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Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

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

OMB No 1545-0052

2008

B. Check all that apply. Install return	For	calen	dar year 2008, or tax yea	ar beginning OCI	r 1, 2008		, and e	nding	SEP 30,	2009		
Index Inde	G	Check	all that apply: 1i	nitial return	Final return	<u> </u>	Amended retu	ırn 🗀	Address chan	ge	Name change	
TOM FOUNDATION Power and steed of PO Ex numer of mail is not colorized address) Power and steed of PO Ex numer of mail is not colorized address) Power and steed of PO Ex numer of mail is not colorized address) Power and steed of PO Ex numer of mail is not colorized address) Power and steed of PO Ex numer of mail is not colorized address) Power and steed address Po	Us	e the II	RS Name of foundation						A Employer ide	entification	number	
State Stat												
of type. A 300 B STREET City of town, sale, and ZiP code Instructions. NCHORAGE, AK 99503 I Check type of organization: [X] Section 501(c)(3) exempt private foundation Section 497(2)(1) nonexempt characteristic trust. Far market value of all assets at end of year 1 Accounting method: [X] Cash Accounting method: [X] Cash Code (a), the 16 Code	01	herwis	e, TDX FOUNDA	ATION					92-01	44730	<u> </u>	
See Specific Gray or town, state, and ZiP code INCHORAGE AX 9503 H Check type of organization: Section 501(c)(3) exempt private foundation Section 947(2)(1) nonexempt charitable trust Other (specify) S 28, 612. ((Part I. column) (d) must be or cach basis) Feart II. Analysis of Ference and Experies (a) Revenue and (a) Neverus and		•	· · · · · · · · · · · · · · · · · · ·	O box number if mail is not d	lelivered to street address)			Room/suite	B Telephone number			
Instructions. [July of town, state, and city composition of the compos				REET				402	(907) 278-2312			
Contributions, gritis, grants no source (or season of the stands or season or season or season of the stands or season				ind ZIP code					C If exemption ap	plication is p	ending, check here	
Section 497(a)(1) nonexempt charitable trust	1113		"" ANCHORAGE	<u>, AK 99503</u>					D 1. Foreign or	ganizations	s, check here	
Section 497(a)(1) nonexempt charitable trust	Н	Check	type of organization:	X Section 501(c)(3) e	xempt private foundation	n			2. Foreign orga check here a	inizations me and attach co	eting the 85% test, proputation	
Fair market value of all assets at end of year J Accounting method: IZI Cash		□ Sec	ction 4947(a)(1) nonexem	npt charitable trust	Other taxable private fo	unda	tion					
Part Analysis of Revenue and Expenses (the total of amounts the contemns (b), (c), and (c) may not necessary from the contemns (b), (c), and (c) may not necessary from the contemns (b), (c), and (c) may not necessary from the contemns (b), (c), and (c) may not necessary from the contemns (c) Adjusted met (c	I F	aır mai	rket value of all assets at o	end of year J Account	ting method: 🕱 Ca	sh	Accr	ual				
Part Analysis of Revenue and Exponses	0	rom P			ther (specify)				F If the foundat	tion is in a	60-month termination	
Contributions, gritis, grants, etc., received 153, 281.		▶\$	28	3 , 612 . (Part I, colu	umn (d) must be on ca	sh b	pasis)					
1 Contributions, grifts, grants, etc., received 153, 281.	P	art I	Analysis of Revenue an	nd Expenses	(a) Revenue and		(b) Net in	vestment	(c) Adjuste	ed net	(d) Disbursements	
Check			necessarily equal the amoun	ımns (b), (c), and (d) may not nts ın column (a))		s						
Interest on assumpts and temporary 12. 12. STATEMENT 1		1	Contributions, gifts, gran	ts, etc., received	153,28	1.		-				
Sach investments 12		1										
4 Dividends and interest from securities 5 a Gross rents 5 Ne retail income or (loss) 6 Ner gain or (loss) from sale or assets not on line 10 6 Gross scales prine for all assets on line 8 and 10 assets on line 10 assets on line 8 and 10 assets on line 8 and 10 assets on line 10 assets on		3	Interest on savings and temperature investments	orary	1	2.		12.			STATEMENT 1	
Sa Gross rents Sa Not cental income or (ross)		1		om securities	_							
Sample S		5a	Gross rents									
Day Corosis sales prices for all assess on line 8a Capital gain net recover (from Part IV, line 2) Day Capital gain net recover (from Part IV, line 2) Day		Ь	Net rental income or (loss)									
8 Net short-term capital gain 9 Income modifications 10a and allowances b Less Cost of poods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 153, 293. 12. 0. 0. 0. 0. 0. 0. 14 Other employee salaries and wages 7, 650. 0. 0. 0. 7, 650. 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 2 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, girts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Less Cost of poods sold c Gross sales less returns b Less Cost of poods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 153, 293. 12. 0. 0. 0. 0. 0. 0. 7, 650. 0. 0. 7, 650. 0. 0. 7, 650. 0. 0. 7, 650. 0. 0. 7, 650. 0. 0. 7, 650. 0. 0. 7, 650. 0. 0. 7, 650. 0. 0. 7, 650. 0. 0. 0. 7, 650. 0. 0. 7, 650. 0. 0. 0. 0. 7, 650. 0. 0. 0. 0. 7, 650. 0. 0. 0. 0. 7, 650. 0. 0. 0. 7, 650. 0. 0. 0. 7, 650. 0. 0. 0. 0. 0. 7, 650. 0. 0. 0. 0. 7, 650. 0. 0. 0. 0. 0. 7, 650. 0. 0. 0. 0. 0. 7, 650. 0. 0. 0. 0. 0. 0. 7, 650. 0. 0. 0. 0. 0. 7, 650. 0.	4	6a	Net gain or (loss) from sale of	assets not on line 10								
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12 Total. Add lines 1 through 11 153, 293. 12. 0.			<u>-</u>				***					
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13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 7,650. 0. 0. 0. 7,650. 15 Pension plans, employee benefits 16a Legal fees		12	Total. Add lines 1 throug	jh 11	153,29	3.		12.		0.		
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17 Interest 18 Taxes	ğ	b	Accounting fees			9						
18 Taxes	X	C	Other professional fees				MAY]	<u> 2 2010 </u>				
22 Printing and publications 23 Other expenses	<u>\$</u>	17	Interest						18			
22 Printing and publications 23 Other expenses	ra-	18	Taxes				OGD	ENLLY				
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27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0.	_	1			139,79	2.		_0.		0.	139,792.	
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b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) 0.			Excess of revenue over expen	nses and disbursements	13,50	<u>1</u> .						
C Adjusted net income (if negative, enter -0-)		1	•			_ 1		12.				
		С	Adjusted net income (if n	egative, enter -0-)						0.		

Page 2

Part	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
_ are	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	15,111.	28,612.	28,612.
2	Savings and temporary cash investments			
3	Accounts receivable ▶			
	Less: allowance for doubtful accounts			
4	Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable			
	Less: allowance for doubtful accounts			
σ g	Inventories for sale or use			
Assets				
¥ 10.	Investments - U.S. and state government obligations			
	Investments - corporate stock			
	·			
	Investments - corporate bonds			.
111	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
	Investments - mortgage loans			
13	Investments - other			
14	Land, buildings, and equipment basis 78,856.			
	Less accumulated depreciation STMT 3 ►			
15	Other assets (describe ▶)			
16	Total assets (to be completed by all filers)	15,111.	28,612.	28,612.
17	Accounts payable and accrued expenses			
18	Grants payable			
മ്ര 19	Deferred revenue			
Liabilities 50 21 20 21	Loans from officers, directors, trustees, and other disqualified persons			
<u>명</u> 21	Mortgages and other notes payable			
22	Other liabilities (describe >)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	Unrestricted			
<u>E</u> 25	Temporarily restricted			
B 26	Permanently restricted			
or Fund Balances	Foundations that do not follow SFAS 117, check here			
교	and complete lines 27 through 31.			
Ö 27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets 30 30 30	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ASS 29	Retained earnings, accumulated income, endowment, or other funds	15,111.	28,612.	
# 20 20	Total net assets or fund balances	15,111.	28,612.	
₹ 30	Total liet assets of fullu balances		20,012.	
21	Total liabilities and net assets/fund balances	15,111.	28,612.	
31			20,012.	
Part	III Analysis of Changes in Net Assets or Fund B	alances		
4 Tota	I not accept on fund halanage at haginages of year. Part II, column (a) line	20		
	I net assets or fund balances at beginning of year - Part II, column (a), line	JU		15 111
•	st agree with end-of-year figure reported on prior year's return)		1	15,111.
	r amount from Part I, line 27a		2	13,501.
	r increases not included in line 2 (itemize)		3	0.
	lines 1, 2, and 3		4	28,612.
	eases not included in line 2 (itemize)		5	0.
6 Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		28,612.

	990-RF (2008) TDX FOUNDATION		<u>0144</u>			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), o	r 4948	- see i	nstru	ctior	<u>IS)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter "N/A" on line 1.					
	Date of ruling letter: (attach copy of ruling letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1%	1_	ļ			0.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			_	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			_	0.
6	Credits/Payments:					
a	2008 estimated tax payments and 2007 overpayment credited to 2008 6a 6a		1			
b	Exempt foreign organizations - tax withheld at source	_				
C	Tax paid with application for extension of time to file (Form 8868) 6c	_				
d	Backup withholding erroneously withheld 6d 6d					
7	Total credits and payments. Add lines 6a through 6d	7	<u> </u>			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8_				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	► 10	<u> </u>			
	Enter the amount of line 10 to be: Credited to 2009 estimated tax	<u>► 11</u>	<u>.</u>			
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interv	ene ın			Yes	_
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials public	shed or				
	distributed by the foundation in connection with the activities.					
	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	_				1
	(1)	<u>o.</u>				ĺ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	n, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		7/3	4a		X
-	If "Yes," has it filed a tax return on Form 990-T for this year?	1	A/N	4b		17
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the	state law			v	1
	remain in the governing instrument?			6	X	_
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	-
	If "Yes," complete Part II, col. (c), and Part XV.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			['		
-	of each state as required by General Instruction G? If "No," attach explanation			8b	_X_	<u> </u>
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	calendar				
	year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			For	rm 990	-PF	(2008)

Forr	n 990-PF (2008) TDX FOUNDATION	92-014	<u>4730</u>		Page 5
P	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of]]		1
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			·	
	August 17, 2008?		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	<u></u>
	Website address ► <u>WWW.TANADGUSIX.COM</u>				
14	The books are in care of ► TDX CORPORATION Telephon	e no. ▶ <u>907-2</u>	<u> 78-2</u>	<u> 312</u>	
	Located at ► 4300 B STREET, ANCHORAGE, AK	ZIP+4 ▶ 9	<u>9503</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				·
	and enter the amount of tax-exempt interest received or accrued during the year	15	<u>N</u>	/ <u>A</u>	
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		ļ	Yes	No
1	During the year did the foundation (either directly or indirectly):		1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			l
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			Į
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No	1 1		1
	(5) Transfer any income or assets to a disqualified person (or make any of either available				İ
	for the benefit or use of a disqualified person)?	Yes X No			ĺ
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	if the foundation agreed to make a grant to or to employ the official for a period after	- C	1		İ
	termination of government service, if terminating within 90 days.)	Yes X No	4		
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				1
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/A ►□	1 <u>b</u>		
	Organizations relying on a current notice regarding disaster assistance check here	▶□	1	ļ	}
- 1	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not correct	ed			
	before the first day of the tax year beginning in 2008?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating found	ation			
	defined in section 4942(j)(3) or 4942(j)(5)):				
	a At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) be				1
	before 2008?	Yes X No			
	If "Yes," list the years \blacktriangleright ,,,,,,		1		
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to in		ļ		j
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and				•
	statement - see instructions.)	N/A	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	<u> </u>				
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	٦. . .]	
	during the year?	Yes X No	ł		
	b If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or disqualified pers				1
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Scher				
	Form 4720, to determine if the foundation had excess business holdings in 2008.)	N/A	3b	-	75
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		<u>4a</u>		_X_
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable product the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable product the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable product the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable product the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable product the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable product the foundation in the foundation of the foundation in the foundation of the foundation in the fo	urpose tnat			x
	had not been removed from jeonardy before the first day of the tay year beginning in 2008?		i 4n	1	ı X

Form **990-PF** (2008)

Form 990-PF (2008) TDX FOUNDATION	4700 Mari Di F	Domilio di	92-0144/	<u>30 Page 6</u>
Part VII-B Statements Regarding Activities for Which I	orm 4/20 May Be F	sequirea (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		LX Ye	es L No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y€	es 🗶 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			i i
the prevention of cruelty to children or animals?		Y€	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	fer the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		!	5b X
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ined		
expenditure responsibility for the grant?		/A 🔲 Ye	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.4945				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •			
a personal benefit contract?		☐ Y€	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If you answered "Yes" to 6b, also file Form 8870.	ordenar borront borro abtr		-	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ v ₄	es X No	i]
b If yes, did the foundation receive any proceeds or have any net income attribute				7b
Information About Officers Discotors Tweet		nagers, Highly		
Part VIII Paid Employees, and Contractors	, r oanaanon ma			
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
	to position	enter-o-y	compensation	<u>unovianous</u>
SEE STATEMENT 4		0.	0.	0.
DEB DIRIEMENT 4		•	•	
·				
Occupantian of the highest maid ampletons (Alberthan the sains	luded on line 4). If none	antes INONE II		
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	` 'hour's per week -	(c) Compensation	(d) Contributions to employee benefit plans and deferred	aċcount, other
	devoted to position		compensation	allowances
NONE				
				<u> </u>
				I
Total number of other employees paid over \$50,000				.0
			Form	990-PF (2008)

Form 990-PF (2008) TDX FOUNDATION	92-0	014 <u>4730</u> Page 7
Part VIII Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, er	nter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant st		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers p	produced, etc.	
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
1 27/42		
2	•	
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, see	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
-	Average of monthly cash balances	1b	21,862.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	21,862.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets] 2	0.
3	Subtract line 2 from line 1d	3	21,862.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	328.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	21,534.
6	Minimum investment return. Enter 5% of line 5	6	1,077.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	1,077.
2a	Tax on investment income for 2008 from Part VI, line 5]	
b	Income tax for 2008. (This does not include the tax from Part VI.)	<u> </u>	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,077.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,077.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,077.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		400 -00
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	139,792.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
Þ	Cash distribution test (attach the required schedule)	3b	100 500
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	139,792.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		•
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	139,792.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	qualifies for th	e section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
4 B - 1 b -	Corpus	Years prior to 2007	2007	2008
1 Distributable amount for 2008 from Part XI,				1 077
line 7				1,077.
2 Undistributed income, if any, as of the end of 2007 a Enter amount for 2007 only			0.	
b Total for prior years:				
g Total for prior years.		0.		
3 Excess distributions carryover, if any, to 2008:				
a From 2003 81,956.				
b From 2004 34,393.				
c From 2005 34,790.				
d From 2006 39,085.				
e From 2007 53,559.				
f Total of lines 3a through e	243,783.			
4 Qualifying distributions for 2008 from			· · · · · · · · · · · · · · · · · · ·	
Part XII, line 4: ►\$139,792.				
a Applied to 2007, but not more than line 2a			0.	_
b Applied to undistributed income of prior		· · ·		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		<u> </u>	
d Applied to 2008 distributable amount			· · · · · · · · · · · · · · · · · · ·	1,077.
e Remaining amount distributed out of corpus	138,715.		<u></u>	
Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:		:		
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	382,498.			
b Prior years' undistributed income. Subtract	30272500			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2007. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2008. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2009				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2003				
not applied on line 5 or line 7	81,956.			
9 Excess distributions carryover to 2009.				1
Subtract lines 7 and 8 from line 6a	300,542.			<u> </u>
10 Analysis of line 9:				
a Excess from 2004 34,393.				
b Excess from 2005 34,790.				
c Excess from 2006 39,085.				
d Excess from 2007 53,559.				
e Excess from 2008 138,715.			L	5 000 DE (0000)

	NDATION				.44730 Page 10
Part XIV Private Operating F			· · · · · · · · · · · · · · · · · · ·	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo			▶ ـ		
b Check box to indicate whether the found		ng foundation described	- · · · · · · · · · · · · · · · · · · ·	4942(j)(3)_or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1	
income from Part I or the minimum	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Total
investment return from Part X for			1		
each year listed					
b 85% of line 2a					
 Qualifying distributions from Part XII, 					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
 Qualifying distributions made directly 					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter	·				
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public		 			
and 5 or more exempt					
organizations as provided in				•	
section 4942(j)(3)(B)(iii)				-	
(3) Largest amount of support from					
an exempt organization				· ·	
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5 000 or m	ore in assets
at any time during t					010 111 400010
1 Information Regarding Foundation	-	· · · · · · · · · · · · · · · · · · ·			······································
a List any managers of the foundation wh	•	than 2% of the total co	ntributions received by th	ne foundation before the clo	ose of any tax
year (but only if they have contributed r			,		•
NONE					
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corporation	ı (or an equally large por	tion of the ownership of a r	partnership or
other entity) of which the foundation ha	s a 10% or greater intere	st.	, , , , , , ,		•
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., F	Programs:		
Check here if the foundation of		• • • • •	-	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indi-	viduals or organizations	under other conditions,	complete items 2a, b, c, an	d d.
a The name, address, and telephone num	ber of the person to who	m applications should b	e addressed:		
SEE STATEMENT 5					
b The form in which applications should t	oe submitted and informa	ation and materials they	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	le euch se hy soossashis	al areas charitable field	e kinde of inetitutions of	r other factore:	
u Any resulctions of illinations off award	o, outil as by yeographic	ai areas, enantable field	o, miluo oi mattutions, u	, other 1200013.	

Tare XV Supplementary information			-	
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
		1		
SEE STATEMENT 6				
Total	. I		▶ 3a	70,000.
b Approved for future payment				
NONE				
HOME				
Total	<u> </u>		▶ 3b	0.

nter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(C)	(d)	Related or exempt
Program service revenue:	code	Amount	sion	Amount	function income
a					
b					
C		•			
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	12.	
Dividends and interest from securities					
Net rental income or (loss) from real estate:		•			
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal	····				
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b				***************************************	
C					
			1 1		
a					
de			1 1	l l	
e		. 0.		12.	
e Subtotal. Add columns (b), (d), and (e)		. 0.	,		1
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations	.)			13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie	s to the Acco	omplishment of E	xemp	t Purposes	1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1
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Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities ine No. Explain below how each activity for which in	s to the Acco	omplishment of E	xemp	t Purposes	1

For	m 990-l	PF (2008	<u>)</u> TD:	K F	OUNDATION						<u>92-0</u>	0144730	Page 1	3_
P	art X				egarding Transfers	To a	and Transactions a	and F	Relatio	onships Wit	h Non	charitable		_
_	5.44		Exempt O										es No	_
1					rectly engage in any of the fo (3) organizations) or in secti					section 50 I(c) o	1	 	62 140	<u>'</u>
					lation to a noncharitable exem			iizatioi	15 '					
•	1 11alis (1) (ii ine reporting	ounua	ation to a nonchantable exem	ipt or	ganization of,					1a(1)	x	
		other ass	ate									1a(2)	X	
,		transact										Tu(E)	- 1	_
				harital	able exempt organization							1b(1)	Х	
	٠,,				oncharitable exempt organizat	าดก						1b(2)	X	
					or other assets							1b(3)	X	
	,		ement arrangei									1b(4)	X	
			loan guarantee:									1b(5)	Х	
	(6) F	Performa	nce of services	or me	embership or fundraising soli	citatio	ons					1b(6)	X	
	: Sharı	ng of fac	ilities, equipme	nt, ma	ailing lists, other assets, or pa	ud em	ployees					1c	X	
(1 If the	answer t	to any of the ab	ove is	"Yes," complete the following	sche	edule. Column (b) should al	ways s	how the	fair market value	of the go	oods, other asset	s,	
	or se	vices giv	en by the repo	ting fo	foundation. If the foundation i	receiv	ed less than fair market valu	ie in at	ny transa	action or sharing	arranger	nent, show in		
	colun				other assets, or services rece		 							_
(a)	Line no	(b)	Amount involve	d	 		exempt organization	_ _	(d) Desc	ription of transfers, t	ransaction	ns, and sharing arrar	gements	_
					N,	/A								
								_						_
			···-··											
												-		—
								+						
														_
								+						—
_							· · · · · · · · · · · · · · · · · · ·	-						-
_														—
												· -		_
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	-							+						_
								1-		•				_
									-					_
							-							_
2:	ls the	foundat	ion directly or ii	ndirect	tly affiliated with, or related to	o, one	or more tax-exempt organi	ızatıon	s descrit	ed				_
					r than section 501(c)(3)) or i							Yes	X No)
	If "Ye	s," comp	lete the followin	g sch	edule.									
			(a) Name	of org	ganization		(b) Type of organization	<u> </u>		(c) Descript	on of rel	lationship		_
			N,	/A_									_	_
								<u> </u>						_
								<u> </u>						_
								ļ <u> </u>						—
												line it in the comment		_
					have examined this return, includir er than taxpayer or fiduciary) is bas						je and bei	ilei, it is true, correct	•	
		1	10	0	1/		5/06/10			FO				
Ó	- C	anatura	of officer or true	100	ma.		0 / UG/10	->	Title					
Sign Here	P 31	<u> </u>					Date I r	Date		Check if		Preparer's identifying	ıg number	_
Ē	حي	Prepari signatu		00	13 can Sam		ess 3	Date 3/3	a la	self-		,	J	
ίΣ	Paid sparer'se Only			XXX.	TATO A COMPOSITION	<u></u>		- 1 - 2	F 94-	employed ► EIN ►	السسا			_
	Paid Preparer Use Only	firm's nan			INDA, COTTRELI . C STREET, SI					EIN				_
	دے				ORAGE, AK 99					Phone no		907)278-	8878	
	L	<u> </u>			, / / / / / / / / / / / / / / /					1 . 110110 110		 		_

Schedule B (Form 990, 990-EZ,

or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

2008

Employer identification number Name of the organization 92-0144730 TDX FOUNDATION Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions) General Rule For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1 Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc , purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Schedule B (Form 990, 990-EZ, or 990-PF) (2008) LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990. These instructions will be issued separately.

Employer identification number

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TDX FOUNDATION	92-0144730

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	TRIDENT SEAFOODS 5011 SPENDARD ROAD ANCHORAGE, AK 99517-3320	s60,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	ICICLE SEAFOODS 4019 21ST AVE W SEATTLE SEATTLE, WA 98199	\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	U.S. DEPARTMENT OF ENERGY 1617 COLE BLVD GOLDEN, CO 80401	\$69,641. 	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 	Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

2008 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

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Current Year Deduction	0 0	
Current Sec 179	0.	
Accumulated Depreciation	78,856.	
Basis For Depreciation	78,856.	
Reduction In Basis	.0	
Bus % Excl		
Unadjusted Cost Or Basis	78,856.	
Line No	17	
Life	2.00	
Method	200DB	
Date Acquired	090197200DB	
Description	HANDICAP BUS * TOTAL 990-PF PG 1 DEPR	
Asset	1	

828102 04-25-08

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY CA	SH II	NVESTMENTS	STAT	EMENT	1
SOURCE					A	MOUNT	
INTEREST INCOME							12.
TOTAL TO FORM 990-PF, PART I	, LINE 3, CO	LUMN A					12.
FORM 990-PF	OTHER E	XPENSES			STAT	EMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC	_	(C) ADJUSTED NET INCOM		(D) HARITA PURPOS	
BANK CHARGES SUPPLIES SUBCONTRACTORS	150. 127. 59,410.		0. 0. 0.	·	0. 0. 0.		50. 27.
TO FORM 990-PF, PG 1, LN 23	59,687.		0.		0.	59,6	87.
FORM 990-PF DEPRECIATION OF	F ASSETS NOT	HELD FOR	INV	ESTMENT	STAT	EMENT	3
DESCRIPTION		T OR BASIS		UMULATED RECIATION	вос	K VALU	Œ
HANDICAP BUS		78,856.		78,856.			0.
TOTAL TO FM 990-PF, PART II,	LN 14	78,856.		78,856.		 .	0.

	IST OF OFFICERS, D ND FOUNDATION MANA		STATI	EMENT 4
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
DARIA DIRKS 4300 B STREET, SUITE 402 ANCHORAGE, AK 99503	DIRECTOR 1.00	0.	0.	0.
HEDY CHRISTENSEN 4300 B STREET, SUITE 402 ANCHORAGE, AK 99503	DIRECTOR 1.00	0.	0.	0.
RENA KUDRIN 4300 B STREET, SUITE 402 ANCHORAGE, AK 99503	TREASURER 1.00	0.	0.	0.
TONIA BITLNER KUSHIN 4300 B STREET, SUITE 402 ANCHORAGE, AK 99503	SECRETARY 1.00	0.	0.	0.
DOUGLAS P. KOPROWSKI 4300 B STREET, SUITE 402 ANCHORAGE, AK 99503	PRESIDENT 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT

5

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

TDX FOUNDATION 4300 B STREET, SUITE 402 ANCHORAGE, AK 99503

TELEPHONE NUMBER

907-278-2312

FORM AND CONTENT OF APPLICATIONS

A WRITTEN APPLICATION IS TO BE ACCOMPANIED BY A LETTER OF INTENT, TRANSCRIPTS AND A LETTER OF ACCEPTANCE.

ANY SUBMISSION DEADLINES

AUGUST 1ST OF THE APPLICABLE YEAR

RESTRICTIONS AND LIMITATIONS ON AWARDS

APPLICANTS MUST BE NATIVE OR DESCENDANTS OF SUCH NATIVES THAT ARE RECORDED OR BENEFICIAL OWNERS OF TDX COMMON STOCK.

	NTS AND CONTRIBUTIONS AID DURING THE YEAR	STATEMENT 6
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS AMOUNT
ALEX EMANOFF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	4,000.
ANTHONY SAVAGLIA C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	4,000.
CANDICE STEPETIN C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	2,000.
CHERYL LESTENKOFF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	4,000.
ELARY GROMOFF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	1,000.
JENEA CHAMBERS C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	6,000.
JENNIFER ZACHAROF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	1,000.
JOHN TUCK C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	4,000.
JONAS LESTENKOF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	1,000.

TDX FOUNDATION		92-0144730
LYNELLE PHILEMONOFF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	2,000.
MARIA MALVANSKY C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	2,000.
MARY SWETZOF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	2,000.
MICHAEL BALDWIN C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	2,000.
MICHELLE LEKANOF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	2,000.
MONICA SAVAGLIA C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	4,000.
MYRON MELOVIDOV JR C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	6,000.
NATALIE GROMOFF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	2,000.
PAUL PHILEMONOFF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	4,000.
PERFENIA PLETNIKOFF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	1,000.

TDX FOUNDATION		92-0144730
PLATONIDA KASHATOK C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	1,000.
RACHEL PHILEMONOFF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	2,000.
RACHEL PHILEMONOFF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	2,000.
RAYMOND MELOVIDOV C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	2,000.
SHIONA MELOVIDOV C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	4,000.
TINA KRUKOFF C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	2,000.
TINA WOODS C/O 4300 B ST SUTE 402, ANCHORAGE, AK 99503	NONE EDUCATION	3,000.
TOTAL TO FORM 990-PF, PART XV	, LINE 3A	70,000.

Form **8868** (Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 4-2009)

If you are filing for an Automatic 3	3-Month Extension, complete only Part I and check this box	c	ightharpoons
	Not Automatic) 3-Month Extension, complete only Part II (
Do not complete Part II unless you	have already been granted an automatic 3-month extension c	on a previously filed	Form 8868
Part I Automatic 3-Mo	onth Extension of Time. Only submit original (no copies	s needed).	
A corporation required to file Form 9 Part I only	90-T and requesting an automatic 6-month extension - check t	this box and comple	te
All other corporations (including 112 to file income tax returns.	0-C filers), partnerships, REMICs, and trusts must use Form 70	004 to request an exi	tension of time
noted below (6 months for a corpora (not automatic) 3-month extension o	you can electronically file Form 8868 if you want a 3-month au ation required to file Form 990-T). However, you cannot file For r (2) you file Forms 990-BL, 6069, or 8870, group returns, or a l and signed page 2 (Part II) of Form 8868. For more details on for Chanties & Nonprofits.	m 8868 electronically composite or conso	y if (1) you want the additional lidated Form 990-T Instead,
Type or Name of Exempt Organi	zation	Er	nployer identification number
TDX FOUNDATI	ON		92-0144730
filing your 4300 B STREE	m or suite no If a P O. box, see instructions. T. NO. 402		
return 5ee	, state, and ZIP code. For a foreign address, see instructions.		
Check type of return to be filed(file	a separate application for each return):		
Form 990 Form 990-BL Form 990-EZ X Form 990-PF	Form 990-T (corporation) Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) Form 1041-A	Form 4720 Form 5227 Form 6069 Form 8870	
 The books are in the care of Telephone No. ■ 907-278 If the organization does not have If this is for a Group Return, enter 	TDX CORPORATION 4300 B STREET - ANCHORAGE, AK 9 -2312 FAX No. ▶ an office or place of business in the United States, check this the organization's four digit Group Exemption Number (GEN) roup, check this box ▶ □ and attach a list with the names	box If this is	- ·
MAY 15, 201 Is for the organization's return Calendar year Calendar year	for.	nızation named abov	re. The extension
2 If this tax year is for less than	12 months, check reason: Initial return Fi	inal return	Change in accounting period
3a If this application is for Form 9 nonrefundable credits. See ins	90-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, le	· I	a \$ 0.
	90-PF or 990-T, enter any refundable credits and estimated		
	and a manufacture and a contract and a second at	3	ь \$ О.
tax payments made. Include a	ny prior year overpayment allowed as a credit.		0 0
c Balance Due. Subtract line 3b	required, by using EFTPS (Electronic Federal Tax Payment Sy	red, ystem).	c \$ 0.

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