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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Open to Public

OMB No 1545-0047

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

For the 2009 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable use IRS label o INUIT CIRCUMPOLAR COUNCIL-ALASKA print or Name change type 92-0091959 Doing Business As Initial return See Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Specific Termin-000 C STREET N201 907-275-9058 Amended 1,503, City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-tion pending ANCHORAGE, AK 99503 H(a) Is this a group return ☐Yes 🗶 No F Name and address of principal officer. KELLY ENINGOWUK for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? Yes Tax-exempt status X 501(c) (3) (insert no) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► HTTP: //ICCALASKA.ORG H(c) Group exemption number ▶ Form of organization: X Corporation Trust Other > Association Year of formation: 1983 M State of legal domicile: AK Part I Summary Briefly describe the organization's mission or most significant activities: PROMOTION AND PRESERVATION OF Governance THE SPIRIT AND UNITY OF INUIT SOCIETY AND PRESENTATION OF INUIT Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets 2 13 Number of voting members of the governing body (Part VI, line 1a) 13 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 1 5 Total number of employees (Part V, line 2a) 30 6 Total number of volunteers (estimate if necessary) 0. Total gross unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, Impi34 **Prior Year Current Year** 1,319,725. 756,030 Contributions and grants (Part VIII, line 1h) Revenue ğ NOV 0 1 2010 66,781. Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 3,055. Other revenue (Part VIII, column (A), lines 5, 6d, 8d 9c, leccand the 113,881. 756,030 503,442. Total revenue - add lines 8 through 11 (must equal Parts Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 Benefits paid to or for members (Part IX, column (A), line 4) 298,616. 119,522. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 1,077,250. 167,188 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 465,804. 1,196,772. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 290,226 306,670. Revenue less expenses. Subtract line 18 from line 12 58 **Beginning of Current Year End of Year** 643,881 628,898. Total assets (Part X, line 16) 414,202. 20,363. 21 Total liabilities (Part X, line 26) Zet Egg Net assets or fund balances. Subtract line 21 from line 20 214,696. 623,518. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, protoging accompanying schedules and statements, and 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 preparer has any knowledge. 0/22/10 Sign Signature of officer Here EXECUTIVE DIRECTOR KELLY ENINGOWUK. Type or print name and title Date Check if Preparer's identifying number (see instructions) Preparer's self-employed Paid signature Preparer's Firm's name (or MIKUNDA. COTTRELL & CO., yours if self-employed), Use Only 3601 C STREET, SUITE 600 address, and Phone no. $\triangleright 907-278-8878$ ANCHORAGE, AK 99503 X Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

orm	990 (2009) INUIT CIRCUMPOLAR COUNCIL-ALASKA	92-0091959 Page 2
Par	t III Statement of Program Service Accomplishments	
1	Briefly describe the organization's mission:	
	THE ORGANIZATION STRIVES TO STRENGTHEN UNITY AMONG T	HE INUIT OF THE
	CIRCUMPOLAR REGION AND PROMOTE INUIT RIGHTS AND INTE	RESTS ON AN
	INTERNATIONAL LEVEL THROUGH CHARITABLE, SCIENTIFIC,	
	EDUCATIONAL ACTIVIES.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	. XYes No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	vices? Yes X No
_	If "Yes," describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program services	s by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amo	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$ 96,181. including grants of \$) (Revenue \$
	PROMOTED INUIT CULTURE AND CONTACT BETWEEN CULTURES	IN THE CIRCUMPOLAR
	REGION THROUGH RESEARCH, TRAVEL, AND CONFERENCES	
		<u></u>
4b	(Code) (Expenses \$ 802,835 • including grants of \$) (Revenue \$ 66,781.)
	HOSTED THE INDIGENOUS PEOPLES SUMMIT ON CLIMATE CHAN	
	THE SUMMIT WAS TO ENGAGE INDIGENOUS PEOPLES FROM THR	
	TO EXCHANGE THEIR KNOWLEDGE AND EXPERIENCE IN ADAPTI	
	OF CLIMATE CHANGE AND TO DEVELOP KEY MESSAGES AND RE	COMMENDATIONS TO
	POLICYMAKERS.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	•	
		· · · · · · · · · · · · · · · · · · ·
4d	Other program services. (Describe in Schedule O.)	,
	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ \$ 899,016.	
	Total program service expenses ▶ \$ 899,016.	

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
•	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х
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 similar funds or 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		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
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		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		,	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			1
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	Х	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	-		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional . 12A X	40		-
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a	-	<u> </u>
D	•	446		X
45	and program service activities outside the United States? If "Yes," complete Schedule F, Part I Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		Α.
15	or entity located outside the United States? If "Yes," complete Schedule F, Part II	45		X
40	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		A
16	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
47		10	<u> </u>	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17]	Х
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			- 43
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u> </u>
13	complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
	and any enganisation of protect only of many independent in roof company contracts.		•	

Form 990 (2009) INUIT CIRCUMPOLAR COUNCIL-ALASKA

Part IV Checklist of Required Schedules (continued)

			Yes	No
24	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		res	NO
21	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
_	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) 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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	_27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			٦,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			.
	If "Yes," complete Schedule N, Part I	31	_	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			х
	Schedule N, Part II	32		^
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		x
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Δ.
34	Was the organization related to any tax-exempt or taxable entity?	34		x
~ -	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34_	-	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		х
~~	If "Yes," complete Schedule R, Part V, line 2	35		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	36		Х
27	If "Yes," complete Schedule R, Part V, line 2	-30		 ^
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	<u> </u>		
38	Note. All Form 990 filers are required to complete Schedule O.	38	х	
	140te. / W. F. Oriti 200 meta ata ragama ta aampiata aariaada a.		990	(2009)
				,

Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 18 U.S. Information Returns. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X 1c (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **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 Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a 7b 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 X 7с to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e **7**f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? X 7g X h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings 8 at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: 10 10a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management				
			1 2	Yes	No
1a		1a	13		
b	Enter the harmon of young members that are mesperiority	1b	13		,
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship v	with any other			- •
	officer, director, trustee, or key employee?		_2_	_X_	
3	Did the organization delegate control over management duties customanly performed by or under the	direct supervision	N. C.		v
	of officers, directors or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form		. 4		X X X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	••	5		_ <u></u>
6	Does the organization have members or stockholders?	have of the	6		
7a	Does the organization have members, stockholders, or other persons who may elect one or more mem	bers of the	7a		X _
	governing body?	ne?	7a 7b		X
þ	Are any decisions of the governing body subject to approval by members, stockholders, or other personal the organization contemporaneously document the meetings held or written actions undertaken during the organization contemporaneously document the meetings held or written actions undertaken during the organization contemporaneously document the meetings held or written actions undertaken during the organization contemporaneously document the meetings held or written actions undertaken during the organization contemporaneously document the meetings held or written actions undertaken during the organization contemporaneously document the meetings held or written actions undertaken during the organization contemporaneously document the meetings held or written actions undertaken during the organization contemporaneously document the meetings held or written actions undertaken during the organization contemporaneously document the meetings held or written actions undertaken during the organization contemporaneously document the meetings held or written actions undertaken during the organization during the organization of the organization during the organization dur		76		- 41
8	-	illig the year			•
_	by the following:		- 8a	X	-
a	The governing body? Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed at the			
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	ica at tric	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	enue Code.)			
	tion Di i onoto (mis occion s'roquoto mornation assat poneto net roquies s' un internation			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		10a		X
-	If "Yes," does the organization have written policies and procedures governing the activities of such ch	apters, affiliates,			
_	and branches to ensure their operations are consistent with those of the organization?		10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing	g the form?	11	Х	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				-
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could	l give rise			
	to conflicts?		12b		_X_
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," describe		'	
	ın Schedule O how this is done .		12c	X	
13	Does the organization have a written whistleblower policy?		13	X	
14	Does the organization have a written document retention and destruction policy?		14	X	
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?			7.	1
а	The organization's CEO, Executive Director, or top management official		15a	X_	X
b	Other officers or key employees of the organization	••	15 <u>b</u>		
40	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	ant with a			
ıoa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements and the proof	ant wint of	16a		X
	taxable entity during the year?	ate ite narticinatio			
D	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluing joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization of the orga		" '		
	exempt status with respect to such arrangements?	inzation 5	16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) av	allable for		
.5	public inspection. Indicate how you make these available. Check all that apply.	, , , ,			
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, con	nflict of interest p	olicy, and fina	ancial	
	statements available to the public.		•		
20	State the name, physical address, and telephone number of the person who possesses the books and	records of the o	rganization:	_	
-	KELLY ENINGOWUK, EXECUTIVE DIRECTOR - 907-274-9058				
	3000 C STREET, SUITE N201, ANCHORAGE, AK 99503				
			Form	990	(2009)

Part VIII 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. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not co (A) Name and Title	(B) Average		(C) Position (check all that apply)					(D) Reportable	(E) Reportable	(F) Estimated
	hours	(cl				арр	ly)	compensation	compensation	amount of
	per week	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
JAMES F STOTTS										
EXECUTIVE DIRECTOR/ICC C	40.00	X		Х	ļ		<u> </u>	111,717.	0.	0.
EDWARD ITTA						'			•	•
PRESIDENT	1.00	X		X	_	-		0.	0.	0.
CHUCK GREENE							ŀ		0	_
VICE PRESIDENT	0.50	X	-	X		├	-	0.	0.	0.
EUGENE BROWER	0 50								•	_
DIRECTOR	0.50	X	┝-	_	\vdash	┝		0.	0.	0.
RICHARD GLENN	0 50				ļ				•	_
DIRECTOR	0.50	X	-	_	<u> </u>	-		0.	0.	0.
GEORGE EDWARDSON	0 50						l		0.	0
DIRECTOR	0.50	X	-		ļ	-	_	0.	<u> </u>	0.
MARTHA WHITING	0 F0	•						0.	0.	0.
DIRECTOR	0.50	A.	┢	├	┢		├	<u> </u>	<u> </u>	<u> </u>
MARIE GREENE	0.50			x				0.	0.	0.
SECRETARY/TREASURER JACKIE HILL	0.50	Α.	┢	^		\vdash	\vdash		0.	<u> </u>
DIRECTOR	0.50	v						0.	0.	0.
ROY ASHENFELTER	0.50	┢	<u> </u>	\vdash	 	┼─	-			
DIRECTOR	0.50	v		ł				0.	0.	0.
MELANIE EDWARDS	0.50	^			-		_			
DIRECTOR	0.50	Y						0.	0.	0.
VIVIAN KORTHIUS	0.50		\vdash	 		 				
DIRECTOR	0.50	x		1			1	0.	0.	0.
WILLIE GOODWIN JR	0.30		H		1	1				
DIRECTOR	0.50	x					l	0.	0.	0.
LEE RYAN	3,755					1				
DIRECTOR	0.50	x						0.	0.	0.
KELLY S ENINGOWUK		T -	1		1	1-				
DIR OF ADMIN/EXEC DIR	40.00	1		x				70,104.	0.	0.
						-				
			1	1	1	ــــــــــــــــــــــــــــــــــــــ		<u> </u>	· · · · · · · · · · · · · · · · · · ·	000 (0000

	(A) Name and title	(B) Average			(C Pos	C)			(D) Reportable	(E) Reportable		Es	(F)	ed
		hours per week	Individual trustee or director	ec eatson partition and partit	all	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	,	com fr org	nount other pensa om th anizat d relat	ation ne tion ted
											-			
		_	-											
	Total		<u></u>						181,821.		0.			0.
2 —	Total number of individuals (including but r compensation from the organization	not limited to th	nose	liste	ed al	bov	e) wi	no re	eceived more than \$100),000 in reportable	•		Yes	1 No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s	such individual										3		х
4 5	For any individual listed on line 1a, is the si and related organizations greater than \$15 Did any person listed on line 1a receive or	0,000? <i>If "Yes,</i> accrue compe	," co nsat	mple ion t	ete S	Sche	edule	e J f	for such individual	-	-	4		X.
Sec	the organization? If "Yes," complete Schedition B. Independent Contractors	lule J for such	pers	on				_	-			5		<u> </u>
1	Complete this table for your five highest countered the organization NONE	ompensated in	depe	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of com	pensa	ation f	rom	
	(A) Name and business	address							(B) Description of s	services	C	(C ompe) nsatio	'n
													·	
											_	_ -		
2	Total number of independent contractors (not li	mıte	d to		se li:	stec	d above) who received n	nore than				
	\$100,000 in compensation from the organi	zalion 🚩					<u> </u>					Form	990 ((2009)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b,	Total expenses Flogram ser			
/0,			expenses	general expenses	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,	117 654		117 654	
	trustees, and key employees	117,654.		117,654.	
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				
8	Pension plan contributions (include section 401(k)	ľ			
	and section 403(b) employer contributions)				
9	Other employee benefits	1 000	-	1 060	
10	Payroll taxes	1,868.		1,868.	 · · · · · · · · · · · · · · · · · ·
11	Fees for services (non-employees):				
а	Management	2 (20		2 620	
b	Legal	3,620.		3,620.	
C	Accounting	13,182.		13,182.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	220 740	226 107	2 641	
g	Other	229,748.	226,107.	3,641.	
12	Advertising and promotion	27 020	14 401	22 420	
13	Office expenses	37,930.	14,491.	23,439.	
14	Information technology .				
15	Royalties	21 401	15 052	5,539.	
16	Occupancy	21,491.	15,952. 641,500.	5,535.	
17	Travel	641,500.	641,500.	-	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	400		400.	
22	Depreciation, depletion, and amortization	400.		4,070.	-
23	Insurance .	4,070.		4,070.	
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	CONTRACT SERVICES - ICC	123,100.		123,100.	
h	FEES AND LICENSE	1,340.	966.	374.	
2	DUES AND SUBSCRIPTIONS	685.		685.	
d	MISCELLANEOUS	184.		184.	
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,196,772.	899,016.	297,756.	0
<u>23</u>	Joint costs. Check here Inf 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				

Form **990** (2009)

Form	990 (2009) INUIT CIRCUMPOLAR COUNCIL-ALASKA 92-009	<u> 1959</u>	Pa	ge 12
Par	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<u> </u>
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 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		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			,
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both.			, '
	X Separate basis Consolidated basis Both consolidated and separate basis			ز ا
За	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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3h		

Form **990** (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of t	he organizati	on	<u></u> .					E	mployer id	dentification (number
		INUIT C	IRCUMPOLAR C	OUNCI	L-ALA	SKA			92	-009195	9
Part I	Reason		ity Status (All organiz				.) See inst	ructions.			
The organ	ization is not a	private foundation I	because it is: (For lines 1	through 1	1, check o	only one b	ox.)		-		
1 🔲	A church, co	nvention of churches	s, or association of churc	ches desci	nbed in se	ction 170	(b)(1)(A)(i)				
2	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)							
з 🔲			tal service organization of		n section	170(b)(1)(A)(iii).				
4 🔲	A medical res	search organization of	perated in conjunction	with a hos	pıtal descr	nbed in se	ction 170	(b)(1)(A)(ii	ii). Enter th	ie hospital's n	ame,
	city, and stat	e:									
5 🔲	An organizati	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental uni	t describe	d in	
	-	(b)(1)(A)(iv). (Comple									
6 🗆			ent or governmental unit	t described	in sectio	n 170(b)(1)(A)(v).				
7 X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ntal unit o	r from the	general p	ublic describe	ed in
	section 170(b)(1)(A)(vi). (Comple	te Part II)								
8 🗌	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)						
9 🗌			eives: (1) more than 33 1			rom contri	butions, m	nembershi	p fees, and	d gross receip	ts from
	activities rela	ted to its exempt fur	nctions - subject to certa	un excepti	ons, and (2	2) no more	than 33 1	/3% of its	support f	rom gross invi	estment
	income and u	unrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	anızatıon a	fter June 30, 1	1975.
	See section	509(a)(2). (Complete	Part III.)								
10 🔲	An organizati	on organized and op	perated exclusively to te	st for publ	c safety S	See sectio	n 509(a)(4	l).			
11 🔲	An organizati	ion organized and op	perated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of,	or to carr	y out the p	ourposes of or	ne or
	more publicly	supported organiza	itions described in secti	on 509(a)(1	1) or section	on 509(a)(2	2). See sec	tion 509(a)(3). Che	ck the box tha	at
	describes the		organization and compl								
	a Type		_ ,,	тур		•	-			Type III - Othe	
e			t the organization is not								
			han one or more publicly						9(a)(1) or s	ection 509(a)(2).
f	If the organiz	ation received a writ	ten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III			
		rganization, check th					•		_	-	. L
g			organization accepted ar								
			irectly controls, either al	lone or tog	ether with	persons o	lescribed i	ın (ıi) and ((III) below,	Ye	es No
	_		upported organization?							11g(i)	
		· ·	n described in (i) above?		_					11g(ii)	+
			person described in (i)				•			11g(iii)	
h	Provide the f	ollowing information	about the supported or	ganization	(s).						
			(iii) Type of	la				(va) le	n the		
	of supported	(ii) EIN	organization	in col. (i) li	organization			Forganizati	on in col. l	(vii) Amour	
org	anızatıon		(described on lines 1-9		document?			(i) organi U.S	zed in the S.?	support	i
			(see instructions)	Yes	No	Yes	No	Yes	No		
			(See mandenens)	169	140	163	140	103	 "" 		
		1			1						
·									 • 		
		<u> </u>				-	-				
		İ									
								 	1 1		
				†	 				1 1		
						[
				 					1- 1		
Total				1							
	Privacy Act a	nd Paperwork Redu	ction Act Notice, see t	he Instruc	tions for			Schedu	le A (Form	n 990 or 990-l	EZ) 2009

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009 INUIT CIRCUMPOLAR COUNCIL-ALASKA 92-0091959 Page 2 Part II Support Schedule for Organizations Described in Sections 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.)

Sec	ection A. Public Support												
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total						
	Gifts, grants, contributions, and												
	membership fees received (Do not												
	include any "unusual grants ")	190,210.	234,429.	402,250.	756,030.	805,390.	2,388,309,						
2	Tax revenues levied for the organ-												
	ization'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 lines 1 through 3	190,210.	234,429.	402,250.	756,030.	805,390.	2,388,309,						
	The portion of total contributions												
	by each person (other than a												
	governmental unit or publicly												
	supported organization) included												
	on line 1 that exceeds 2% of the												
	amount shown on line 11,												
	column (f)												
6	Public support. Subtract line 5 from line 4						2,388,309,						
Sec	tion B. Total Support												
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total						
7	Amounts from line 4	190,210.	234,429.	402,250.	756,030.	805,390.	2,388,309,						
8	Gross income from interest,												
	dividends, payments received on												
	securities loans, rents, royalties												
	and income from similar sources												
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)	20.				113,881.	113,901.						
11	Total support. Add lines 7 through 10						2,502,210.						
12	Gross receipts from related activities,	, etc. (see instructi	ons)			12	581,116.						
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	_						
	organization, check this box and stor					·	<u> </u>						
Se	ction C. Computation of Publ	ic Support Pe	rcentage				05.45						
	Public support percentage for 2009 (•	•	column (f))		14	95.45 %						
	Public support percentage from 2008					15	99.69 %						
16a	33 1/3% support test - 2009. If the o				14 is 33 1/3% or m	ore, check this box							
	stop here. The organization qualifies		•				. > [X]						
t	33 1/3% support test - 2008. If the o				line 15 is 33 1/3%	or more, check th	IS DOX						
	and stop here. The organization qua	•	• • •				. ▶∟						
17a	10% -facts-and-circumstances tes												
	and if the organization meets the "fac			•	=	rt IV now the organ	lization						
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization												
t	b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or												
	more, and if the organization meets to				•		,						
40	organization meets the "facts-and-circ		•	•			。 · · ₹∺						
18	Private foundation. If the organization	лі аіа пот спеск а	DOX ON line 13, 16	a, 100, 1/a, 01 1/1			_						
					SCRE	edule A (Form 990	UI 330-EL) 2009						

Part III Support Schedule for O	rganizations	Described in	Section 509(a	(Complete only	if you checked the b	ox on line 9 of Part I.)
Section A. Public Support	4 1 2005		4 1 2007	L n 0000	4-2-0000	(D Total
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the					į	1
organization's tax-exempt purpose					-	
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf			_			
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year .						
c Add lines 7a and 7b				ļ		
8 Public support (Subtract fine 7c from line 6)				<u> </u>		<u> </u>
Section B. Total Support		· · · · · · · · · · · · · · · · · · ·			T	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income	Ī					
(less section 511 taxes) from businesses	İ					
acquired after June 30, 1975			·			
c Add lines 10a and 10b				ļ	-	
11 Net income from unrelated business activities not included in line 10b,						
whether or not the business is	ļ					
regularly carried on		<u> </u>				
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part IV.)		<u></u>	<u> </u>			
13 Total support (Add lines 9, 10c, 11, and 12)		L		1	504(-)(0)	
14 First five years. If the Form 990 is for	the organization's	s first, second, thii	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organi	zation,
check this box and stop here	o Support Bo	roontogo			••	
Section C. Computation of Publi			(0)		45	
15 Public support percentage for 2009 (I			column (t))	•	15	<u>%</u>
16 Public support percentage from 2008					16	. 70
Section D. Computation of Invest					17	%
17 Investment income percentage for 20			ne 13, column (i))			<u>%</u>
18 Investment income percentage from 2			on line 14 and lin	In 15 in mare than	18 33 1/3% and line	
19a 33 1/3% support tests - 2009. If the						17 13 110t
more than 33 1/3%, check this box at b 33 1/3% support tests - 2008. If the	-	_				Pu
- ·						
line 18 is not more than 33 1/3%, che 20 Private foundation. If the organization		-				· [
Frivate loundation. It the organization	IT OIG HOL CHECK A	DOX OIT AIRE 17, 15	a, or Tob, Check t			90 or 990-EZ) 2009

Schedule D

(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Internal Revenue Service **Employer identification number** Name of the organization 92-0091959 INUIT CIRCUMPOLAR COUNCIL-ALASKA Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 2 3 Aggregate grants from (dunng year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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. 1a 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. b 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 (i) Revenues included in Form 990, Part VIII, line 1 . . . (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sched		IRCUMPOLAR					2-00			
Par	t III Organizations Maintaining C	collections of A	t, Historica	Treasures,	or Other	Simila	r Asse	ts (conti	nued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of	the following that	ıt are a sıgı	nıficant u	se of its	collection	ıtem	IS
	(check all that apply):									
а	Public exhibition	d	Loan or	exchange progra	ams					
b	Scholarly research	е	Other_							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how they furth	er the organizati	on's exem	pt purpo	se in Part	XIV.		
5	During the year, did the organization solicit of	r receive donations	of art, historical	treasures, or oth	er sımılar a	assets		_		_
	to be sold to raise funds rather than to be m	aintained as part of t	he organization	's collection?				Yes_		<u>No</u>
Par			ete if organizatio	n answered "Ye	s" to Form	990, Par	t IV, line !	9, or		
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribi	itions or other as	sets not in	ncluded		_		_
	on Form 990, Part X?						🖵	Yes	<u> </u>	J No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:							
								Amount		
C	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?				L	Yes		∐ No
	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete		swered "Yes" to							
		(a) Current year	(b) Prior yea	r (c) Two yea	rs back (d	1) Three ye	ears back	(e) Four	years	back
1a	Beginning of year balance									
b	Contributions .									 ,
С	Net investment earnings, gains, and losses									'
d	Grants or scholarships									
е	Other expenditures for facilities									-
	and programs									
f	Administrative expenses									
g	End of year balance				<u> </u>	···				
2	Provide the estimated percentage of the year	ır end balance held a								
	Board designated or quasi-endowment	.	%							
b	Permanent endowment	%								
С		%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are hi	eld and administe	ered for the	e organiz	ation	Г		
	by:								Yes	No
	(i) unrelated organizations				•		•	3a(i)		
	(ii) related organizations		- 0-b4-1- D0					3a(ii)		├──
	If "Yes" to 3a(ii), are the related organization	•						3b		
Bar	Type In Part XIV the intended uses of the type Investments - Land, Building			000 Part V line	10					
Pai	· · · · · · · · · · · · · · · · · · ·	1			I	numulata	<u> </u>	(d) Bool		
	Description of investment	(a) Cost or o	',	Cost or other asis (other)		cumulate reciation	٠	(d) Bool	· valu	i C
	Lond	Daois (investi		20.0 (00.101)	- сорг					
	Land							_		
D	Buildings .									
C	Leasehold improvements	-								
	Equipment .	 		81,105.		79,87	72		1 2	33.
	Other	agual Form 990 Port	Y column (P)		l					33.
ivial	, nou mies la miough le (Column (d) must e	yaari viili 330, rall	A COMMITTED, I	1010/·/						

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

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	dule D (Form 990) 2009 INUIT CIRCUMPOLAR COUNCIL-F	ALAS	KA		9	<u>2-0</u>	<u>091959</u>	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ed Finan	cial S	tatem	ents		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			1,503	,442.
2	Fotal expenses (Form 990, Part IX, column (A), line 25)			2			1,196	,772.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3			306	,670.
4	Net unrealized gains (losses) on investments			4				
5	Donated services and use of facilities			5				
6	Investment expenses			6				
7	Prior period adjustments			7			102	,152.
8	Other (Describe in Part XIV.)	•••		8				
9	Total adjustments (net). Add lines 4 through 8			9			102	,152.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	d 9		10				,822.
7	t XII Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Reve	nue p	er Ret	turn		
1	Total revenue, gains, and other support per audited financial statements		· · · · · · · · · · · · · · · · · · ·			1	1,503	.442.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			•	<u> </u>			
a	Net unrealized gains on investments	2a						
h	Donated services and use of facilities	2b	· -					
	Recoveries of prior year grants	2c						
d	Other (Describe in Part XIV.)	2d						
	Add lines 2a through 2d			-		2e		0.
e	Subtract line 2e from line 1					3	1,503	442
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				<u> </u>	3	1,303	<u>, , , , , , , , , , , , , , , , , , , </u>
4	• • • • • • • • • • • • • • • • • • • •	4-						
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other (Describe in Part XIV.)	4b						0
_	Add lines 4a and 4b			•		4c 5	1,503	442
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) † XIII Reconciliation of Expenses per Audited Financial Stateme	ante V	Vith Eyne	neae				,444.
		onto v	TIGII EXPE	11363	po		1,196	772
1	Total expenses and losses per audited financial statements				 	1	1,130	, 1 1 4 •
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 _ 1				ı i		
а	Donated services and use of facilities	2a						
b	Prior year adjustments	2b						
С	Other losses .	2c						
d	Other (Describe in Part XIV.)	2d						^
е	Add lines 2a through 2d	••			F	2e	1,196	772
3	Subtract line 2e from line 1				· -	3	1,130	, 114.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1			1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
Ь	Other (Describe in Part XIV)	4b				.		0
С	Add lines 4a and 4b		•	٠		4c	1 100	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)					5	1,196	, 1 1 4 •
	rt XIV Supplemental Information							
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II							4; Part
X, lın	e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	lete this	s part to pro	ovide ai	ny addit	ional i	nformation.	
					_			
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	, <u></u>							

SCHEDULE 0

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service **Employer identification number** Name of the organization INUIT CIRCUMPOLAR COUNCIL-ALASKA 92-0091959 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: CONCERNS TO THE LARGER WORLD COMMUNITY FOR THE BENEFIT OF ALL PEOPLE. FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES: PROMOTED INUIT RIGHTS, INTERESTS, CULTURE, AND UNITY THROUGH RESEARCH, ADVOCACY AND OUTREACH. FORM 990, PART VI, SECTION A, LINE 2: BOARD MEMBERS MARIE GREENE AND CHUCK GREENE ARE MARRIED TO EACH OTHER. FORM 990. PART VI. SECTION B. LINE 11: THE REVIEW PROCESS FOR THE IRS FORM 990 FOR ACCURACY IS CONDUCTED BY THE DIRECTOR OF ADMINISTRATION AND ANY OUESTIONS OR CORRECTIONS ARE HANDLED PROMPTLY EXECUTIVE DIRECTOR. BEFORE THE RETURN IS FILED. FORM 990, PART VI, SECTION B, LINE 12C: THE ICC POLICIES AND PROCEDURES MANUAL CLEARLY DEFINES CONFLICT OF INTEREST. IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON (BOARD MEMBER) MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE BOARD OF DIRECTORS

THE POSSIBLE CONFLICT.

CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT.

TO DETERMINE IF IN FACT A CONFLICT OF INTEREST EXISTS.

THE BOARD DELIBERATES

IF A CONFLICT

EXISTS, THE INTERESTED PARTY MUST LEAVE THE BOARD MEETING WHILE THE REST OF

THE BOARD DISCUSSES OR VOTES ON THE TRANSACTION OR ARRANGEMENT INVOLVING

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ➤ Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Employer identification number Name of the organization INUIT CIRCUMPOLAR COUNCIL-ALASKA 92-0091959 FORM 990, PART VI, SECTION B, LINE 15A: FOR DETERMINING EXECUTIVE SALARY RANGES, ICC ALASKA HAS CONDUCTED AN INFORMAL SURVEY OVER THE TELEPHONE WITH THE OTHER ICC OFFICES IN CANADA AND GREENLAND TO DETERMINE STARTING SALARY RANGES FOR COMPARABLE EXECUTIVE AND SENIOR STAFF. FORM 990, PART VI, SECTION C, LINE 18: COPIES OF FORM 1023 AND 990 ARE PROVIDED UPON REQUEST WITHIN THREE BUSINESS DAYS. THE ANNUAL FORM 990 WILL BE AVAILABLE FOR THREE YEARS FROM ITS FILING DUE DATE. FORM 990, PART VI, SECTION C, LINE 19: PUBLIC INSPECTION OF OUR RECORDS ARE DONE UPON REQUEST AND COPIES WILL BE MADE AVAILABLE AT NO CHARGE TO THOSE WHO REQUEST THE RECORDS. FORM 990, PART 1, LINE 6 ESTIMATED NUMBER OF VOLUNTEERS THE TOTAL NUMBER OF VOLUNTEERS IS ESTIMATED FOR THE INDIGENOUS PEOPLES GLOBAL SUMMIT ON CLIMATE CHANGE HELD IN ANCHORAGE, ALASKA IN APRIL VOLUNTEERS HELPED IN VARIOUS WAYS WITH THE CONFERENCE.