lines 1-9 in col (i) listed in your support organization col. (i) of your (i) organized in the above or IRC section governing document? support? (see instructions)) Yes Yes No Yes

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Total

Page 2

Schedule A (Form 990 or 990-EZ) 2009 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 1 Gifts, grants, contributions, and membership fees received. (Do not 1,720 1,450 470 36,550 5,850 46.040 include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 470 5,850 1,720 1,450 46,040 Total. Add lines 1 through 3 36,550 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 46,040 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 470 36,550 5,850 1,720 1,450 46,040 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 20,946 25,443 28,474 21,859 26,657 123,379 sources Net income from unrelated business activities, whether or not the business is O regularly carried on Other income Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 169,419 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 27.18% Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2008 Schedule A, Part II, line 14 15 15 28.62% 33 1/3 % support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box 16a and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

18

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NEBRASKA TRUCKING FOUNDATION INC.

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Schedule A (Forth 990 or 990-EZ) 2009 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support	cked the box	on thice or on y a				
	endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
ou.		(2) 2020	(-,		\ <u></u>		
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5				ļ		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year		 				
C	Add lines 7a and 7b					1	
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support		1	1	/ n 0000	() 0000	(A) Takal
	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6				 -		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b			ļ. <u> </u>	<u> </u>	-	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop here		second, third, four	th, or fifth tax year	as a section 501(c)(3) 	▶ [
Sec	tion C. Computation of Public Su	ipport Percen	tage				
15	Public support percentage for 2009 (line 8,	column (f) divided	by line 13, column	(f))		15	%
16	Public support percentage from 2008 Sche						%
Sec	tion D. Computation of Investme	nt Income Pe	rcentage				
17	Investment income percentage for 2009 (lir			column (f))		17	%
18	Investment income percentage from 2008					18	%
19a	33 1/3 % support tests—2009. If the organ						, -
	17 is not more than 33 1/3 %, check this bo	-					▶ [
b	33 1/3 % support tests—2008. If the organ						. ┌
	line 18 is not more than 33 1/3 %, check th						?
20	Private foundation. If the organization did	not check a box o	n line 14, 19a, or 1	90, check this box	and see instruction	15	

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Part II, Line 17a - 10% Facts and Circumstance Test - 2008

Based on the original application for exemption, the Internal Revenue

Service (IRS) determined that the organization qualified as a tax-exempt
organization under section 501(a). The IRS also determined that the

Foundation can reasonably be expected to be a publicly supported
organization described in sections 509(a)(1). Under these sections the
support percentage should be at least 331/3 percent to qualify
automatically as a "publicly supported" organization. If the support is
between 10 and 331/3 percent, the organization may qualify as "public" if
facts and circumstances tests in Regulation 1.170A-9(e)(3) are met. The
organization has dropped below the required automatic level for the last
two years, but has continued its attempt to secure additional contribution
support to brings its support percentage to the required level.

471 471 Gain / Loss Depreciation Statement 1 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Other Cost & Expense ₩ 471 471 N3653FDTN NEBRASKA TRUCKING FOUNDATION INC.

Federal Statements Sale Price Date Sold Date Acquired LT CG DISTRIBUTION-INVESTMENT Whom Sold Description FYE: 6/30/2010 Received Total

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Statement 2 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid to Organizations

N3653FDTN NEBRASKA TRUCKING FOUNDATION INC. 47-0629493

FYE: 6/30/2010

				2			
	Name and Address		Class of Activity				
	Date of Gift	Description of Property	Cash Contribution	Noncash Contribution	Book Value	Book Value Explanation	FMV Explanation
SOUTHEAST CO	OMMUNITY COLLEGE	SOUTHEAST COMMUNITY COLLEGE FOUNDAT SCHOLARSHIPS	ARSHIPS 7.650				
301 SOUTH 68TH PLACE	3TH PLACE						

101 SOUTH 68TH PLAC

LINCOLN, NE 68510

METRO COMMUNITY COLLEGE FOUNDATION SCHOLARSHIPS

6,800

PO BOX 3777 - BLDG 32

OMAHA, NE 68103

Total

14,450

N3653FDTN NEBRASKA TRUCKING FOUNDATION INC.

47-0629493

Federal Statements

FYE: 6/30/2010

	Statement 3 - Form 990-EZ, F	Part I, Line 20 - Othe	er Changes in Net Assets o	r Fund Balances
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Description	 Amount
NET UNRALIZED GAIN - INVESTMENTS	\$ 23,696
Total	\$ 23,696

Statement 4 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginning of Year	End of Year
Accounts Receivable	\$ 40	\$
	40	