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DLN: 93493187003090

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2008

Open to Public

Form **990**

Department of the Treasury Internal Revenue Service

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

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

Inspection

Please	### ##################################
Address change Name change Into a print or type. See Intelled return Temmaton Amended return Application pending F Name and address of Principal Officer DEE ANN HANSON 4200 FLOATPLANE DRIVE ANCHORAGE, AK 995241185 I Tax-exempt status	### ##################################
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Time and street (or P O box if mail is not delivered to street address) Room/suite	seturn for Yes No cluded? Yes No a list See instructions) n Number IIII M State of legal domicile AK M State of legal domicile AK Current Year Current Year A 109,530 A 89,108 A 3,354
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Amended return Application pending F Name and address of Principal Officer DEE ANN HANSON 4200 FLO ATPLANE DRIVE ANCHORAGE, AK 99502 I Tax-exempt status 501(c) (3)	Yes Vocal Yes No
Application pending F Name and address of Principal Officer DEE ANN HANSON A200 FLO ATPLANE DRIVE ANCHORAGE, AK 99502 H(b) Are all affiliates? H(c) Group Exempts H(c) Group Exempts	Yes Vocal Yes No
F Name and address of Principal Officer DEE ANN HANSON 4200 FLOATPLANE DRIVE ANCHORAGE, AK 99502 I Tax-exempt status	Yes Vocal Yes No
DEE ANN HANSON 4200 FLOATPLANE DRIVE ANCHORAGE, AK 99502 I Tax-exempt status	Yes Vocal Yes No
A 200 FLO ATPLANE DRIVE ANCHORAGE, AK 99502 H(b) Are all affiliates is (If "No," attach H(c) Group Exempts H(c) H(c) Group Exempts H(c) H(See instructions No a list See instructions
Tax-exempt status	ssets M State of legal domicile AK
Web site: ► WWW ALASKAAIRMEN ORG Web site: ► WWW ALASKAAIRMEN ORG	ssets 3
Part Summary 1 Briefly describe the organization's mission or most significant activities TO PROMOTE AVIATION SAFETY 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its and summer of voting members of the governing body (Part VI, line 1a) 1 1 1 1 1 1 1 1 1	## State of legal domicile AK ## AK AK
Part I Summary 1 Briefly describe the organization's mission or most significant activities TO PROMOTE AVIATION SAFETY 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its and significant activities 3 Number of voting members of the governing body (Part VI, line 1a)	ssets 3
Part I Summary 1 Briefly describe the organization's mission or most significant activities TO PROMOTE AVIATION SAFETY 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its is 3 Number of voting members of the governing body (Part VI, line 1a)	ssets 3
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TO PROMOTE AVIATION SAFETY 2 Check this box If the organization discontinued its operations or disposed of more than 25% of its and 3 Number of voting members of the governing body (Part VI, line 1a)	3
2 Check this box if the organization discontinued its operations or disposed of more than 25% of its and 3 Number of voting members of the governing body (Part VI, line 1a)	3
A Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a)	3
A Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a)	3
A Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) . b Net unrelated business taxable income from Form 990-T, line 34 . Prior Year 8 Contributions and grants (Part VIII, line 1h)	3
A Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) . b Net unrelated business taxable income from Form 990-T, line 34 . Prior Year 8 Contributions and grants (Part VIII, line 1h)	4 14 5 5 6 40 7a 0 7b Current Year 94 109,530 30 489,108 53 3,354
B Net unrelated business taxable income from Form 990-T, line 34	5 5 5 6 40 7a 0 7b Current Year 94 109,530 30 489,108 53 3,354
B Net unrelated business taxable income from Form 990-T, line 34	6 40 7a 0 7b Current Year 94 109,530 30 489,108 53 3,354
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B Net unrelated business taxable income from Form 990-T, line 34	7b Current Year 94 109,530 30 489,108 53 3,354
Prior Year 8 Contributions and grants (Part VIII, line 1h)	Current Year 94 109,530 30 489,108 53 3,354
8 Contributions and grants (Part VIII, line 1h)	109,530 30 489,108 53 3,354
Program service revenue (Part VIII, line 2g)	30 489,108 53 3,354
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,354
Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4)	
Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4)	
12) 717,6 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4)	18 0
14 Benefits paid to or for members (Part IX, column (A), line 4)	601,992
	0
Salaries other compensation employee herefits (Bart IV column (A) lines 5	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-	
137,1	26 139,433
10) 137,1 16a Professional fundraising fees (Part IX, column (A), line 11e) b (Total fundraising expenses, Part IX, column (D), line 25 0	0
(Total fundraising expenses, Part IX, column (D), line 25 0	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 501,8	53 423,546
18 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 638,9	79 562,979
19 Revenue less expenses Subtract line 18 from line 12 78,7	16 39,013
Beginning of Year	End of Year
20 Total assets (Part X, line 16) 639,0	79 662,926
Z1 Total liabilities (Part X, line 26)	315,936
Beginning of Year 20 Total assets (Part X, line 16) 639,0 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 310,4	346,990
Part II Signature Block	,
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, a	d to the best of my knowledge
and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which	reparer has any knowledge
Please sign ****** 2010-07-05 Sign Date	
Here	
DEE HANSON EXECUTIVE DIRECTOR Type or print name and title	
SUPPORTED LANCE A BODEEN 2010-07-06 self-	PTIN (See Gen Inst)
Paid empolyed F	
Preparer's Firm's name (or yours RULIEN ASSOCIATES LLC	
Use Only If self-employed), address, and ZIP + 4 3301 DENALI ST STE 300	
,	
May the IRS discuss this return with the preparer shown above? (See instructions)	► (907) 272-1421

Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization TO PROMOTE AVIATION SAFETY				
2	the prior Form 990 or 99	90-EZ?	ogram services during the year wh	ich were not listed on	es 🔽 No
2		new services on Schedul		ete any program	
3	services? If "Yes," describe these		gnificant changes in how it condu 	· · · · · · · · · · · · · · · · · · ·	es 🗸 No
4	Describe the exempt pui Section 501(c)(3) and (4	rpose achievements for e 4) organizations and 494	ach of the organization's three lar 7 (a)(1) trusts are required to repo r each program service reported		
4a	(Code TO PROVIDE PUBLICATIONS, PLANS, AND TO PROMOTE AV		330,195 including grants of \$ AND OTHER ITEMS TO PROMOTE AVIATIO) (Revenue \$ ON SAFETY, TO ASSIST PILOTS IN DEV) ELOPING SAFE FLIGHT
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program services	s (Describe in Schedule	0)		
	(Expenses \$	including	grants of \$) (Revenue \$)
4e	Total program service e	expenses \$	330,195 Must equal Part IX, Lir	ne 25, column (B).	

art IV	Chec	klist c	of Re	auirea	1 Sche	dules
	CHEC	NIISL L	JI RC	uunet	ı ocne	uuies

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Νο
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		Νο
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		Νο
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 questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		Νο
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
25a	Section 501(c)(3) and 501(c)(4) 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		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		No
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	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		Νο
37	Did the organization conduct more than 5 percent 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		No

	Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance	e			
b Enter the number of Forms Wi-2G included in line 1a. Enter-0- if not applicable c Dut the organization comply with Backup withholding rules for reportable payments to vendors and reportable gamino (gambin) with margin to prize winners? 2a. Enter the number of amployase reported on Form Wi-3, Transmitted of Wage and Tax Steaments filed for the califoration year anding with more within the year occurred by this filed for the califoration year anding with more within the year occurred by the second property of the second					Yes	No
b Enter the number of Forms W-26 included in line 1a. Enter-0-intot applicable c. Due the organization comply with backup withholding rules for reportable payments to evenders and reportable gamming (gambling) winnings to prize winners? 2. Enter the number of employees reported on Form W-3, Transmittel of Wage and Tax Steenwests flied for the calendar year ending with or within the year covered by this return. 3. Die the organization have unrelated business gress income of \$1,000 or more suring the year covered by this work of the sum of lines 1 and 2 as greeter than 250, you may be regioned to efficie this return. 3. Die the organization have unrelated business gress income of \$1,000 or more suring the year covered by this of 17 fees, this is thild a Form 990-T for this year? If 'No 'provide an explanation in Schedule O. 4. At any time during the calendar year, and the organization have an interest in a cale surface of the first section. 5. We shall be sufficient to the sum of the foreign country. 5. If 'Yes,' these the name of the foreign country. 5. If 'Yes,' enter the name of the foreign country. 5. If 'Yes,' the sum of the foreign country. 5. If yes,' the sum of the foreign country. 5. If 'Yes,' to 5 a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 6. If 'Yes,' to 5 a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 6. If 'Yes,' to 5 a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 6. Or the organization profit the organization that it was or is a party to a prohibited tax sheller transaction? 6. Or the organization of the sum of the sum of the year of the value of the goods or services by Tax-Elempt firstly Reparding Prohibited for Sheller Transaction? 6. Or the organization may be a profit to the organization that were not tax deductable? 7. Organizations that may receive deductable contributions under section 179(c). 8. If 'Yes,' did the organiza	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal				
b Enter the number of Forms W-20 included in line 1a Enter-9- find applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming cambing) withing the organization from W-3, Transmitted of Wage and Tax Statements tile for the calcindar year ending with or writhin the year overeid by this 2a 5 5 3a Enter the number of employees reported on Form W-3, Transmitted of Wage and Tax Statements tile for the calcindar year ending with or writhin the year overeid by this 2a 5 5 3b If at least one is reported in 2a, and the organization file all required federal employment tax returns? Noticell fine sum of lines 1a and 2 as is general than 250, you may be required to effect this return. 3b If the significant is a second of the companization of the federal employment tax returns? Noticell fine sum of lines 1a and 2 as is general than 250, you may be required to effect this return. 3b If the significant is the companization of the foreign country over, in familiar than 1 time during the year covered by this return. 3c If the significant is the calcindar year, of the organization have an interest in, or a signature or other authority over, in familiar all calcindar year, of the organization as a bank account, securities account, or other hands of exceptions and filing requirements for Form 1D F 90-22.1, Report of Foreign Bank and interest the country over, in familiar than 1 tiles and the significant of the foreign country over, in familiar than 1 tiles and the significant of the foreign country over, in familiar than 2 prohibited tax shelter transaction? 5c If Yes, in the organization as party to a prohibited tax shelter transaction? 5d If a shelter transaction? 5d If a shelter transaction is party to a prohibited tax shelter transaction? 5d If a shelter transaction? 5d If a shelter transaction is party to a prohibited tax shelter transaction? 5d If a shelter transaction? 5d If a shelter transaction is party to a prohibited tax shelter transact		of U.S. Information Returns. Enter -0- if not applicable				
c Did the organization comply with backup withholding rules for reportable payments to venders and reportable gamming (gambling) winnings to prize winners? 2 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. 3 If It least one is reported in 2a, and the organization file all required federal employment tax returns? 4 Wester file sum of hims Jaird 22 as greater than 120, you may be required to effect the statum. 5 If Yes, "has it filed a Form 99-1 for this year? If No," provide an explanation in Schedule D. 6 If They, "has it filed a Form 99-1 for this year? If No," provide an explanation in Schedule D. 7 If Yes, "enter the name of the foreign country sent the instructions for exceptions and filing requirements for Form 10 F 90-22.1, Report of Foreign Bank and foreign country. Sent the enstructions for exceptions and filing requirements for Form 10 F 90-22.1, Report of Foreign Bank and Foreign Country. 8 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 9 Use the comparization in Clude with every solicitation an express statement that such contributions or gifts were not tax deductible? 1 If Yes," did the organization file organization file from 886 F. Decisive by Yas-Exempt Entity Regarding Prohibited Sec. 11 Yes," and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 Organizations that may receive deductible contributions where exists and the such contribution of 97.5 or more? 10 Organizations that may receive deductible contributions or a specific property of the organization for the value of the goods or services provide? 11 Yes," did the organization motify the done of the value of the goods or services provide? 12 Destite organization and the supporting organization file a Form 1098-C cs. 7h. No. 10 No			1a 0			
sparming (gambing) winnings to prize winners? 2	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			
sparming (gambing) winnings to prize winners? 2	_	L. Did the organization comply with backup withholding rules for reportable payments to	vendors and reportable			
Statements field for the calendar year ending with or within the year covered by this return. b If at least one is reported in 2s, did the organization file all required federal employment tax returns? Notest if he som of hine 2 and 2 as greater than 250, you may be required to effect this return? Notest if he som of hine 2 and 2 as greater than 250, you may be required to effect this return? Notest if he som of hine 2 and 2 as greater than 250, you may be required to effect this return? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes," has it filed a form 990-T for this year? If "Mo," provide an explanation in a signature or other authority over, a financial account; a country over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountry? b If "Yes," anter the name of the foreign country See the interfact year, did the organization for equipments for Form TD F 90-221, Report of Foreign Bank and Financial Accounts. Sa Was the organization is partly to a prohibited tax shelter transaction? c If "Yes," to Sa or Sb, did the organization file form 888-T, Disclosure by Tax-Evering Entity Regarding Prohibited Tax Shelter Transaction? 5b If "Yes," did the organization include with very solicitation and express statement that such contributions or gifts were not tax deductible? 6c If "Yes," did the organization include with very solicitation and express statement that such contributions of \$75 or more? 7c Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the form 8882? 6d If "Yes," indicate the number of Forms 8282 field during the year and the property for which it was required to the form 8282? 6d If "Yes," indicate the number of Forms 8282 field during the year, service any funds, directly or indirectly, on a personal benefit contract? 7d No If Yes, and the proparization of which a superting organization o	·		· · · · · · · · · · · · · · · · · · ·	1c		Νo
b If at least one is reported in 2a, did the organization file all required federal employment tax returns? Notestiff the sum of lines 1s and 2s is greater than 250, you may be required to e-file this return. 3a Did the organization have unrelated business gross income of 51,000 or more dumn; the year covered by this return? 4b If Yeas, has it filed a form 990-T for this year? If No., provide an explanation on Schedule 0. 3b If Yeas, has third a form 990-T for this year? If No., provide an explanation on Schedule 0. 3b If Yeas, has third a form 990-T for this year? If No., provide an explanation on Schedule 0. 3c Country. 4c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial secount in a foreign country (such as a bank account, securities account, or other financial account). 4c If Yeas, the standard of the securities and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Foreign Caccusts. 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization of the organization that it was or is a party to a prohibited tax shelter transaction? 5d Und the organization of party to differ the Self-T. Discosure by Tax-Evenpt Entity Regarding Frohibited Tax Shelter Transaction? 5c If Yeas, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c Organization shell may review adductible contributions under section 170(c). 5d Und the organization provide goods or services in exchange for any quil pro quo contribution of \$75 or more? 5d If Yeas, indicate the number of Forms \$222 hied during the year. 5d Und the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 6d If Yeas, indicate the number of Forms \$222 hied during the year. 5d Did the organization, during the year, perseve any funds, directly or	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
b If I lead to me is reported in 2s, did the organization the all required federal employment tax returns? Note: If the sum of ines 1s and 2s is greater than 250 you may be required to e-file this return. 10 by the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. 11 by the organization have unrelated business gross income of \$1,000 or more during the year covered by this return. 12 by the organization have unrelated business gross income of \$1,000 or more during the year covered by this return of the fire was a financial account in a foreign country (such as a bank account, security or their financial account in a foreign country (such as a bank account, security or their financial accounts in a foreign country (see the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and financial Accounts. 12 by 15 if Yes, anter the name of the foreign country (see the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and financial Accounts. 13 by 15 if Yes, and the organization that it was or is a party to a prohibited fax shelter transaction? 14 by 15 if Yes, 10 to so r5 b, did the organization that it was or is a party to a prohibited fax shelter transaction? 15 by 15 if Yes, 10 to so r5 b, did the organization file Form 8886-1, Disclosure by 7 and Exempt Entity Regarding Prohibited fax were not tax deductible? 15 by 15 if Yes, 10 to the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 16 by 15 if Yes, 10 to the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 16 by 15 if Yes, 10 to the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 16 could be organization state the number of Form 82822 filed during the year. 17 countributions of tax			3-			
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b if "Yes," enter the name of the foreign country (such as a bank account, sor other financial account, or other financial account)? b if "Yes," enter the name of the foreign country see the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Anaecounts. 5a Was the organization a party to a prohibited tax sheller transaction at the value of the property of the programation of the value of the organization of the value of the goods or services provided? 7 Organization and the value of the value of the goods or services provided? 8 If "Yes," indicate the number of Forms 8282 filed during the year. c Did the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 6 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 If Did the organization of quelified intellectual property, did the organization file a Form 1098-C as required? 8 Section \$51(c)(2) and other sponsoring organizations, and other vehicles, did the organization file a Form 1098-C as required? 9 Section \$51(c)(2) and other sponsoring organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section \$51(c)(2) organizations. Enter 12 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12 Section \$47(c)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 Section \$47(c)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 13 Section \$47(c)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 14 Section \$47(c)(1) non-exempt charitable trusts. Is the organization f				3b		
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Tax Shelter Transaction?	Ь	Did any taxable party notify the organization that it was or is a party to a prohibited t	tax shelter transaction?	5b		Νo
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a Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? b If Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form \$2.82? d If "Yes," indicate the number of Forms \$2.82 filed during the year .	_			6b		
more?	7	Organizations that may receive deductible contributions under section $170(c)$.				
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	а		tribution of \$75 or	7a		N o
file Form 8282?	b	If "Yes," did the organization notify the donor of the value of the goods or services pr	ovided?	7b		
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	С			70		N o
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	d			76		110
benefit contract?	•	In res, marcute the number or rorms 5252 med during the year	74			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	e		premiums on a personal	70		No
For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	f		onal henefit contract?			
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?						
required?	9 h			'9		
supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	•	, , , , , , , , , , , , , , , , , , , ,		7h		Νο
excess business holdings at any time during the year?	8					
year?			ponsoring organization, have			
Did the organization make any taxable distributions under section 4966?				8		No
b Did the organization make a distribution to a donor, donor advisor, or related person?	9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.				
Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders	а	Did the organization make any taxable distributions under section 4966?		9a		Νο
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facilities 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders	а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
a Gross income from members or shareholders	b		10Ь			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11	Section 501(c)(12) organizations Enter				
against amounts due or received from them)	а	Gross income from members or shareholders	11a			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the	b	· · · · · · · · · · · · · · · · · · ·	11b			
17k	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	lieu of Form 1041?	12a		
	b		12b			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body a	nd Management

					Yes	No				
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions.	, desc	ribe the circumstances,							
1a	Enter the number of voting members of the governing body	1a	14							
ь	Enter the number of voting members that are independent 14									
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		Νo				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?									
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?									
5	Did the organization become aware during the year of a material diversion of the organization's assets?									
6	Does the organization have members or stockholders?			6	Yes					
7a	Does the organization have members, stockholders, or other persons who may elect governing body?			7a	Yes					
b	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	rother persons?	7b	Yes					
8	Did the organization contemporaneously document the meetings held or written activear by the following	ons ur	ndertaken during the							
а	the governing body?			8a	Yes					
b	each committee with authority to act on behalf of the governing body?			8b	Yes					
9a	Does the organization have local chapters, branches, or affiliates?			9a		Νo				
b	If "Yes," does the organization have written policies and procedures governing the a affiliates, and branches to ensure their operations are consistent with those of the o		. ,	9b						
10	Was a copy of the Form 990 provided to the organization's governing body before it must describe in Schedule O the process, if any, the organization uses to review the		•	10	Yes					
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A the organization's mailing address? If "Yes," provide the names and addresses in Sc	,		11		Νo				

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Νο
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b		No
	Describe the process in Schedule O			
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		Νo
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed $\,$ AK
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available.

own website another's website upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

ALASKA AIRMEN'S ASSOCIATION PO BOX 241185 ANCHORAGE,AK 995241158 (907) 245-1251

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

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

		Posit	(C lon (d hat a	chec		I			(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee		Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
DEE HANSON, EXEC DIRECTR	40	Х						65,662	0	0
LEW DENNIS , BOARD MEMBER	2	Х						0	0	0
ERIKA BENNETT , BOARD MEMBER	2	Х						0	0	0
RUDI VONLMHOF, BOARD MEMBER	2	Х						0	0	0
TERRY CARLEE , BOARD MEMBER	2	Х						0	0	0
CRAIG HARTMAN, BOARD MEMBER	2	Х						0	0	0
NAN LLEWELLYN , BOARD MEMBER	2	Χ						0	0	0
CLEVE MCDONALD, BOARD MEMBER	2	Х						0	0	0
STEVE PANNONE , BOARD MEMBER	2	Х						0	0	0
GEORGE STEWARD , BOARD MEMBER	2	X						0	0	0
ADAM WHITE , REG DIRECTOR	2	Х						0	0	0
RICH MULLOWNEY , REG DIRECTOR	2	Х						0	0	0
PETE CARLSON , REG DIRECTOR	2	X						0	0	0
WILL JOHNSON , REG DIRECTOR	2	Х						0	0	0
JOE PEARSON , PRESIDENT	2			Х				0	0	0

Part VIII Continued

		Pos		•					(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
					\vdash					
1b Total						•	>	65,662		

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		No
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
- T-t-1	100 000	

Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated campa	igns 1a					
##	ь	Membership dues		61,933				
흔			1b					
s, g	С	Fundraising event	s					
無無	d	Related organizat						
°. E	e	Government grants (d	contributions) 1e					
<u> </u>	f	All other contributions	, gifts, grants, and	47,597]]
Contributions, gifts, grants and other similar amounts		sımılar amounts not ır	ncluded above					
	g	Noncash contribu						
ŎĘ.		lines 1a-1f \$						
<u> </u>	h	Total (Add lines 1	.a-1f)		109,530			
				Business Code				
Ele	2a	AIRPLANE RAFFLE			275,295	275,295		
, Kei	ь	TRADESHOW			159,738	159,738		
<u>2</u> 2≝	С	ADVERTISING			32,066	32,066		
Š	d	MERCHANDISE			14,624	14,624		
à	e	SPECIAL EVENTS/DIN	NERS		5,260	5,260		
Program Serwce Revenue	f	All other program			2,125	2,125		
i S	-							
Ě	g	Total. Add lines 2	a-2f					
	3	► \$ 489,108	عم (بهماییک عد	dands interest				
		Investment incon other similar amo			3,354			3,354
				▶	,			,
	4	Income from investm	ent of tax-exempt b	ond proceeds				
	5	Royalties						
			(ı) Real	(11) Personal				
	6a	Gross Rents						
	b	Less rental expenses						
	с	Rental income						
	d	or (loss) Net rental income	or(loss)					
				<u> </u>				
	7a	Gross amount	(ı) Securities	(II) O ther				
		from sales of assets other						
		than inventory						
	b	Less cost or other basis and						
	c	sales expenses Gain or (loss)						
	d	Net gain or (loss)						
				. ▶				
άs	8a	Gross income from events (not include \$						
Other Revenue		of contributions re 1c) See Part IV,	line 18					
ě		Attach Schedule G						
<u>-</u>		\$15,000						
ŧ	b	Less direct expe		ng ovents				
0	С	Net income or (io:	ss) IIOIII Iuliulais	ing events				
	9a	Gross income from activities See pa						
		Complete Schedule						
		exceeds \$15,000	а					
	ь	Less direct expe						
	c	Net income or (lo		activities				
		<u> </u>		•				
	10a	Gross sales of inv returns and allowa	ances .					
	I.	1	a					
	b	Less cost of good						
	С	Net income or (los Miscellaneous R		Business Code				
	11a	macenaneous R	CYCHUE	Dusiness Code				
	b							
	c							
	[
	d	All other revenue						
	12	Total Payanus A			601,992	489,108		3,354
	12	Total Revenue. A 8c, 9c, 10c, and 11e		_	001,332	-103,100		3,334

Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re				`
	not include amounts reported on lines 6b, 7b, 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 governments and organizations in the U S See Part IV, line 21			,	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	65,662		65,662	
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	62,314	21,227		
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)				
9	Other employee benefits	679		679	
10	Payroll taxes	10,778	1,840	8,938	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	13,030		13,030	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	4,397	4,397		
12	Advertising and promotion	17,537	9,000	8,537	
13	Office expenses	13,391	13,381	10	
14	Information technology	1,203		1,203	
15	Royalties				
16	Occupancy	6,851	4,090	2,761	
17	Travel	1,920	492	1,428	
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings				
20	Interest	27,271		27,271	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,468		4,468	
23	Insurance	28,414		28,414	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	RAFFLE	154,631	154,631		
b	TRADESHOW	104,877	104,877		
c	TELEPHONE	11,375		11,375	
d	NEWSLETTER	11,285	11,285		
e	MERCHANDISE	8,925	8,925		
f	All other expenses	13,971	-3,950	17,921	
25	Total functional expenses. Add lines 1 through 24f	562,979	330,195	232,784	0
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		-	-	

Part X	Balance	Sheet

					(A)		(E	-
	1	Cook was interest because			Beginning of year 16.724	$\overline{}$	End o	f year 5.741
		Cash—non-interest-bearing			247,093			299,239
	2	Savings and temporary cash investments			247,093	3		
	3	Pledges and grants receivable, net			3,877			
	4	Accounts receivable, net			3,077	4		
	5	Receivables from current and former officers, directors, trustees, other related parties $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$				5		
	6	Receivables from other disqualified persons (as defined under sec persons described in section $4958(c)(3)(B)$ Complete Part II of Science 2015 (2015)				6		
	7	Notes and loans receivable, net				7		
	8	Inventories for sale or use			9,764	8		
\$	9	Prepaid expenses and deferred charges	deferred charges					
Assets	10a	Land, buildings, and equipment cost basis	10a	424,426				
_	b	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10b	66,480	361,621	10c		357,946
	11	Investments—publicly traded securities				11		
	12	Investments—other securities See Part IV, line 11 Complete Part Schedule D			12			
	13	Investments—program-related See Part IV, line 11 Complete Part of Schedule D.	t VIII			13		
	14	Intangible assets			14			
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule						
		D			15			
	16	Total assets. Add lines 1 through 15 (must equal line 34)			639,079	16		662,926
	17	Accounts payable and accrued expenses .			17			
	18	Grants payable			18			
	19	Deferred revenue		19				
(C	20	Tax-exempt bond liabilities		20				
يقٍ.	21	Escrow account liability Complete Part IV of Schedule D			21			
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
ï		persons Complete Part II of Schedule L		•		22		
	23	Secured mortgages and notes payable to unrelated third parties			325,479	23		315,936
	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D			3,160	25		
	26	Total liabilities. Add lines 17 through 25		328,639	26		315,936	
⋄		Organizations that follow SFAS 117, check here ► and complet through 29, and lines 33 and 34.	te line	es 27				
Balance	27	Unrestricted net assets			161,473	27		148,064
<u> </u>	28	Temporarily restricted net assets			148,967	28		198,926
Z	29	Permanently restricted net assets				29		
or Fund		Organizations that do not follow SFAS 117, check here ► ☐ and lines 30 through 34.	compl	lete				
0 5	30	Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31		
As	32	Retained earnings, endowment, accumulated income, or other fund	ds			32		
Net	33	Total net assets or fund balances			310,440	33		346,990
_	34	Total liabilities and net assets/fund balances			639,079	34		662,926
Da	rt VT	Einancial Statements and Departing						
гē	rt XI	Financial Statements and Reporting					Yes	No
1	Acco	unting method used to prepare the Form 990 🔽 cash 🗀 a	ccrual	Cother			103	
2a		the organization's financial statements compiled or reviewed by ar			int?	2a		No
b		the organization's financial statements audited by an independent				2b		No
_		J J an independent			· ·	<u> </u>	+	

1	Accounting method used to prepare the Form 990 🔽 cash 🗆 accrual 🗆 other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Νo
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Νο

3b

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As Filed Data -

DLN: 93493187003090

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

ALASK	A AIRM	EN'S ASSOCIAT	ION INC						. ,		
								92	-0074966	5	
Pa	rt I	Reason	for Public C	harity Status (to be co	mpleted	by all or	ganızatıo	ns) (See	Instruct	ions)	
The	rganı	zation is not	a private found	ation because it is (Please	check onl	y one org	anızatıon))			
1	Γ	A church, c	onvention of ch	nurches, or association of ch	urches de	scribed in	Section 1	170(b)(1)((A)(i).		
2	Γ	A school de	escribed in Sec t	t ion 170(b)(1)(A)(ii). (Attac	h Schedu	ıle E)					
3	Г	A hospital	or a cooperativ	e hospital service organizati	on describ	bed in Sec	tion 170(L	b)(1)(A)(i	ii). (Attac	h Schedul	е Н)
4	Г	A medical i	research organi	zation operated in conjuncti	on with a h	hospital de	escribed ii	n Section	170(b)(1)	(A)(iii). E	nter the
	•		name, city, and	•		•				. , ,	
5	Г	•		or the benefit of a college or	universit	v owned o	r operated	l by a gove	rnmental	unit desc	ribed in
	·	=	•	(Complete Part II)		,	•	, 5			
6	Г			overnment or governmental	unıt descr	ibed in Se	ction 170	(b)(1)(A)	(v).		
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general							eral public				
_	•			o)(1)(A)(vi) (Complete Par			5			5	
8	Г		-	ped in Section 170(b)(1)(A)	•	nplete Pari	tII)				
9	Ţ.		•	ally receives (1) more than			•	ontribution	ıs, membe	rship fees	, and gross
				ated to its exempt functions							
		•		stment income and unrelate	-		•	, ,	•		
				on after June 30, 1975 See						,	
10	Г		=	and operated exclusively to					-	ee instruc	tions)
11		An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of									
	·	_	=	orted organizations describe					•	•	
				type of supporting organiza					_		
	_	·	• •		Type III		-		d		III - Other
e	ı	•		rtify that the organization is agers and other than one or			•				•
		section 50		agers and other than one or	more publ	псту зирре	orteu orga	ilizations (aescribeu	III Section	1309(a)(1)01
f				d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportir	ng organization,
		check this									Γ
g		following pe		as the organization accepted	d any gift o	or contrib	ution from	any of the	!		
				r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes No
			·	ng body of the the supported		_				11g	
			· -	erson described in (i) above	_					11g(
				ty of a person described in (bove?				11g(
h		• •		nation about the organizatio	, , ,		supports				
-					9		11				
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did y	ou notify	(vi) I	s the	(vii) A mount of
		orted		(described on lines 1-9	_	atıon ın		nızatıon	_	ation in	support?
	Organ	nızatıon		above or IRC section		listed in		i) of your		rganized	
				(See Instructions))	your go	verning ment?	supp	oort?	in the	US?	
					Yes	No	Yes	No	Yes	No	1
					163	140	163	140	163	140	
								-			

Total

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

	(Complete only if you chec	ked the box or	1 line 5, 7, or	8 of Part I.)				
P	ublic Support							
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	103,707	79,282	127,692	152,023		109,530	572,234
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add line 1-3	103,707	79,282	127,692	152,023		109,530	572,234
5	The portion of total contribution by each							
	person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)							
6	Public Support subtract line 5 from line							572,234
T	otal Support							
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	A mounts from line 4	103,707	2,038	127,692	152,023	(-/	109,530	572,234
8	Gross income from interest, dividends,	·		·	·			· · · · · · · · · · · · · · · · · · ·
	payments received on securities loans, rents, royalties and income from similar sources	1,127	2,038	2,508	7,853		3,354	16,880
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total Support (Add lines 7 through 10)							589,114
12	Gross receipts from related activities, etc	(See instruction	s)			12		1,990,686
13 C	First Five Years. If the Form 990 is for the organization, check this box and stop here omputation of Public Support Perc		st, second, third	l, fourth, or fifth	tax year as a 50	01(c)(▶ ┌
14	Public Support Percentage for 2008 (line 6		ed by line 11 co	lumn (f))		14		97.134 %
15	Public Support Percentage for 2007 Sched	ule A, Part IV-A	, line 26f			15		
	33 1/3% Test - 2008. If the organization did and stop here. The organization qualifies as 33 1/3% Test - 2007. If the organization di	s a publicly supp	orted organizatio	on	·			▶ ✓
17a	box and stop here. The organization qualification for the state of the	es as a publicly s If the organization its and circumst cances" test The If the organization its and circumst	supported organ on did not check ances" test, che organization qu on did not check ances" test, che	zation a box on line 13 ck this box and lalifies as a publ a box on line 13 ck this box and	3, 16a, or 16b a stop here. Expl licly supported 3, 16a, 16b, or 1 stop here. Expl	nd line lain in organi 17a ar lain in	e 14 is 10° Part IV ho zation id line 15 i Part IV ho	% or w the property or s 10% or
18	the organization meets the "facts and circu Private Foundation. If the organization did instructions							▶ □

Pa	Support Schedule for On (Complete only if you ched)(2)		
	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	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 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
·	line 6)						
To	tal Support		•	•			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts 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 30 June, 1975						
С	Add lines 10a and 10b						
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						
12	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's fi	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶□
	mputation of Public Support Perc						
15	Public Support Percentage for 2008 (line		•	olumn (f))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
	mputation of Investment Income			40 1 1			
17	Investment Income Percentage for 2008 (-))	17	
18	Investment Income Percentage from 2007	'Schedule A , Pa	rt IV-A, line 27	h		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

Part IV	Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)						
	Facts and Circumstances Test						

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury

► Attach to Form 990. To be completed by organizations that

answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Internal Revenue Service

Employer identification number Name of the organization ALASKA AIRMEN'S ASSOCIATION INC

Supplemental Financial Statements

			92-00/49	00	
Pa	rt I Organizations Maintaining Donor Acorganization answered "Yes" to Form 99		unds or Ac	counts. Comple	te if the
		(a) Donor advised funds	(b) Fun	ds and other accou	ınts
	Total number at end of year				
<u> </u>	Aggregate Contributions to (during year)				
3	Aggregate Grants from (during year)				
ļ	Aggregate value at end of year				
•	Did the organization inform all donors and donor advi- funds are the organization's property, subject to the	_	or advised	☐ Yes	⋉ No
•	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?		•	☐ Yes	√ No
a	rt III Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	o Form 990,	Part IV, line 7.	
2	Preservation of land for public use (e g , recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quality on the last day of the tax year	Preservation of ce	rtified historio	ation easement	
			_	Held at the End of	the Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easement	S	2b		
С	Number of conservation easements on a certified hi	storic structure included in (a)	2c		
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d		
3	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	d by the orga	nızatıon durıng	
	the taxable year 🕨				
ŀ	Number of states where property subject to conserva	ition easement is located ►			
j	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		ations, and	☐ Yes	√ No

- Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year
- 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶\$
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

In Part XIV, 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" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1

For Paperwork Reduction Act Notice, see the Intructions for Form 990

(ii) Assets included in Form 990, Part X

- 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 relating to these items
- Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

☐ Yes

✓ No

	Organizations Maintaining Co	•			•			ontinued)
3	Using the organization's accession and other items (check all that apply)	er records, check any of th	ne fol	lowing that are	a sıgnıfıcant u:	se of its collection	1	
а	Public exhibition	d	Γ	Loan or exch	ange programs			
b	Scholarly research	e	Γ	Other				
с	Preservation for future generations							
4	Provide a description of the organization's of Part XIV	ollections and explain ho	w the	y further the o	rganızatıon's ex	empt purpose ın		
5	During the year, did the organization solicit	or receive donations of ar	t. hıs	torical treasur	es or other sım	ılar		
	assets to be sold to raise funds rather than	to be maintained as part o	of the	organization's	collection?		Yes	✓ No
Par	Trust, Escrow and Custodial Part IV, line 9, or reported an a				nization answ	ered "Yes" to Fo	orm 9 	90,
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?	dian or other intermediary	for c	ontributions o	r other assets r	not	Yes	▽ No
b	If "Yes," explain why in Part XIV and compl	ete the following table						
					-	A mou	int	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on F	orm 990, Part X, line 21?				Г	Yes	✓ No
b	If "Yes," explain the arrangement in Part XI							
Pai	rt V Endowment Funds. Complete							
4 -	D	(a)Current Year (b) Prior	Year (c)Two	Years Back (d)	Three Years Back (e)Four Y	ears Back
1a L	Beginning of year balance							
b	Contributions							
с	Investment earnings or losses							
d	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year	ar end balance held as						
a	Board designated or quasi-endowment							
ь	Permanent endowment							
c 3a	Term endowment ► Are there endowment funds not in the posse	scoop of the organization	that :	are held and a	Impostant for	+ h a		
за	organization by	ession of the organization	llial	are neiu anu ac	illillistered for	tile	Yes	No
	(i) unrelated organizations					3a(i)		No
	(ii) related organizations					3a(ii)		Νο
b	If "Yes" to 3a(II), are the related organization					3b		No
4	Describe in Part XIV the intended uses of t							
Par	t VI Investments—Land, Building	s, and Equipment. S	ee F	orm 990, Pa	rt X, line 10.	Ι		
	Description of investment			a) Cost or other sis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) B	ook value
1a	Land				266,406			266,406
b	Buildings							
c	Leasehold improvements							
d	Equipment							
e	Other				158,020	66,480		91,540
Tota	I. Add lines 1a-1e <i>(Column (d) should equal F</i>	Form 990, Part X, column (B,), line	10(c).)	·	►		357,946
						Schedule D (F	Form 9	90) 2008

Part VII	Investments-Other Securities. See	Form 990, Part X, line 1	2.	
	(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation ·year market value
Financial d	erivatives and other financial products			
	eld equity interests			
Other				
Total. (Colu	mn (b) should equal Form 990, Part X, col (B) line 12) 🕨			
Down VIII	Investments Duesus Polated Co	a Farm OOO Dart V June	12	
Part VIII	Investments—Program Related. Se			d of valuation
	(a) Description of investment type	(b) Book value		year market value
Total (Colu	mn (b) should equal Form 990, Part X, col (B) line 13)			
Part IX		ne 15.		
	(a) Descri			(b) Book value
Total. (Colu	ımn (b) should equal Form 990, Part X, col.(B) line .	15.)		
	Other Liabilities. See Form 990, Part 3			
	(a) Description of Liability	(b) A mount		
Federal Inc	come Taxes			
]	
]	
]	
			1	
			1	
			1	
-			1	
			1	
Total. (Colum	mn (b) should equal Form 990, Part X, col (B) line 25) 🕨		1	
,,	· · · · · · · · · · · · · · · · · · ·	1		

Par	t XI Reconciliation of C	hange in Net Assets from Forr	<u>n 990 to Financial State</u>	ments	
1	Total revenue (Form 990, Part			1	
2	Total expenses (Form 990, Par	t IX, column (A), line 25)		2	
3	Excess or (deficit) for the year	Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) o	n investments		4	
5	Donated services and use of fa	cilities		5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lir	nes 4 - 8		9	
10	Excess or (deficit) for the year	per financial statements Combine lines	s 3 and 9	10	
Part		evenue per Audited Financial		ue per Return	
1	Total revenue, gains, and othe	r support per audited financial stateme	nts	1	
2	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12			
а	Net unrealized gains on invest	ments	. 2a		
b	Donated services and use of fa	acılıtıes	. 2b		
c	Recoveries of prior year grants	s	. 2c		
d	Other (Describe in Part XIV)		. 2d		
e	Add lines 2a through 2d .			. 2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.			. 3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1			
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	. 4a		
b	Other (Describe in Part XIV)		4b		
c	Add lines 4a and 4b			. 4c	
5		d 4c. (This should equal Form 990, Par			
		xpenses per Audited Financia			
1		r audited financial statements		. 1	
2		it not on Form 990, Part IX, line 25	1 - 1		
а		acılıtıes			
b			2b		
с		, Part IX, line 25	2c		
d	Other (Describe in Part XIV)		. 2d	 <u> </u>	
e ~	Add lines 2a through 2d			. 2e	
3	Subtract line 2e from line 1 .			. 3	
4		0, Part IX, line 25, but not on line 1:	4-		
a L		uded on Form 990, Part VIII, line 7b		 	
b	Other (Describe in Part XIV) Add lines 4a and 4b		. 4b	4c	
с 5		nd 4c. (This should equal Form 990, Pa	rt I line 10 \	. 5	
	t XIV Supplemental Inf		nt 1, iiiie 16)	. 3	
Com	plete this part to provide the des	scriptions required for Part II, lines 3, 5, Part XII, lines 3, 5, Part XII, lines 2d and 4b, and Part XI		4, Part XIV, lines 1b and	2b,
	Ident if ier	Return Reference	Ехр	lanat ion	

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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Name of the organization ALASKA AIRMEN'S ASSOCIATION INC Employer identification number

92-0074966

ldentifier	Return Reference	Explanation
EXPLANATION ON VOLUTEERS AND TYPES OF SERVICES OR BENEFITS	FORM 990, PAGE 1, PART I, LINE 6	TO PROMOTE THE MISSION OF THE ORGANIZATION

ldentifier	Return Reference	Explanation
CLASSES OF MEMBERS OR	FORM 990, PAGE 6, PART VI, LINE	THE ALASKA AIRMEN'S ASSOCIATION HAS A
STOCKHOLDERS	6	MEMBERSHIP

ldentifier	Return Reference	Explanation
ELECTION OF MEMBERS AND THEIR RIGHTS	FORM 990, PAGE 6, PART VI, LINE 7A	THE ALASKA AIRMEN'S ASSOCIATION BOARD OF DIRECTORS IS ELECTED BY THE MEMBERSHIP

ldentifier	Return Reference	Explanation
DECISIONS SUBJECT TO APPROVAL OF MEMBERS	FORM 990, PAGE 6, PART VI, LINE 7B	DECISIONS OF THE BOARD OF DIRECTORS ARE NOT SUBJECT TO APPROVAL BY THE GENERAL MEMBERSHIP

ldentifier	Return Reference	Explanation
	FORM 990, PAGE 6, PART VI, LINE 10	A COPY OF THE FEDERAL FORM 990 AND ATTACHED SCHEDULES ARE PROVIDED BY THE ACCOUNTANT TO THE EXECUTIVE DIRECTOR THE EXECUTIVE DIRECTOR MAKES A COPY AVAILABLE TO THE BOARD OF DIRECTORS

ldentifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	REVIEW THE CONFLICT OF INTEREST, THE BOARD OF DIRECTORS TO DETERMINE APPROPRIATE ACTION AFTER THE CONFLICT OF INTEREST IS REVIEWED

ldentifier	Return Reference	Explanation
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	THE BOARD OF DIRECTOR'S EXECUTIVE COMMITTE DETERMINES AND THE BOARD OF DIRECTORS APPROVES THE SALARY OF THE EXECUTIVE DIRECTOR

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493187003090

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

Attachment

See separate instructions. Attach to your tax return. Sequence No 67 Business or activity to which this form relates Identifying number Name(s) shown on return ALASKA AIRMEN'S ASSOCIATION INC INDIRECT DEPRECIATION 92-0074966 **Election To Expense Certain Property Under Section 179** Part I **Note:** If you have any listed property, complete Part V before you complete Part I. 250,000 **1** Maximum amount See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 800,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use (c) Elected cost (a) Description of property only) 7 Listed property Enter the amount from line 29 8 **8** Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 **16** Other depreciation (including ACRS) 4,468 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2008 18 If you are electing to group any assets placed in service during the tax year into one or more Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (a)Depreciation year placed in (business/investment (e) Convention (f) Method property period deduction service use only—see instructions) 19a 3-year property **b** 5-year property **c** 7 - year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs h Residential rental 27 5 yrs ММ S/L property 27 5 yrs MMS/L i Nonresidential real 39 yrs ΜМ S/L property ΜМ S/L Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life **b** 12-year S/L S/L **c** 40-year **Summary** (See instructions) Part IV 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 4,468 and on the appropriate lines of your return Partnerships and S corporations—see instr 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Form 4562 (2008) Page 2 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and Part V property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (c) (i) (e) (b) Business/ (d) (h) (a) (g) Basis for depreciation Flected Type of property (list Date placed in investment Cost or other Recovery Method/ Depreciation/ section 179 (business/investment Convention deduction vehicles first) service basis use period cost use only) percentage 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L -% S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) (f) 30 Total business/investment miles driven during the Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 1 Vehicle 5 Vehicle 6 year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? **36** Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No **38** Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? _ 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) . . . Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI **Amortization** (b) (e) (d) (f) (c) (a) Date A mortization A mortizable Code A mortization for Description of costs amortization period or

amount section this year beains percentage 42 A mortization of costs that begins during your 2008 tax year (see instructions) 43 A mortization of costs that began before your 2008 tax year 43 44 Total. Add amounts in column (f) See the instructions for where to report 44

Form 3115 (Rev December 2003)

Application for Change in Accounting Method

OMB No 1545-0152

Internal Revenue Service					
Name of filer (name of	of parent corporation if a consolidat	led group) (see instructions)	Identification number (see ii	nstructions) -0074966	
			Principal business activity cod		ns)
Alaska Airmen'	s Association, Inc.		1 mopal basiness delivity see	to Hamber (see mondone	110)
Number, street, and r	room or suite no If a P O box, see	e the instructions	Tax year of change begins (N	/M/DD/YYYY) 10/0	1/2008
PO Box 241185			Tax year of change ends (MN	//DD/YYYY) 09/3	30/2009
City or town, state, ai			Name of contact person (see	instructions)	
Anchorage, AK			Dee Hanson	T	
Name of applicant(s)	(if different than filer) and identifica	ation number(s) (see instructions)		Contact person's tele	
If the applicant is		tod group, shook this boy		907) 245-12	<u> </u>
	s a member of a consolidat		tached shock this hav	<u> </u>	
	to indicate the applicant.	aration of Representative, is at	Check the appropriate	e box to indicate the	e type
_	o indicate the applicant.	(Saa 1391)	of accounting method		
☐ Individual ☐ Corporation	L F	□ Cooperative (Sec 1381) □ Partnership	(see instructions)	3 3 1	
	reign corporation	☐ S corporation			
(Sec 957)		Insurance co (Sec 816(a))	Depreciation or Am		
	ation (Sec 904(d)(2)(E))	Insurance co (Sec 810(a))			tivities of
Qualified pers		☐ Other (specify) ►	Financial Institution: ☐ Other (specify) ▶		
•	Sec 448(d)(2))				
☐ Exempt orga	nization Enter Code sectio	n ►			
applicant may be	required to provide information	ested information to be eligible for on specific to the accounting me uested accounting method chang	thod change such as an att	ached statement. The	e ap plicant
Part I Info	rmation For Automatic	Change Request			Yes No
Method Ch instructions	nanges (see instructions) If the requested change i	unting method change numbe Enter only one method chan is not included in that list, che er ☐ Description ► Accrual	ge number, except as prock "Other," and provide a	ovided for in the	
2 Is the acco		ng requested one for which th		tion 4 02 of Rev	
If "Yes," go	to Part II				
•	_	year of a trade or business fo 481(a) adjustment into accour		•	
Note: Complete	Part II below and then Part	o make the change under auto t IV, and also Schedules A thro			
Part II Info	rmation For All Request	ts			Yes No
		former consolidated group in ederal income tax return(s) un			
	vered "No," go to line 5	. ,	·		
b Is the meth	od of accounting the applic	cant is requesting to change a	n issue (with respect to eit	ther the applicant	
		d group in which the applican		he applicable tax	
year(s)) eith	er (ı) under consideration c	or (II) placed in suspense (see	instructions)? .		
Under penalties of knowledge and belie (other than applican	it) is based on all information of	Signature (see instruction in section in the sample this application, including the relevant facts relating to the application preparer has any knowledge	accompanying schedules and ication, and it is true, correct, a		e best of my on of preparer
	Filer		Preparer (other th	an mer/applicant)	
	Signature and date		Signature of individual prepa	ring the application and	I date
	Name and title (print or type)		Name of individual preparing	the application (print or	type)
			Name of firm prepar	ring the application	

orm (3115 (Rev 12-2003)	Page 2
Par	t II Information For All Requests (continued)	Yes No
	Is the method of accounting the applicant is requesting to change an issue pending (with respect to either the applicant or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) for any tax year under examination (see instructions)?	
d	Is the request to change the method of accounting being filed under the procedures requiring that the operating division director consent to the filing of the request (see instructions)? If "Yes," attach the consent statement from the director	
۵	Is the request to change the method of accounting being filed under the 90-day or 120-day window period?	
	If "Yes," check the box for the applicable window period and attach the required statement (see instructions) 90 day 120 day	
	If you answered "Yes" to line 4a, enter the name and telephone number of the examining agent and the tax year(s) under examination	
	Name ► Telephone number ► Tax year(s) ► Has a copy of this Form 3115 been provided to the examining agent identified on line 4f?	
	Does the applicant (or any present or former consolidated group in which the applicant was a member during	
	the applicable tax year(s)) have any Federal income tax return(s) before Appeals and/or a Federal court? If "Yes," enter the name of the (check the box) \square Appeals officer and/or \square counsel for the government, and the tax year(s) before Appeals and/or a Federal court	
	Name \blacktriangleright Telephone number \blacktriangleright Tax year(s) \blacktriangleright	
	Has a copy of this Form 3115 been provided to the Appeals officer and/or counsel for the government identified on line 5a?	
	Is the method of accounting the applicant is requesting to change an issue under consideration by Appeals and/or a Federal court (for either the applicant or any present or former consolidated group in which the applicant was a member for the tax year(s) the applicant was a member)?	
	If "Yes," attach an explanation If the applicant answered "Yes" to line 4a and/or 5a with respect to any present or former consolidated group,	
	provide each parent corporation's (a) name, (b) identification number, (c) address, and (d) tax year(s) during which the applicant was a member that is under examination, before an Appeals office, and/or before a Federal court	
	If the applicant is an entity (including a limited liability company) treated as a partnership or S corporation for Federal income tax purposes, is it requesting a change from a method of accounting that is an issue under consideration in an examination, before Appeals, or before a Federal court, with respect to a Federal income tax return of a partner, member, or shareholder of that entity?	
	If "Yes," the applicant is not eligible to make the change is the applicant making a change to which audit protection does not apply (see instructions)?	
	Has the applicant, its predecessor, or a related party requested or made (under either an automatic change	
	procedure or a procedure requiring advance consent) a change in accounting method within the past 5 years (including the year of the requested change)?	
	If "Yes," attach a description of each change and the year of change for each separate trade or business and whether consent was obtained	
С	If any application was withdrawn, not perfected, or denied, or if a Consent Agreement was sent to the taxpayer but was not signed and returned to the IRS, or if the change was not made or not made in the requested year of change, include an explanation	
	Does the applicant, its predecessor, or a related party currently have pending any request (including any concurrently filed request) for a private letter ruling, change in accounting method, or technical advice?	
	If "Yes," for each request attach a statement providing the name(s) of the taxpayer, identification number(s), the type of request (private letter ruling, change in accounting method, or technical advice), and the specific issue(s) in the request(s)	
1	Is the applicant requesting to change its overall method of accounting?	
	If "Yes," check the appropriate boxes below to indicate the applicant's present and proposed methods of	
	accounting Also, complete Schedule A on page 4 of the for m Present method: Cash Hybrid (attach description)	
	Proposed method: ☐ Cash ☐ Accrual ☐ Hybrid (attach description)	
	If the applicant is not changing its overall method of accounting, attach a detailed and complete description for each of the following	
	The Item(s) being changed The applicant's present method for the Item(s) heins about additional for the Item(s) heins about a significant for the Item(s) heins a signific	
	The applicant's present method for the item(s) being changed The applicant's proposed method for the item(s) being changed	
	The applicant's present overall method of accounting (cash, accrual, or hybrid)	

Form :	3115 (Rev 12-2003)	P	age 3
Par	t II Information For All Requests (continued)	Yes	No
13	Attach a detailed and complete description of the applicant's trade(s) or business(es), and the principal business activity code for each If the applicant has more than one trade or business as defined in Regulations section 1 446-1(d), describe whether each trade or business is accounted for separately, the goods and services provided by each trade or business and any other types of activities engaged in that generate gross income, the overall method of accounting for each trade or business, and which trade or business is requesting to change its accounting method as part of this application or a separate application		
14	Will the proposed method of accounting be used for the applicant's books and records and financial statements? For insurance companies, see the instructions If "No," attach an explanation		
	Has the applicant engaged, or will it engage, in a transaction to which section 381(a) applies (e.g., a reorganization, merger, or liquidation) during the proposed tax year of change determined without regard to any potential closing of the year under section 381(b)(1)? If "Yes," for the items of income and expense that are the subject of this application, attach a statement identifying		
b	the methods of accounting used by the parties to the section 381(a) transaction immediately before the date of distribution or transfer and the method(s) that would be required by section 381(c)(4) or (c)(5) absent consent to the change(s) requested in this application		
16	Does the applicant request a conference of right with the IRS National Office if the IRS proposes an adverse response?		MMM.
17	If the applicant is changing to or from the cash method or changing its method of accounting under sections 263A, 448, 460, or 471, enter the gross receipts of the 3 tax years preceding the year of change		
	1st preceding year ended mo Sept yr 2008 2nd preceding year ended mo Sept yr 2007 2007 3rd preceding year ended mo Dec yr 2006 \$ 717,695 \$ 538,897		
Par	t III Information For Advance Consent Request	<u>////////</u> Yes	No
18	Is the applicant's requested change described in any revenue procedure, revenue ruling, notice, regulation, or other published guidance as an automatic change request? If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent request procedures		
19	Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. The applicant should include a discussion of any authorities that may be contrary to its use of the proposed method.		
20	Attach a copy of all documents related to the proposed change (see instructions)		
21	Attach a statement of the applicant's reasons for the proposed change		
22	If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation		
23a	Enter the amount of user fee attached to this application (see instructions) \$\blue{\blue}\$ \$		
b	If the applicant qualifies for a reduced user fee, attach the necessary information or certification required by Rev Proc 2003-1 (or its successor) (see instructions)		
Par	t IV Section 481(a) Adjustment	Yes	No
24	Do the procedures for the accounting method change being requested require the use of the cut-off method? If "Yes," do not complete lines 25, 26, and 27 below		
25	Enter the section 481(a) adjustment Indicate whether the adjustment is an increase (+) or a decrease (-) in income ▶ \$		
26	If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to take the entire amount of the adjustment into account in the year of change?	/////// ///////	
27	Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group, a consolidated group, a controlled group, or other related parties? If "Yes," attach an explanation		

Form 3115 (Rev. 12-2003) Page **4**

Schedule A—Change in Overall Method of Accounting (If Schedule A applies, Part I below must be completed) Part I Change in Overall Method (see instructions)

1 Enter the following amounts as of the close of the tax year preceding the year of change. If none, state "None" Also, attach a statement providing a breakdown of the amounts entered on lines 1a through 1g.

				 tinount
а	a Income accrued but not received			\$ 3,877
b	Income received or reported before it was earned Attach a describasis for the proposed method	cription of the	income and the legal	
С	Expenses accrued but not paid			-3,160
d	Prepaid expenses previously deducted	-		9,764
е	Supplies on hand previously deducted and/or not previously report	ed .		
f	f Inventory on hand previously deducted and/or not previously report	ted Complete	Schedule D, Part II	
g	g Other amounts (specify) ▶			
h	Net section 481(a) adjustment (Combine lines 1a-1g) .	-		\$ 10,481

2 Is the applicant also requesting the recurring item exception under section 461(h)(3)? . \Box Yes \Box No

3 Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applicable, as of the close of the tax year preceding the year of change. On a separate sheet, state the accounting method used when preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules submitted with the Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in Part I, lines 1a through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, explain the differences on a separate sheet.

Part II Change to the Cash Method For Advance Consent Request (see instructions)

Applicants requesting a change to the cash method must attach the following information

- 1 A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials and supplies used in carrying out the business
- 2 An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulations

Schedule B—Change in Reporting Advance Payments (see instructions)

- 1 If the applicant is requesting to defer advance payment for services under Rev Proc 71-21, 1971-2 C B 549, attach the following information
- a Sample copies of all service agreements used by the applicant that are subject to the requested change in accounting method. Indicate the particular parts of the service agreement that require the taxpayer to perform services.
- **b** If any parts or materials are provided, explain whether the obligation to provide parts or materials is incidental (of minor or secondary importance) to an agreement providing for the performance of personal services
- **c** If the change relates to contingent service contracts, explain how the contracts relate to merchandise that is sold, leased, installed, or constructed by the applicant and whether the applicant offers to sell, lease, install, or construct without the service agreement
- d A description of the method the applicant will use to determine the amount of income earned each year on service contracts and why that method clearly reflects income earned and related expenses in each year
- e An explanation of how the method the applicant will use to determine the amount of gross receipts each year will be no less than the amount included in gross receipts for purposes of its books and records. See section 3.11 of Rev. Proc. 71-21
- 2 If the applicant is requesting a deferral of advance payments for goods under Regulations section 1 451-5, attach the following information
- a Sample copies of all agreements for goods or items requiring advance payments used by the applicant that are subject to the requested change in accounting method. Indicate the particular parts of the agreement that require the applicant to provide goods or items.
- **b** A statement providing that the entire advance payment is for goods or items. If not entirely for goods or items, a statement that an amount equal to 95% of the total contract price is properly allocable to the obligation to provide activities described in Regulations section 1 451-5(a)(1)(i) or (ii) (including services as an integral part of those activities)
- c An explanation of how the method the applicant will use to determine the amount of gross receipts each year will be no less than the amount included in gross receipts for purposes of its books and records. See Regulations section 1.451-5(b)(1)

Form 3115 (Rev. 12-2003) Page **5**

Schedule C—Changes Within the LIFO Inventory Method (see instructions)

Part I General LIFO Information

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all Forms 970, Application To Use LIFO Inventory Method, filed to adopt or expand the use of the LIFO method.

- 1 Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items
- **a** Valuing inventory (e.g., unit method or dollar-value method)
- **b** Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, etc.)
- c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc.)
- d Determining the current year cost of goods in the ending inventory (e.g., most recent purchases, earliest acquisitions during the year, average cost of purchases during the year, etc.)
- 2 If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation
- 3 If the proposed change is not requested for all the LIFO inventory, specify the inventory to which the change is and is not applicable
- 4 If the proposed change is not requested for all of the LIFO pools, specify the LIFO pool(s) to which the change is applicable
- 5 Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, the applicant should identify which inventory items are valued under each method.
- 6 If changing to the IPIC method, attach a completed Form 970 and a statement indicating the indexes, tables, and categories the applicant proposes to use

Part II Change in Pooling Inventories

- 1 If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use
- 2 If the applicant is proposing to use natural business unit (NBU) pools or requesting to change the number of NBU pools, attach the following information (to the extent not already provided) in sufficient detail to show that each proposed NBU was determined under Regulations section 1 472-8(b)(1) and (2)
- a A description of the types of products produced by the applicant. If possible, attach a brochure
- **b** A description of the types of processes and raw materials used to produce the products in each proposed pool
- c If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, the applicant should explain the reasons for the separate facilities, indicate the location of each facility, and provide a description of the products each facility produces
- **d** A description of the natural business divisions adopted by the taxpayer. State whether separate cost centers are maintained and if separate profit and loss statements are prepared.
- e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool
- f A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool.
- g A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing
- 3 If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar See Regulations section 1 472-8(b)(3)
- 4 If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1 472-8(c)

Form 3115 (Rev 12-2003) Page **6**

Schedule D—Change in the Treatment of Long-Term Contracts Under Section 460, Inventories, or Other Section 263A Assets (see instructions)

Pai	t I Change in Reporting Income Fro	om Long-Term	n Contracts (A	lso complete Par	t III on pages	7 and 8)
1	To the extent not already provided, attach a dand expenses from long-term contracts. If t construction activities					
	Are the applicant's contracts long-term contracts if "Yes," do all the contracts qualify for the exist line 2b is "No," attach an explanation				′ =	Yes ☐ No Yes ☐ No
С	If line 2b is "Yes," is the applicant requesting to under Regulations section 1 460-4(b)?	use the percent	tage-of-completı -	on method using co		Yes □ No
d	If line 2c is "No," is the applicant requesting to under Regulations section 1 460-4(c)(2)? If line 2d is "Yes," explain what cost comparise factor	•	•		·	Yes □ No
	If line 2d is "No," explain what method the applicant have long-term manufactured if "Yes," explain the applicant's present and precontracts	uring contracts a	is defined in sec	tion 460(f)(2)?	-	Yes □ No
4	Describe the applicant's manufacturing activity. To determine a contract's completion factor Will the applicant use the cost-to-cost method	using the perce	ntage-of-comple [.]	tion method	_	Yes □ No
	If line 4a is "No," is the applicant electing the Regulations section 1 460-5(c))? Attach a statement indicating whether any contracts or Federal long-term contracts	ne simplified cos	st-to-cost method -	d (see section 460)		Yes □ No
Par	t Change in Valuing Inventories Incl	uding Cost All	ocation Chang	es (Also complete	Part III on page	ges 7 and 8)
1	Attach a description of the inventory goods b	eing changed				
2	Attach a description of the inventory goods (i	f any) NOT beir	ng changed			
3	If the applicant is subject to section 263A, is section 263A (see instructions)?	s its present inv -	entory valuatior -	n method in compli		Yes □ No
						Inventory Not
4a	Check the appropriate boxes below			Inventory Be	ing Changed	Being Changed
	Identification methods			Present method	Proposed method	Present method
	Specific identification	-				
	FIFO	•				
	LIFO	-				
	Other (attach explanation)	-	•			
	Valuation methods					
	Cost	-				
	Cost or market, whichever is lower	-	•			
	Retail cost	-	•			
	Retail, lower of cost or market	•	•			
1.	Other (attach explanation)					
	Enter the value at the end of the tax year pre		-	mothod ottook th	o followana :=f	or motion (255
5	If the applicant is changing from the LIFO instructions)	·		metnod, attach th	e rollowing inf	or mation (see
a	Copies of Form(s) 970 filed to adopt or expa			hathartha ann	at ia ab	40 4h0 m4l1
D	Only for applicants requesting advance co	nsent. A statem	ient describing W	memer me applical	it is changing	to the method

required by Regulations section 1 472-6(a) or (b), or whether the applicant is proposing a different method

of Rev Proc 2002-9 (or its successor)

c Only for applicants requesting an automatic change. Attach the statement required by section 10 01(4) of the Appendix

Form 3115 (Rev 12-2003) Page **7**

Part III Method of Cost Allocation (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 (see instructions))

Section A—Allocation and Capitalization Methods

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following

- 1 The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method)
- 2 The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method)
- 3 The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the U.S. ratio, or other reasonable allocation method)

Section B—Direct and Indirect Costs Required To Be Allocated (Check the appropriate boxes in Section B showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460 Mark "N/A" in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked.)

		Present method	Proposed method
1	Direct material		
2	Direct labor		
3	Indirect labor		
4	Officers' compensation (not including selling activities)		
5	Pension and other related costs		
6	Employee benefits		
7	Indirect materials and supplies		
8	Purchasing costs		
9	Handling, processing, assembly, and repackaging costs		
10	Offsite storage and warehousing costs		
11	Depreciation, amortization, and cost recovery allowance for equipment and facilities placed in service and not temporarily idle		
12	Depletion		
13	Rent		
14	Taxes other than state, local, and foreign income taxes		
15	Insurance		
16	Utilities		
17	Maintenance and repairs that relate to a production, resale, or long-term contract activity		
18	Engineering and design costs (not including section 174 research and experimental expenses)		
19	Rework labor, scrap, and spoilage		
20	Tools and equipment		
21	Quality control and inspection		
22	Bidding expenses incurred in the solicitation of contracts awarded to the applicant		
23	Licensing and franchise costs		
24	Capitalizable service costs (including mixed service costs)		
25	Administrative costs (not including any costs of selling or any return on capital)		
26	Research and experimental expenses attributable to long-term contracts		
27	Interest		
28	Other costs (Attach a list of these costs)		

orm	3115 (Rev 12-2003)						Page 8
Pai	t III Method of Cost Allocation (see instruction	ions) (continued)					
	tion C—Other Costs Not Required To Be Allocated	(Complete Section	n C only if the ap	plicant	is requesting to	o chan	ge its
neth	nod for these costs)				T		
					Present method	Propose	ed method
1	Marketing, selling, advertising, and distribution expen	ses	-	-			
2	Research and experimental expenses not included or	n line 26 above		-			
3	Bidding expenses not included on line 22 above		-	-			
4	General and administrative costs not included in Sec	tion B above		-		<u> </u>	
5	Income taxes		-	-		<u> </u>	
6	Cost of strikes		-	-		<u> </u>	
7	Warranty and product liability costs		-	-		<u> </u>	
8	Section 179 costs	-	-	-		<u> </u>	
9	On-site storage	-	-	-		 	
0	Depreciation, amortization, and cost recovery allowar	nce not included or	n line 11 above			-	
1 Sob	Other costs (Attach a list of these costs) edule E—Change in Depreciation or Amortiza	tion (oog instruct	-	•			
		•	•				
	icants requesting approval to change their method					this:	section
	icants must provide this information for each item or o					,	
	e: See the List of Automatic Accounting Method Cl						
	er sections 56, 167, 168, 197, 1400I, 1400L, or former election revocations (see instructions)	section 100 Do no	Kille Fortti 3113	with re	ispeci lo certali	i iate e	elections
			407/-) 44 /01 41	2010		V	□ N-
1	Is depreciation for the property determined under Re			JK) /		Yes	∐ No
_	If "Yes," the only changes permitted are under Regul			. ,			
2	Is any of the depreciation or amortization required to	be capitalized und	er any Code sec	tion (e	- -	Vaa	□ No
	263A)? If "Yes," enter the applicable section ▶	•	-	-	Ш	Yes	∐ No
_							
3	Has a depreciation or amortization election been ma 168(f)(1))?	ade for the propert	y (e g , the elect	ion und		Yes	□ No
	If "Yes," state the election made ►	-	-	-		165	
12	To the extent not already provided, attach a statemen			anged	Include in the	docoru	otion the
4 a	type of property, the year the property was placed in						
	income-producing activity	r cervice, and the	property o doc in	tile up	phodnico trade	or buo	111000 01
h	If the property is residential rental property, did the a	annlicant live in the	nroperty before	rentina	ıt2 🗆	Yes	□ No
	Is the property public utility property?	ipplicant live in the	property before	renang		Yes	□ No
5	To the extent not already provided in the applicant's	description of its	nresent method	evnlau			
•	under the applicant's present method (e.g., depreci	•	•	•	• •	•	
	1 162-3, nondepreciable section 263(a) property, projection					- C. C. C. C.	000001
6	If the property is not currently treated as depreciab					the p	roposed
-	change to depreciate or amortize the property		F F			F	
7	If the property is currently treated and/or will be t	treated as depreci	able or amortiza	able pro	operty, provide	the f	ollowina
	information under both the present (if applicable) and	·			- J , , J		
а	The Code section under which the property is or will			section	168(a))		
	The applicable asset class from Rev Proc 87-56, 19	•				168 (MACRS)
	or under section 1400L, the applicable asset class from		•				
	former section 168 (ACRS), an explanation why no a						
	been identified by the applicant					_	
С	The facts to support the asset class for the proposed	d method					
	The depreciation or amortization method of the prope		pplicable Code s	ection	(e g , 200% de	clining	balance

method under section 168(b)(1))

f The applicable convention of the property

e The useful life, recovery period, or amortization period of the property

FORM 3115 PART II QUESTION 13

ALASKA AIRMEN'S ASSOCIATION INC IS A 501(C)(3) ORGANIZED IN THE STATE OF ALASKA IT'S MISSION IS TO PROMOTE AVIATION SAFETY

IT PROVIDES PUBLICATIONS. PUBLIC RADIO BROADCASTS AND OTHER ITEMS TO PROMOTE

IT PROVIDES PUBLICATIONS, PUBLIC RADIO BROADCASTS AND OTHER ITEMS TO PROMOTE AVIATION SAFETY AND ASSISTS PILOTS IN DEVELOPING SAFE FLIGHT PLANS

FORM 3115 PART IV QUESTION 25

481(a) ADJUSTMENT CALCULATION

ACCOUNTS RECEIVABLE	3,877
PREPAID EXPENSES	9,764
MISC LIABILITIES	(3,160)
NET 481(a) ADJUSTMENT	10,481

Additional Data

Software ID: Software Version:

EIN: 92-0074966

Name: ALASKA AIRMEN'S ASSOCIATION INC

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a AIRPLANE RAFFLE		275,295	275,295		
b TRADESHOW		159,738	159,738		
c ADVERTISING		32,066	32,066		
d MERCHANDISE		14,624	14,624		
e SPECIAL EVENTS/DINNERS		5,260	5,260		