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# Form **990**

# **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)

OMB No 1545 0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	For the	e 2009 calend	dar year, o	or tax year beginning	<u> </u>	2009, and	endin	ng			,	
В	Check if	applicable	I	C Name of organization				_	D Employ	yer Ident	lification Number	
	Add	fress change	Please use IRS label	The Alaska Commun	ity Foundati	on.			92-	0155	067	
	Nar	ne change	or print or type	Number and street (or P O box if mail is not delivered to street addr) Room/su						one numi	ber	
	Initi	ial return	See specific	400 L Street			100		(90	7) 3	34-6700	
	Ter	mination	Instruc- tions.	City, town or country		State ZIP of	code + 4	1			<del></del>	
	Am	ended return		Anchorage		AK 99	501		G Gross r	eceinfs :	\$ 19,230,111.	
	Ħ	dication pending	F Name a	and address of principal officer	·			H(a) Is this				X No
				Winkler 400 L Street	Anchorage	AK 99	501	H(b) Are all			□Yes	No
$\overline{}$	Tax-	exempt status	_		4947(a)(1)			If 'No,'	attach a list	(see ins	tructions)	_
<u></u>				ww.alaskacf.org/	1 1 1 1 (-7(-7			H(c) Group	exemption n	umber Þ	•	
ĸ			X Corpora		Other ►	1 Year of	f Format	tion 1996			egal domicile AK	
	rť ľ	Summa		ASSOCIATION	- Calici	TE TOUT OF	- Onna	1011 222	<u>, , , , , , , , , , , , , , , , , , , </u>	riate of the	egai domicile 2110	
				anization's mission or most s	ignificant activities	Encou	ıraq	e and	Nurtur	e Ph	ilanthropy	<del>,                                    </del>
d)	1		5		<b>9</b>			. = = = :		=		
ũ	-											
Ë	_		- <b></b> -			. <b></b>						
o Ve	2 (	Check this bo	x •	if the organization discontinue	ed its operations or	disposed of	of mor	e than 259	% of its as	ssets		
Activities & Governance	1 8			bers of the governing body (P						-	14	
S=	. 4		-	t voting members of the gover	ning body (Part VI,	line 1b)					14	
X	5			yees (Part V, line 2a)							7	
ACE.	16			eers (estimate if necessary) usiness revenue from Part VI	I leekima (C) inc	10				6 7a	64	0.
Ø	) / a			taxable income from Form 99		12				7 b		<u> </u>
	<u>الا</u> و	vet uniterateu	business	taxable income from 7 offin 9:	70°1, IIIIe 54		_	Τ.		<del>- ' '  </del>		
L	ָ 	S 4 b 4		on (Double) line 1h)					rior Year , 751, 2	10	Current Yea	
٩C	14		_	grants (Part VIII, line 1h)							5,975,9 384,0	
ěς	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)							401,2 944,7		-784,4	
81	•11 (			I, column (A), lines 5, 6d, 8c,				<b> </b>			15,9	
A S	12		-	nes 8 through 11 (must equal		(), line 12)		21	,097,2	04.	5,591,4	
	<b>3</b> 13 (	Grants and su	mılar amo	ounts paid (Part IX, column	(fal (senick)	7			,966,0		4,830,1	
	)14 E	Benefits naid	to or for r	nembers (Part IX, column (A)	CEIVED	1			,,,,,	-		
	15	Salaries, othe	r compen	sation, employee benefits (Pa	art IX. column (A)	ines 5-10)			584,1	51.	583,2	203.
ses	16a F	Professional f	undraisin	g fees (Part IX, column (AO)	he1118 2010 [3	2						
Expenses			using expenses (Part IX, column (D); line 25)									
Ä					column (A), lines 11a, har 12a						2 240 4	
				nes 13-17 (must equal Part IX		_			,533,9	_	2,349,6 7,762,9	
	l .	· · · · · · · · · · · · · · · · · · ·				3)			,084,1			
	19 F	Revenue less	expenses	Subtract line 18 from line 1					,013,0		-2,171,4	
Net Assets or Fund Balancos									ning of Y		End of Year	
Bala	20	Total assets (		•				40	,310,5		43,827,1	
a pur	21	Total liabilities	-					}	95,8		599,9	
				nces Subtract line 21 from lii	ne 20			40	,214,6	85.	43,227,2	243.
Pa	rt II	Signatu	re Bloc	<u> </u>								
		Under penalties	s of perjury, l	I declare that I have examined this retu Declaration of preparer (other than of	rn, including accompanyi	ng schedules a	and stat	tements, and are has any l	to the best o	f my kno	wledge and belief, it is	s //
		_ /	120	$\lambda V$	·			1	17	111	1/10	W.
Sig			$\mathcal{L}(\mathcal{L})$						11	<del>/ ' '</del>	110	<u> </u>
He	re	Signature	onicer	IACE WINDO	OV (FS)			Dal	e '		/	J
			un	acc wirde	N CO							
		Type or pri	int name and	i uue		15.				In.		
		}	11	1 PIN		Date		Ch se	eck if lf-		eparer's identifying nur ee instructions)	moer
Pai	d	Preparer's						en	ployed	X		
Pre	er's	signature	Kare	en M. Foster, CPA		11/1	<u> LO/1</u>	0				
Us		Firm's name (o	Kare	en M Foster CPA,	Foster & Con	npany						
On		yours if self- employed),	PO I	Box 872194			_	EII	v <b>-</b>			
		address, and ZIP + 4	Was	illa	AK 9	9687		Ph	one no 🕨			
May	the IR	S discuss this	s return w	oth the preparer shown above	? (see instructions)						X Yes	No
BA	A For f	Privacy Act a	nd Papen	work Reduction Act Notice, s	ee the separate ins	tructions.			TEEA0101	07/20/	o9 Form <b>990</b> (	(2009)

Form	990 (2009) The Alaska Community Foundation	92-0155067	Page 2
Par	t III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission		
	Encourage and Nurture Philanthropy		
			- <b></b>
2	Did the organization undertake any significant program services during the year which were not listed on the		
	Form 990 or 990-EZ?	Yes X	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 service	es? Yes X	No
	If 'Yes,' describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program services by	ovnoncos Soction E01/o)/3	)\
4	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and all	locations to others, the total	) 
	expenses, and revenue, if any, for each program service reported		
4 a	(Code ) (Expenses \$ 4,528,688. including grants of \$ 4,084,897.) (F	Revenue \$ 3,324,9	976.)
	The Alaska community Foundation manages individual endowment fund		
	both large and small from a broad range of individuals, non-prof	it	
	organizations and corporations. These contributions and the inter		
	earned on them supported over \$4 million dollars in grants in 200	<u>)9</u>	
	for charitable activities in Alaska.		
4 b	o (Code ) (Expenses \$ 2,138,589. including grants of \$ 680,940.) (F	Revenue \$ 1,332,7	718.)
	The Alaska Community Foundation directly supported projects through		
	Alaska such as the development and maintenance of local parks, the	ne_50th	
	anniversary of Alaska statehood celebration, and the renovation of	of the West	
	Anchorge High School auditorium.		
			_ <b>_</b>
			<del>-</del> -
		<del></del>	<del></del>
40	: (Code) (Expenses \$ including grants of \$) (F	Revenue \$	)
	Other program services (Describe in Schedule O)		
40		١	
	(Expenses \$ including grants of \$ ) (Revenue \$ expenses ► 6,667,277.	<u> </u>	
46	Total program service expenses - 0/00//2//		

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? 2 X 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 Х Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete 4 Schedule C, Part II Х 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 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, 6 X 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 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 8 Х complete Schedule D, Part III 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 9 Schedule D. Part IV Х Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 10 X 'Yes,' complete Schedule D, Part V Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or 11 X as applicable X • Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D. Part VI Ś 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 13.5 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 je, • 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 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 487 If Yes, 'complete Schedule D, Part X Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 X 12 A Was the organization included in consolidated, independent audited financial statement for the tax Yes No 12 A Х year? If 'Yes.' completing Schedule D, Parts XI, XII, and XIII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Х b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If Yes, complete Schedule F, Part I 14b X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II 15 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III 16 16 X 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 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. 18 18 Х lines 1c and 8a? If 'Yes,' complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' 19 19 X complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H X 20

Form 990 (2009) The Alaska Community Foundation
Part IV (Checklist of Required Schedules (continued)

	• · · ·   • · · · • · · · · · · · · · ·			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1° If 'Yes,' complete Schedule I, Parts I and II	21	х	
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	х	
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? <i>If 'Yes,' complete Schedule J</i>	23		х
24 a	a 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, and 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		х
t	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		
C	I Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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
ŧ	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		х
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		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	المستحددة مسر		, <u>-</u> -
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŧ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
	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 contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule $R$ , Part $V$ , line $2$	35		х
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	x	
ВАА		Form	1 <b>990</b> (	(2009)

BAA

		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	: : '	å -4 ,	•
<b>b</b> Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0		,	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
(gambling) winnings to prize winners?	1 c	<u> </u>	
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       2a       7			
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O</i>	3ь		
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		х
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		х
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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 any contributions that were not tax deductible?	6a		х
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
<b>a</b> 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		х
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u>x</u>
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8 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 at any time during the year?	8		X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		X
b Did the organization make any distribution to a donor, donor advisor, or related person?	9 b		х
10 Section 501(c)(7) organizations. Enter			
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	l		
11 Section 501(c)(12) organizations. Enter			
a Gross income from other members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against 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		ĺ
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

Form **990** (2009)

Section A. Governing Body and Management

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.

					Yes	No					
1 a	Enter the number of voting members of the governing body	1 a	14	· ~ /2	13(1)	1					
t	Enter the number of voting members that are independent	1 b	14		ړد که يژ	,					
2	Did any officer, director, trustee, or key employee have a family relationship or a business rela	ationsi	hip with any other	Ī <u></u>	~						
_	officer, director, trustee or key employee?		p	2		Х					
3	Did the organization delegate control over management duties customarily performed by or un of officers, directors or trustees, or key employees to a management company or other person	ider th	e direct supervision	3		x					
4	Did the organization make any significant changes to its organizational documents			4	х						
	since the prior Form 990 was filed?										
5	Did the organization become aware during the year of a material diversion of the organization'	s asse	ets?	5		x					
6	Does the organization have members or stockholders?			6		х					
7 a	Does the organization have members, stockholders, or other persons who may elect one or migoverning body?	ore m	embers of the	7 a		x					
t	<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?										
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following											
2	The governing body?			8a	X						
	Each committee with authority to act on behalf of the governing body?			8b	x	· · · · ·					
		aat ba	rapped at the	"							
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who can organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	iot be	reached at the	9		x					
Sec	tion B. Policies (This Section B requests information about policies not	requi	red by the Interna	i							
	enue Code )	•	•								
					Yes	No					
10 a	Does the organization have local chapters, branches, or affiliates?			10a		х					
	of 'Yes,' does the organization have written policies and procedures governing the activities of and branches to ensure their operations are consistent with those of the organization?	such (	chapters, affiliates,	10ь							
11	Has the organization provided a copy of this Form 990 to all members of its governing body be	efore f	iling the form?	11	х						
	ADescribe in Schedule O the process, if any, used by the organization to review this Form 990		9		\$30.4 3.7.7.						
	Does the organization have a written conflict of interest policy? If 'No,' go to line 13			12a	x	Ì					
	Are officers, directors or trustees, and key employees required to disclose annually interests the	nat co	uld give rise								
	to conflicts?			12b	х						
	Does the organization regularly and consistently monitor and enforce compliance with the polic Schedule O how this is done	султ	res, aescribe in	12c	х						
	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 a persons, comparability data, and contemporaneous substantiation of the deliberation and decisions.	pprova	al by independent		SA.						
ā	The organization's CEO, Executive Director, or top management official			15a	Х						
Ł	Other officers of key employees of the organization			15 b		х					
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions )			**	*						
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a	rrang	ement with a taxable			·					
	entity during the year?			16 a		Х					
t	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to in joint venture arrangements under applicable federal tax law, and taken steps to safeguard to status with respect to such arrangements?	o eval	luate its participation ganization's exempt	16b							
Sec	tion C. Disclosures										
	List the states with which a copy of this Form 990 is required to be filed										
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	d 990	-T (501(c)(3)s only) ava	alable	for pu	ıblıc					
	Inspection Indicate how you make these available Check all that apply  X Own website  Another's website  X Upon request										
10	Describe in Schedule O whether (and if so, how) the organization makes its governing docume	ante o	conflict of interest nation	, and	financ	ual					
19	statements available to the public					.iai					
20	State the name, physical address, and telephone number of the person who possesses the bo										
•	Kate Gerlek 400 L Street, Suite 100, Anchorage, A	<u>x</u>	99501 (9	07)_3	34-	6700					

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations'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 employees'
- 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 no	t compens	ate ar	ту с	ırreı	nt of	ficer,	dire	ctor, or trustee					
(A) (B) (c) (D) (E)													
Name and Title	Average hours per week			_		<del>,</del>		Reportable compensation from	Reportable compensation from	Estimated amount of other			
	per week	adividi al bassee or director	mshlutional trustee	Offices	Key emphyee	Highest compensated employee	Former	the organization (W 2/1099-MISC)	related organizations (W-2/1099 MISC)	compensation from the organization and related organizations			
Carla Beam								_		_			
Chair	2.00	Х		X	-	<b></b>	<u> </u>	0.	0.	0.			
Dr. Leo Bustad Director	1.00	х						0.	0.	0.			
Ken Castner Director	1.00	x						0.	0.	0.			
Morgan Christen													
Director	1.00	х						٥.١	0.	0.			
Angela Cox													
Director	1.00	x						0.	0.	0.			
Susan Foley													
Second Vice Chair	1.00	x		x				0.	0.	0.			
Rick Nerland													
Director	1.00	х						0.	0.	0.			
Kris Norosz													
First Vice Chair	1.00	X		X				0.	0.	0.			
Judith Warwick													
Director	1.00	х						0.	0.	0.			
Marilyn Romano Director	1.00	x						0.	О.	0.			
John Abreu													
Secretary	1.00	x		x				0.	0.	0.			
Kate Gerlek									_				
Chief Financial Officer	40.00			Х				84,002.	0.	0.			
Bernie Washington									_				
Treasurer	1.00	<u> </u>		X				0.	0.	0.			
Steve Yoshida								_	_				
Director	1.00	Х						0.	0.	0.			
Reed Stoops													
Director	1.00	Х			_			0.	0.	0.			
Carol Simonetti	ا م ما							110 240	_				
Executive Director	40.00	X		X	X		$\vdash$	110,340.	0.	8,400.			

Part VII. Section A. Officers, Directors, Trus		\ey	En			es,	an	li .		mplo	
(A) Name and Title	(B) Average	ge Position (check all that apply)					pply)	(D) Reportable	(E) Reportable		( <b>F)</b> Estimated
Name and Title	hours per week			Officer	. —	Highest compensated employee		compensation from the organization (W-2/1099 MISC)	compensation for related organizati (W-2/1099-MISC	om ons ;)	amount of other compensation from the organization and related organizations
										$\perp$	
	_										_
									_		
										$\perp$	
										$\perp$	
1 b Total							<b>&gt;</b>	194,342.		0.	8,400.
2 Total number of individuals (including but not limited from the organization 1	to those	e list	ed a	abov	e) v	vho	rece	eived more than \$1	100,000 in repoi	table o	compensation
from the organization				_							Yes No
<ul> <li>3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such inc</li> <li>4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th individual</li> <li>5 Did any person listed on line 1a receive or accrue co</li> </ul>	dividual ortable ( an \$150	com ,000	pen: !? <i>If</i>	satic 'Ye:	on a s' co	nd o	ther lete	r compensation fro Schedule J for sui	om ch		3 X
rendered to the organization? If 'Yes,' complete Sche  Section B. Independent Contractors	edule J f	or s	uch	pers	son	II CIR					5 X
Complete this table for your five highest compensate compensation from the organization	d indepe	ende	nt c	ontr	acto	ors t	hat	received more tha	n \$100,000 of		
(A) Name and business address	<u> </u>							(B) Description of	) of Services	C	(C) ompensation
											<del></del>
	_									<del></del>	
2 Total number of independent contractors (including b \$100,000 in compensation from the organization ►		mıte	d to	thos	se li	stec	ı abo	ove) who received	more than	. 21	· <u>-</u>

	Statement of Revenue	,	(A)	(B)	(C)	(D)
s <sup>#</sup> .		* *	Total revenue	Related or exempt function	Unrelated business revenue	Revenue excluded from tax under sections
<u></u>				revenue	<u> </u>	512, 513, or 514
ST ST	1a Federated campaigns 1a		, ,		٠	
Z S	b Membership dues 1 b				, ,	
S, G	c Fundraising events 1c		w 1	* <del>*</del> .	, ~ * ·	*
F	d Related organizations 1 d		,	48	g , š	
S.E	e Government grants (contributions) 1e 542	,408.		65		*
E S	f All other contributions, gifts, grants, and		, ,	\%\$ '	` '	7
	similar amounts not included above 1f 5,433	,516.	4,	, 1° ,e 1\$	*z '' , «	1
Ž Č	g Noncash contribus included in lns 1a-1f \$ 155	,385.			· 3 ·	ŧ
8	h Total. Add lines 1a-1f	•	5,975,924.	•		
J N	Business	s Code	, , , , ,,			
<u> </u>	2a Management Fees 990099		384,014.	384,014.	0.	0.
(F)	b				<del></del> -	
Ę	c				1	
<u></u>	d					
Σ					····	
A A	f All other program service revenue					
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	g Total. Add lines 2a-2f	▶	384,014.			
-			301/011.			!
	3 Investment income (including dividends, interest a other similar amounts)	ina ►	642,524.	642,524.	0.	0.
:	4 Income from investment of tax-exempt bond proce	eeds ►		0111,0111		
	5 Royalties	>003 ►				
		rsonal	À _us :s. 0.	40 5 +	** '^ /	
	6a Gross Rents					*,
	b Less rental expenses			:		
	c Rental income or (loss)		\ <b>*</b>	viik vij ′ ′	wa <sub>k</sub>	
	<u> </u>			*···		
	d Net rental income or (loss)	Other				
	/a Gross amount from sales of	70161		Ì		
	assets other than inventory 12,211,676.					
	<b>b</b> Less cost or other basis					
	and sales expenses 13,638,616.					u
	c Gain or (loss) [-1,426,940.]					
	d Net gain or (loss)	•	-1,426,940.	-1,426,940.	0.	٠ 0.
NUE	8a Gross income from fundraising events (not including \$					
2	of contributions reported on line 1c)					
OTHER REVE	See Part IV, line 18 a					ľ
뷜	b Less direct expenses b					
°۱	c Net income or (loss) from fundraising events	<b>•</b>				
	9a Gross income from gaming activities See Part IV, line 19					
	b Less direct expenses b					
	c Net income or (loss) from gaming activities	•				
	10a Gross sales of inventory, less returns					
	and allowances a					
	<b>b</b> Less: cost of goods sold <b>b</b>					
ŀ	c Net income or (loss) from sales of inventory	<b>•</b>				,
	Miscellaneous Revenue Business	s Code				
Ì	11a Other revenue 999999		15,973.	15,973.	0.	0.
l	b					
	c		·			
	d All other revenue					
	e Total. Add lines 11a-11d	▶	15,973.			
	12 Total revenue. See instructions	▶	5,591,495.	-384,429.	0.	0.

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

		( )		(2), (3), (3)	
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	4,802,637.	4,802,637.		* * * * * * * * * * * * * * * * * * * *
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	10,000.	10,000.	÷ ,	. %
3	Grants and other assistance to governments, organizations, and individuals outside the			51. 45. 47. 47.	
4	U.S. See Part IV, lines 15 and 16 Benefits paid to or for members	17,500.	17,500.	Service Programme Commence of the Commence of	
5	Compensation of current officers, directors, trustees, and key employees	110,340.	0.	110,340.	0.
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	408,583.	49,814.	358,769.	0.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	29,530.	0.	29,530.	0.
9	Other employee benefits			24 ===	
10	Payroll taxes	34,750.	0.	34,750.	0.
11	Fees for services (non-employees)  Management	· <u>-</u> -			
	o Legal	13,685.	11,853.	1,832.	0.
	c Accounting	10,295.	1,500.	8,795.	0.
	d Lobbying				
	Prof fundraising svcs See Part IV, In 17		; <b>V</b> 6		
1	Investment management fees	496,203.	493,306.	2,897.	0.
9	g Other	5,504.	1,412.	4,092.	0.
12	Advertising and promotion	228,040.	95,178.	132,862.	0.
13	Office expenses	160,031.	142,342.	17,689.	0.
14	Information technology				
15	Royalties				
16	Occupancy	64,704.	4,326.	60,378.	0.
17	Travel	65,183.	12,724.	52,459.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	<del></del>	-		
	Payments to affiliates				
22	Depreciation, depletion, and amortization	11,596.	0. 1,873.	11,596.	0.
	Insurance 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 )	5,037.	1,6/3.	3,164.	<b>U.</b>
i	Contractual	1,059,985.	868,402.	191,583.	0.
ı	Special Events	57,798.	5,380.	52,418.	0.
	Communications	10,679.	0.	10,679.	0.
(	d Equipment	160,884.	149,030.	11,854.	0.
	All other expenses	7,762,964.	6,667,277.	1,095,687.	0.
25		1,102,304.	0,00/,2//.	1,093,00/.	<del></del>
26	Joint costs. Check here  if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation			-	
BAA					Form <b>990</b> (2009)

1	ai,t A	A,   Dalalice Silect			
			(A) Beginning of year		( <b>B)</b> End of year
	1	Cash – non-interest-bearing	0.	1	2,200.
	2	Savings and temporary cash investments	133,636.	2	6,041,508.
	3	Pledges and grants receivable, net	7,716,500.	3	5,620,750.
	4	Accounts receivable, net	197,667.	4	10,298.
	5	Receivables from current and former officers, directors, trustees, key employee and highest compensated employees. Complete Part II of Schedule L.	s,	5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1	))		
		and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
ŝ	7	Notes and loans receivable, net		7	
A S S E T S	8	Inventories for sale or use		8	
Ś	9	Prepaid expenses and deferred charges	16,218.	9	21,906.
	10 a	Land, buildings, and equipment cost or other basis 10a 67,85	55.	1	
		Complete Part VI of Schedule D	, (		
	t	Less accumulated depreciation 10b 33,75	59. <u>59,</u> 318.	10 c	34,096.
	11	Investments — publicly-traded securities		11	
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11	32,187,182.	13	32,096,430.
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	0.	15	
	16	Total assets Add lines 1 through 15 (must equal line 34)	40,310,521.	16	43,827,188.
	17	Accounts payable and accrued expenses	53,999.	17	20,474.
	18	Grants payable	41,837.	18	579,471.
	19	Deferred revenue		19	
Ļ	20	Tax-exempt bond liabilities		20	
Ŗ	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
L	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II	6 1.	, ,	
1		of Schedule L		22	
Š	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	95,836.	26	599,945.
N E T	[	Organizations that follow SFAS 117, check here <b>X</b> and complete lines	·		1
		27 through 29 and lines 33 and 34.			
ASSE	27	Unrestricted net assets	32,864,602.	27	30,010,473.
Ĕ	28	Temporarily restricted net assets	7,350,083.	28	13,216,770.
	29	Permanently restricted net assets	0.	29	
R		Organizations that do not follow SFAS 117, check here  and complete			
בטבס	20	lines 30 through 34.		30	
	30	Capital stock or trust principal, or current funds		30	
2	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
四人 コイス ひ 田 の	32	Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	40 214 605	32	42 227 242
E	33		40,214,685.	33	43,227,243.
	34	Total liabilities and net assets/fund balances	40,310,521.	34	43,827,188.

BAA

Form 990 (2009)

	<u>_</u>		Yes	No
1	Accounting method used to prepare the Form 990 🔲 Cash 🕱 Accrual 🔲 Other	73 ***	, , , , , , , , , , , , , , , , , , ,	720
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		* .	200
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		_x_
	b Were the organization's financial statements audited by an independent accountant?	_ 2b	Х	
	c 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	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	, \$P.	÷	4,
	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	16.	, * 	10 × 100
	X Separate basis Consolidated basis Both consolidated and separate basis	. \. \. \. \. \. \. \. \. \. \. \. \. \.		, Ľ.
3	a 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		х
	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	3 в		

BAA

Form 990 (2009)

# SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

			ity Foundation							15506			
				is (All organizations					) See i	<u>nstruct</u>	tions		
The o	rganization	is not a priv	vate foundation becaus	se it is (For lines 1 throu	gh 11, c	heck on	ly one b	ox)					
1	A churc	h, conventi	on of churches or asso	ociation of churches desci	ribed in	section	170(b)(1	)(A)(i).					
2	A school	ol described	In section 170(b)(1)(A	A)(ii). (Attach Schedule E	)								
3	A hosp	tal or coope	erative hospital service	e organization described i	n <b>sectio</b>	n 170(b)	<b>)(1)(A)(</b> ii	i).					
4	A medi	cal research	n organization operate	d in conjunction with a ho	spital d	escribed	ın <b>sect</b> i	on 170(	(b)(1)(A)	(iii) Ente	er the hosp	tal's	
		city, and sta											
5	170(b)(1)(A)(iv). (Complete Part II)												
6 7	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)												
8	A comm	nunity trust	described in section 1	70(b)(1)(A)(vi). (Complete	e Part II	)							
9	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II )  An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III )												
10	An orga	anization org	ganized and operated	exclusively to test for pub	lic safet	y See s	section 5	509(a)(4	).				
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h												
		ype I	<b>b</b> Type II	c 💹 Type III		-	-			d 📋	Type III-		
е	By chece than for 509(a)(	undation ma	ox, I certify that the organizers and other than	ganization is not controlle n one or more publicly sup	d directi pported	y or indi organiza	rectly by	y one or escribed	more d in secti	isqualifie on 509(a	ed persons a)(1) or sec	other tion	
f	If the or		received a written dete	ermination from the IRS th	hat is a	Type I, T	Гуре II о	r Type	III suppo	rting org	ganization,		
g	Since A	ugust 17, 2	006, has the organizat	tion accepted any gift or	contribu	tion fror	n any of	the foll	owing p	ersons?			
												Yes	No
	(i) a be	person who elow, the go	o directly or indirectly overning body of the su	controls, either alone or to ipported organization?	ogether v	with pers	sons des	scribed	ın (ıı) an	ıd (III)	11 g (i)		
	(ii) a	family men	nber of a person descr	ribed in (i) above?							11 g (ii)		
	(iii) a	35% contro	lled entity of a person	described in (i) or (ii) abo	ove?						11 g (in)		
h	Provide	the following	ng information about th	ne supported organization	is.		,						
	(i) Name of Organi		(II) EIN	(III) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organiza (i) liste gove	Is the tion in cold in your erning ment?	the organ	rou notify nization in (i) of upport?	organizat (i) organi	s the ion in col zed in the S ?	(vii) Amour	nt of Supp	ort
					Yes	No	Yes	No	Yes	No			
	-												
								-	<b></b>				
		-											
					<del> </del>				-				
T-4-1							1						

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) Section A. Public Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ') 6,252,861. 11,065,166. 10,171,023. 20,581,849. 5,619,275. 53,690,174. Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge 6,252,861 11,065,166. 10,171,023. 20,581,849. 5,619,275. 53,690,174. Total. Add lines 1-through 3 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 h Ý shown on line 11, column (f) Public support. Subtract line 5 · 🏖 . ă, from line 4 53,690,174. Section B. Total Support Calendar year (or fiscal year beginning in) ► (c) 2007 (d) 2008 (e) 2009 (a) 2005 (b) 2006 (f) Total 6,252,861. 11,065,166. 10,171,023. 20,581,849 5,619,275 53,690,174. 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 860,959. 1,028,109. 1,611,133 869,462 656,796 5,026,459. similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of čapital assets (Explain in 15,973 15,973. Part IV Total support. Add lines 7 58,732,606. through 10 12 1,410,224. 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 91.41% 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 91.97% 16a 33-1/3 support test - 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box ► X and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support test - 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test — 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization 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 the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions 18

Page 3

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year					:	
С	Add lines 7a and 7b						
8	Public support (Subtract line			₩ , }v	\$. 3.		
	7c from line 6 )	****		Ž.	( A)		
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	(d) 2008	<b>(e)</b> 2009	<b>(f)</b> Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
C	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b						
11	Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
14	Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	stop riere		d, third, fourth, o	or fifth tax year as a	section 501(c)(3)	' ▶∏
Sec	tion C. Computation of Pu						
15				e 13, column (f))		15	%
	Public support percentage from 2 tion D. Computation of Inv			<u> </u>	···	16	%_
	Investment income percentage for				mn (fl)	17	%
17	Investment income percentage to Investment income percentage fr				'''' ('))	18	<u>%</u> %
18					d lina 15 is mara th	<u> </u>	
19 a	33-1/3 support tests - 2009. If the	ne organization di	d not check the b	ox on line 14, and	blick supported are	1211 22-172 70, 2110 1	IIIIe 17 IS 1101 ▶ ☐
	33-1/3 support tests — 2009. If the more than 33-1/3%, check this be 33-1/3 support tests — 2008. If the is not more than 33-1/3%, check	ox and <b>stop here.</b> De organization di	. The organization d not check a hox	i qualifies as a pul	blicly supported org a and line 16 is mo	janization re than 33-1/3%	

Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions
Other Income Part II, Line 10
Description: Other Revenue
2009: 15973.

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

## Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 ► Attach to Form 990.
 ► See separate instructions

OMB No 1545-0047

Employer Identification number

**Open to Public** Inspection

The Alaska Community Foundation 92-0155067 Part I 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 77 1 Aggregate contributions to (during year) 2,645,339 Aggregate grants from (during year) 2,873,606 Aggregate value at end of year 29,943,529 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? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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 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 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 Year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 easement it holds? No 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 170(h)(4)(B)(ii)? Yes 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Part III 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 these items (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

Schedule <b>D</b> (Form 990) 2009 <b>The</b> 2						92-015		Page 2
Part III Organizations Mainta	<u>ining Co</u>	llections	of Art, Hist	<u>orical Tr</u>	easures, o	r Other Similar Ass	ets (conti	nued)
3 Using the organization's acquisition items (check all that apply)	on accession	on and othe				at are a significant use	of its collection	on
a Public exhibition			_		ge programs			
<b>b</b> Scholarly research			e U Othei	r				
c   Preservation for future genera								
4 Provide a description of the organ Part XIV			•	•	J		ın	
5 During the year, did the organizat assets to be sold to raise funds ra	ather than	or receive o to be maint	ained as part o	, nistoricar If the organ	treasures, or nization's colle	otner similar ction?	Yes	□No
Part IV Escrow and Custodia 9, or reported an amo	l Arrang	ements (	Complete if	organiza			90, Part IV	/, line
1 a Is the organization an agent, trust included on Form 990, Part X?	ee, custod	lian, or othe	er intermediary	for contrib	utions or other	assets not	Yes	No
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIV	and compl	lete the following	ng table				
							Amount	
c Beginning balance						1c		_
d Additions during the year						1 d		
e Distributions during the year						1 e		
f Ending balance						1f		
2a Did the organization include an ar	nount on F	orm 990, F	art X, line 21?				Yes	No
<b>b</b> If 'Yes,' explain the arrangement						<u>-</u>		
Part V Endowment Funds Co	mplete ıf	organiza	ation answer	ed 'Yes'	to Form 99	0, Part IV, line 10.		
	(a) Curr	ent year	<b>(b)</b> Prior yea	<del></del>	c) Two years back	(d) Three years back	(e) Four y	ears back
1 a Beginning of year balance				24	<u> </u>		1 k Y	
<b>b</b> Contributions						~ 30 ×		× \
c Net Investment earnings, gains, and losses						* ' . (		, [
d Grants or scholarships								]
Other expenditures for facilities and programs						AN		
f Administrative expenses								
<b>g</b> End of year balance								
2 Provide the estimated percentage	of the yea	r end balar	nce held as					
a Board designated or quasi-endow	ment 🕨 _		%					
<b>b</b> Permanent endowment ▶		_%						
c Term endowment ►	%							
3a Are there endowment funds not in organization by:	the posse	ssion of the	e organization t	hat are he	ld and adminis	stered for the	Yes	s No
(i) unrelated organizations							3a(i)	
(ii) related organizations							3a(ii)	
b If 'Yes' to 3a(II), are the related or	ganization	s listed as	required on Scl	hedule R?			3b	
4 Describe in Part XIV the intended	uses of the	e organizati	ion's endowme	nt funds				
Part VI Investments-Land, B	uildings	, and Eqι	u <b>ipment.</b> Se	e Form 9	90, Part X,	line 10.		
Description of investment			or other basis vestment)		st or other s (other)	(c) Accumulated Depreciation	(d) Book	Value
1 a Land							<del></del>	
<b>b</b> Buildings							<del></del>	<del></del>
c Leasehold improvements								
<b>d</b> Equipment					67,855.	33,759.	3	4,096.
e Other								
Total. Add lines 1a through 1e (Column	(d) must e	equal Form	990, Part X, co	olumn (B),	line 10(c) )	<u> </u>	3	4,096.

BAA

Schedule **D** (Form 990) 2009

Part VII Investments—Other Securities See Fo	orm 990, Part X, III	ne 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year man	ation ket value
Financial derivatives			
Closely-held equity interests			
Other			
			·
			<del></del> -
			<del>-</del> -
			· · · · · · · · · · · · · · · · · · ·
		·	
Total. (Column (b) must equal Form 990 Part X, col (B) line 12 ) ▶			
Part VIII Investments-Program Related (See F	Form 990, Part X,	ine 13)	
(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mar	ition ket value
Investments in securities	32,096,430.		
	==,:::0,::00.		
			<del></del>
			<u> </u>
Total (Column (b) must equal Form 990, Part X, Col (B) line 13 ) ►	32,096,430.		
Part IX Other Assets (See Form 990, Part X,	line 15)		
<b>(a)</b> De	scription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B), lin		<u> </u>	
Part X Other Liabilities (See Form 990, Part			
(a) Description of Liability	(b) Amount	<u></u>	
Federal Income Taxes			
		$\dashv$	
		<del> </del>	
		<del> </del>	
		<del> </del>	
		_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)			
2. FIN 48 Footnote In Part XIV, provide the text of the footnote			

Schedule D (Form 990) 2009 The Alaska Community Foundation

Page 3

92-0155067

		-0155067	Page 4
Rart.			
	tal revenue (Form 990, Part VIII,column (A), line 12)		5,591,495.
<b>2</b> To	tal expenses (Form 990, Part IX, column (A), line 25)		7,762,964.
<b>3</b> Ex	cess or (deficit) for the year. Subtract line 2 from line 1	-2	2,171,469.
	t unrealized gains (losses) on investments		5,184,027.
<b>5</b> Do	nated services and use of facilities		
6 In	restment expenses		
<b>7</b> Pr	or period adjustments		
<b>8</b> Ot	ner (Describe in Part XIV)		
	tal adjustments (net) Add lines 4 through 8	5	5,184,027.
	cess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		3,012,558.
	II Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	
	tal revenue, gains, and other support per audited financial statements	1 10	0,420,608.
	nounts included on line 1 but not on Form 990, Part VIII, line 12		
	t unrealized gains on investments 2a 5,184,027.		
	nated services and use of facilities 2b 1,735.		
c Re	coveries of prior year grants 2c		
<b>d</b> Ot	ner (Describe in Part XIV)	lá-	
<b>e</b> Ac	d lines 2a through 2d	2e 5	5,185,762.
<b>3</b> St	btract line 2e from line 1	3 5	5,234,846.
4 Ar	nounts included on Form 990, Part VIII, line 12, but not on line 1	,	_
	estments expenses not included on Form 990, Part VIII, line 7b		
	ner (Describe in Part XIV)  4b 356,649.	1	
	d lines 4a and 4b	4c	356,649.
	tal revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)		5,591,495.
	III Reconciliation of Expenses per Audited Financial Statements With Expenses per		, ,
	al expenses and losses per audited financial statements		7,764,699.
<b>2</b> An	nounts included on line 1 but not on Form 990, Part IX, line 25	ÿ	
	nated services and use of facilities 2a 1,735.		
	or year adjustments 2b	, ]	
	ner losses 2c		
	ner (Describe in Part XIV)	,	
	d lines 2a through 2d	2e	1 725
	btract line 2e from line 1		1,735. 7,762,964.
	1 1	<del>-3                                     </del>	,/62,964.
	nounts included on Form 990, Part IX, line 25, but not on line 1:	, [	
	estments expenses not included on Form 990, Part VIII, line 7b	.	
	ner (Describe in Part XIV)		
	d lines 4a and 4b	4c	
	al expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5 7	7,762,964.
Part A	V   Supplemental Information		<del></del>
Complet line 4, P informat	e this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, line art X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part t on	es 1b and 2b o provide any	, Part V, <sup>,</sup> additional
Pt_X	The organization is exempt from federal income taxes	under Se	ction
Pt_X	501(c)(3) of the IRC, except on net income derived fr	om unrel	ated
Pt_X	business activities of which there is none for 2009 o	<u>r 2008.</u>	
Pt_X	The Organization believes that it has appropriate sup	port for	_any_tax
Pt_X	positions taken, and as such does not have any uncert	ain tax	
Pt_X	positions that are material to the financial statemen	ts.	
Pt_XI	I Line 4b The organization records funds held for others as a l	iability	<b></b>
Pt XI	I Line 4b on the financial statements in accordance with FAS 13		Form 990) 2009

ochedale a	(1 01111 330) 2003	THE ALABA	a Community	y Foundati	.011		34-013306/	raye :
Part XIV	Supplemental	Information	(continued)					
	<u> </u>				····	···		
								:
_								

#### Schedule F (Form 990)

Totals

### Statement of Activities Outside the United States

2009

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

The Alaska Community Foundation 92-0155067 Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No 2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States 3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed.) (e) If activity listed in (a) Region (b) Number of (c) Number of (d) Activities conducted in (f) Total offices in the employees or region (by type) (i e , expenditures in (d) is a program fundraising, program services, grants to recipients region agents in service, describe region specific type of region located in the region) service(s) in region Sub-Saharan Africa 0 O Grants to organizations school fees for orphans 17,500.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) (2009)

17,500.

92-0155067

The Alaska Community Foundation

Schedule **F** (Form 990) 2009

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) if additional space is needed.

(i) Method of valuation (book, FMV, appraisal, other)	US Currency									
(h) Description of non-cash assistance		:								
(g) Amount of non-cash assistance	0.0									
(f) Manner of cash disbursement	17,500. wire transfer									
(e) Amount of cash grant	17,500.							:		
(d) Purpose of grant	School fees for									
(c) Region	Sub-Saharan Africa School fees for									
(b) IRS code section and EIN (if applicable)										
(a) Name of organization										
-										

Schedule F (Form 990) 2009 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 3 Enter total number of other organizations or entities BAA

Page 3

Schedule F (Form 990) 2009 The Alaska Community Foundation

Partill | Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2009 (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance BAA

Schedule	<b>F</b> (Form 990) 2009	The Alaska	Community	Foundation		92-0155067	Page 4
Part IV	Supplemental	Information					
	Complete this par	rt to provide the info	ormation required	I in Part I, line 2, and a	any additional information	on	
Pt_I_L	<u>ine 2</u>	Program rej	porting is	required for	grants issued.	:	
						<b></b>	<b></b>
					<b></b>		
<u>-</u>							
					<b>.</b>		
							<b>-</b>

TEEA3504 07/06/09

BAA

Schedule **F** (Form 990) 2009

# SCHEDULE I

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations,	iovernments and Individuals in the United States
<b>Grants</b> a	Governme

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

2009

OMB No 1545-0047

Open to Public Inspection

Employer identification number

**≗** □

X Yes 92-0155067 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States The Alaska Community Foundation

Part | General Information on Grants and Assistance

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use	ince to Governme	ents and Organi eceived more th	I Organizations in the United States. Complete if the organization answered 'Yes' to F more than \$5,000. Check this box if no one recipient received more than \$5,000. Use	ed States. Comple his box if no one r	e if the organizat	ion answered 'Ye more than \$5,000	s' to Form 0. Use
Part IV and Schedule I-1 (Form 990) if additional space is needed	(Form 990) if add		peped				•
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Various							
See Attached Schedule							
,	See List	Attached					
	,						
	•						
	•						
2 Enter total number of section 501(c)(3) and government organizations	3) and government or	ganizations				•	67
3 Enter total number of other organizations	ions					•	0

Schedule I (Form 990) 2009

TEEA3901 02/10/10

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2 Schedule I (Form 990) 2009 The Alaska Community Foundation

Partill Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed. (f) Description of non cash assistance Parely | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance Program reporting is required for grants issued. 10,000 (c) Amount of cash grant (b) Number of recipients Scholarships to assist with tuition (a) Type of grant or assistance Pt\_I Line 2

Schedule I (Form 990) 2009

# SCHEDULE M (Form 990)

# **Noncash Contributions**

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

OMB No 1545 0047

2009

Open To Public Inspection

Department of the Treasury Internal Revenue Service

The Alaska Community Foundation

Employer identification number

92-0155067

Par	rt I   Types of Property		· · ·					_
		(a) Check if applicable	<b>(b)</b> Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Meth	od of or rever	determir	iing
1 2 3 4	Art—Works of art Art—Historical treasures Art—Fractional interests Books and publications							
5 6 7	Clothing and household goods  Cars and other vehicles  Boats and planes		f 4 1 2					
8 9 10 11 12	Intellectual property Securities—Publicly traded Securities—Closely held stock Securities—Partnership, LLC, or trust interests Securities—Miscellaneous	х	4	155,386.	Marke	t Val	lue	
13	Historic structures							
14 15 16 17 18 19 20 21 22 23 24 25	Qualified conservation contribution—Other Real estate—Residential Real estate—Commercial Real estate—Other Collectibles Food inventory Drugs and medical supplies Taxidermy Historical artifacts Scientific specimens Archeological artifacts Other ► ()							
26 27 28	Other ► () Other ► () Other ► ()							
29	Number of Forms 8283 received by the organizatio organization completed Form 8283, Part IV, Donee	n during the Acknowled	tax year for contribution gement	ns for which the	29		Yes	No
	During the year, did the organization receive by collinoid for at least three years from the date of the in purposes for the entire holding period?	ntribution an itial contribu	ny property reported in P ition, and which is not re	Part I, lines 1-28 that it equired to be used for e	must exempt	30 a		_ x
	If 'Yes,' describe the arrangement in Part II  Does the organization have a gift acceptance policy	y that requir	es the review of any nor	n-standard contribution	s۶	31	x	
32 a	Does the organization hire or use third parties or renoncash contributions?	elated organ	izations to solicit, proces	ss, or sell		32 a	х	
	If 'Yes,' describe in Part II  If the organization did not report revenues in colum  describe in Part II	nn (c) for a t	ype of property for which	h column (a) is checke	d,			!
BAA	For Privacy Act and Paperwork Reduction Act No	tice, see the	Instructions for Form 9	990.	Schedu	ıle <b>M</b> (F	orm 99	0) 2009

Schedule M (Form 990) 2009	The Alaska Commun	nity Foundation	
Part II Supplemental II and 33. Also co	<b>nformation.</b> Complete to mplete this part for any	his part to provide the information requal additional information.	uired by Part I, lines 30b, 32b,
Pt I Line 32b	The organization	rarely receives non-standard	contributions.
Pt I Line 32b	The one time real	estate was received, a broker a	nd legal counsel was used
Pt I Line 32b	to enact the rece	eipt and later sale. In the fu	iture, when non-standard
Pt I Line 32b	contributions are	e received, a broker or other	expert will probably
Pt_I_Line_32b	be consulted.		

TEEA4602 07/21/09

BAA

Schedule M (Form 990) 2009

# SCHEDULE O (Form 990)

Name of the organization

# **Supplemental Information to Form 990**

OMB No 1545 0047

2009

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

Attach to Form 990. Department of the Treasury Internal Revenue Service

Openito Public

Employer identification number

The Alaska Community Foundation	92-0155067
Pt_VI-B, Line_11A The board of directors reviews the	990 prior to filing
Pt VI-B, Line 12c All directors and employees are requir	ed to report any conflict of interest
Pt VI-B, Line 15 The board of directors form an execu	utive search committee and
Pt_VI-B, Line 15 work with an executive search firm.	Candidates were sought from
Pt_VI-B, Line 15 across the state and across the cour	ntry. The committee sought the
Pt_VI-B, Line 15 advice and assistance of the Foraker	Group and the Council on Foundations
Pt VI-B, Line 15 and used comparative salary and bene	efits information provided by
Pt VI-B, Line 15 both organizations.	
Pt VI-C, Line 19 Items are available upon request or	on our website.
Pt XI, Line 2c The audit committee assumes this res	sponsibility.
Pt VI-A, Line 4 There were several amendments to the	organizations bylaws.

TEEA4901 07/17/09

### **Supporting Statement of:**

### Form 990 p 11/Line 2, column (B)

Description	Amount		
Northrim Checking	189,940.		
Restricted	5,414,138.		
Other cash	285,276.		
Northrim CD	152,154.		

### **Supporting Statement of:**

### Sch D, page 4/Part XII, Line 4b

Description	Amount
Change in funds held for others - FAS 136 difference	356,649.
Total	356,649.

		T	1	1	
Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	12,657	0	Support of orphan operations and tuition for secondary school
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	9,551	0	Support of orphan operations and tuition for secondary school
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	26,777	0	Support of orphan operations and tuition for secondary school & sewing project
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	14,449		Support of orphan operations and tuition for secondary school
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	22,388	0	Support of orphan operations and tuition for secondary school
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	16,657		Support of orphan operations and tuition for secondary school
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	10,000		Kitchen Funds
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	13,935	0	Support of orphan operations and tuition for secondary school
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	23,090		Support of orphan operations and tuition for secondary school & malaria prevention
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	20,499		Support of orphan operations and tuition for secondary school
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	12,241		Support of orphan operations and tuition for secondary school
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	6,666		Support of orphan operations and tuition for secondary school
Malawi Children's Village,2105 Otter Street Anchorage, AK 99504	16-1526805	501(c)(3)	10,499		Support of orphan operations and tuition for secondary school
Alaska Museum of Natural History,210 North Bragaw Street Anchorage, AK					
99508 Alaska Native Tribal Health Consortium,4000	92-0138658	501(c)(3)	30,000	0	General operating support
Ambassador Drive Anchorage, AK 99508 Alaska Ski Educational	92-0162721	501(c)(3)	19,559	0	Six infusion chairs for Oncology Clinic
Foundation,2525 Churchill Street Anchorage, AK 99510	23-7378119	501(c)(3)	1,000		Grant to Aquarian Parent Teacher Organization for the purchase of ski equipment for an after school ski program
Alaska Ski Educational Foundation,2525 Churchill Street Anchorage, AK					Grant to Chinook Elementary School for purchase of ski equipment for an after school
99510 Alaska Ski Educational Foundation,2525 Churchill Street Anchorage, AK	23-7378119		2,498		ski program  Grants to Seward Nordic Ski Club for youth
99510	23-7378119	501(c)(3)	3,541	0	ski program

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				Non-	
		IRC	Cash	Cash	
Name, address, and zip	EIN	Code	Grant	Grant	Purpose of Grant or Assistance
Alaska Ski Educational					
Foundation,2525 Churchill	1			1	
Street Anchorage, AK					
99510	23-7378119	501(c)(3)	5,000	0	Support for Junior Nationals
Alaska Ski Educational					
Foundation,2525 Churchill					
Street Anchorage, AK		 			
99510	23-7378119	[501(c)(3)	2,000	0	X-country ski programs
Alaska Ski Educational					
Foundation,2525 Churchill					
Street Anchorage, AK	,				Grant to Ursa Minor PTA for purchase of ski
99510	23-7378119	501(c)(3)	312	0	equipment for an after school ski program
Alaska Youth for					
Environmental Action,750				;	
West 2nd Avenue Suite					YEP Program Support From Salmon in the
200 Anchorage, AK 99501	53-0204616	501(c)(3)	5,000	0	City grant
Alaska Youth for					
Environmental Action,750					
West 2nd Avenue Suite					.,
200 Anchorage, AK 99501	53-0204616	501(c)(3)	4,036	0	YEP 2009 program support
American Endowment					
Foundation, 1521	ļ				
Georgetown Road, Suite					
104 P O Box 911 Hudson,		504( \0	0.40.407		
OH 44236-5911	34-1747398	501(c)3	248,197	U	General operating support
Anchorage Library					Consolt building to consort the love town
Foundation,P O Box					Capacity building to support the long term
244714 Anchorage, AK	00 0004500		400.000		goals of the Anchorage Library Renewal Initiative
99524	92-0081583		100,000	U	initiative
Anchorage Library					Capacity building to support the long term
Foundation,P O Box 244714 Anchorage, AK					goals of the Anchorage Library Renewal
99524	92-0081583		1,631	0	Initiative
Anchorage Museum	92-0001303		1,001		IIIIUa(ive
Foundation, 121 West 7th					
Avenue Anchorage, AK					
199501	92-0129376	501(0)(3)	50,000	n	Historic Photo Presentation Project
Anchorage School	32-0123310	501(0)(0)	30,000		Thistorie i noto i resentation i reject
District,5530 East Northern					
Lights Blvd Anchorage, AK	ĺ				Rigging system replacement for West High
199504-3135		501(c)(3)	127,534	o	Auditorium - ASD Memorandum #246
Anchorage School	52 0000010	001(0)(0)	121,004		Additional From Monoralidam #240
District,5530 East Northern					
Lights Blvd Anchorage, AK					Rigging system replacement for West High
99504-3135		501(c)(3)	1,320	n	Auditorium - ASD Memorandum #247
Anchorage School	52 5555076	30 ((0)(0)	1,020	-	The montered man and the man a
District,5530 East Northern					
Lights Blvd Anchorage, AK					
99504-3135		501(c)(3)	52,505	o	Auditorium improvements
APTI - Alaska Public					
Telecommunications,					
Inc ,3877 University Drive	}				General support of public radio and
Anchorage, AK 99508	23-7394629	501(c)(3)	2,000	0	television
APTI - Alaska Public		(-)(-)			
Telecommunications,					
Inc ,3877 University Drive					
Anchorage, AK 99508	23-7394629	501(c)(3)	5,000	<u>ი</u>	Support for general programming

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Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Archdiocese of					
Anchorage,225 Cordova					
Street Anchorage, AK					
99501	92-0033244	501(c)3	5,000	0	One Bread, One Body Program
Association of Christian					
Schools	ĺ				
International, Development					
Public Relations P O Box				ŀ	
65130 Colorado Springs,					
CO 80962-5130	95-6072567	501(c)3	9,000	0	General support for education
Boys & Girls Clubs of					
Southcentral Alaska,2300					
W 36th Avenue					Sponsor 72 boys & girls to particpate in
Anchorage, AK 99517	92-0036082	501(c)3	33,194	0	hockey programs
Boys & Girls Clubs of			-		
Southcentral Alaska,2300			i	}	
W 36th Avenue					
Anchorage, AK 99517	92-0036082	501(c)3	24,500	0	Clubhouse Improvements
Boys & Girls Clubs of		<u> </u>			
Southcentral Alaska,2300	1				
W 36th Avenue	1				
Anchorage, AK 99517	92-0036082	501(c)3	1,500	l o	Youth hockey support
Boys & Girls Clubs of		1			
Southcentral Alaska,2300				i	
W 36th Avenue					
Anchorage, AK 99517	92-0036082	501(c)3	1,000	0	Youth hockey support
Bristol Bay Borough School	0_ 000000_	337(3/3	.,,,,,,		
District,P O Box 169					
Naknek, AK 99633	92-0029587		17,000	o	Super Efficient Diesels
Bristol Bay Borough School			.,		
District,P O Box 169					Creating a Place for our Community's Past,
Naknek, AK 99633	92-0029587		25,000	0	Present & Future
Bristol Bay Borough School			- 7		
District,P O Box 169					
Naknek, AK 99633	92-0029587		25,000	0	Physical Fitness Room Upgrades
Bristol Bay Borough School					
District,P O Box 169					
Naknek, AK 99633	92-0029587		6,000	l o	Culinary arts program
Bristol Bay Elders Action					, , ,
Group (BBEAG),P O Box					
333 Naknek, AK 99633	92-0163489	501(c)(3)	23,982	0	Elder food bank
Bristol Bay Elders Action	İ				
Group (BBEAG),PO Box		<u> </u>			
333 Naknek, AK 99633	92-0163489	501(c)(3)	24,775	0	Community Food Bank Phase 2
Camai Community Health		1	•		
Center P O Box 211	ļ				
Naknek, AK 99633	11-3813698	501(c)3	25,000	0	computed radiography equipment
Central Peninsula Health			•		
Foundation,250 Hospital					
Place Soldotna, AK 99669	20-2778670	501(c)(3)	97,170	0	General operating support
Central Peninsula Health	-				
Foundation,250 Hospital					
Place Soldotna, AK 99669	20-2778670	501(c)(3)	2,500	o	Sports Complex planning
Chignik Bay Tribal	1				
Council,P O Box 50					Harris sub-regional clinic and multi-purpose
Chignik, AK 99564	92-0083617	501(c)3	50,000	o	facility
Chignik Lagoon Village	T	1 2/-			-
Council,P O Box 50					
•	92-0106417	501(c)3	10,976	l ol	Renewable/Alternative Energy Plan

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Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Chignik Lagoon Village	1				
Council,P O Box 50					
Chignik Lagoon, AK 99565	92-0106417	501(c)3	25,000	ا ا	Garbage truck
Chignik Lagoon Village	1	100 : (0/0	20,000		Carbago track
Council P O Box 50	ŀ				
Chignik Lagoon, AK 99565	92-0106417	501(c)3	10,281	ا ا	cultural awareness trip to San Diego, CA
City of Aleknagik,P O Box	02 0 100 111	001(0)0	10,201		Vehicle Purchase and Firefighter Training &
33 Aleknagik, 99555	92-0079021	501(c)3	24,999	ا م	Equipment
City of Chignik,P O Box	02 00,002	001(0/0	21,000		Equipmont
110 Chignik, 99564	92-0094970	501(c)3	25,000	ا ا	Wind Generation Anemometer Survey
City of Dillingham, P.O. Box	02 000-070	1001(0)0	20,000	<del>                                     </del>	Vind Concration Andmonieter Survey
889 Dillingham, AK 99756	92-0030674	501(c)3	41,250	ا ا	Dillingham ice rink roof
City of Eagle Alaska, Eagle	92-0030074	301(0)3	71,230		Diningham ice firik 1001
Rebuilding Construction					
Team P O Box 1901					
ı	92-0047035	501(0)2	2 000	اما	Bobuilding Construction Toom Work
Eagle, AK 99738	92-004/035	501(c)3	2,000	U	Rebuilding Construction Team Work
City of Eagle Alaska, Eagle					
Rebuilding Construction					
Team P O Box 1901	00 00 47005	504(-)0	0.000		Forte de la
Eagle, AK 99738	92-0047035	501(c)3	2,000	0	Eagle flood rebuild
City of Eagle Alaska,Eagle					
Rebuilding Construction					
Team P O Box 1901				_	
Eagle, AK 99738	92-0047035	501(c)3	3,082	0	Eagle Rebuilding Construction Team
City of Egegik,P O Box					
189 Egegik, AK 99579	92-0154668	501(c)3	25,000	0	Dock lighting
City of Egegik,P O Box					
189 Egegik, AK 99579	92-0154668	501(c)3	25,000	0	Batch Oxidation Facility Fencing
City of Egegik,P O Box					Construction of a Fisherman's
189 Egegik, AK 99579	92-0154668	501(c)3	25,000	0	Hall/Community Center
City of Newhalen,P O Box				_	
165 Newhalen, AK 99606	92-0064939	501(c)3	25,000	0	Newhalen Iliamna Youth Athletic Club
City of Nondalton,P O Box					
89 Nondalton, AK 99640	92-0055092	501(c)3	9,700	0	Fuel containment upgrades
City of Nondalton,P O Box					
89 Nondalton, AK 99640	92-0055092	501(c)3	24,988	0	purchase of administrative vehicle
City of Nondalton,P O Box					
89 Nondalton, AK 99640	92-0055092	501(c)3	171,511	0	Water line replacement and improvement
City of Seattle,Centennial					
Celebration P O Box	İ				(Office of Cultural Affairs), Alaska-Yukon-
94748 Seattle, WA 98124		501(c)3	25,000	0	Pacific Centennial
City of Togiak,P O Box 190					
Togiak, AK 99678	92-0047402	501(c)3	23,800	0	water and sewer service truck
Covenant House					
Alaska,609 F Street					
Anchorage, AK 99501	13-3419755	501(c)(3)	50,000	0	General Operating Support
Covenant House					
Alaska,609 F Street					Charitable services food, shelter, and
Anchorage, AK 99501	13-3419755	501(c)(3)	500		clothing
Curyung Tribal					development, construction, and operation of
Council,P O Box 216					the H Harvey Samuelson Community
Dillingham, AK 99576	92-0069902	501(c)(3)	25,000	ol	Center
Dillingham City School		· · · · · /			
District,P O Box 170					
Dillingham, AK 99576	92-0031132	501(c)3	18,000	l ol	Band instrument procurement
Dillingham City School					•
District, P O Box 170					
Dillingham, AK 99576	92-0031132	501(c)3	24,621	ام	Elementary reading program
Diminghani, Alt 99070	UZ 000 110Z	22 ((2)0	-7,041	<u> </u>	conwery roughly program

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Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Dillingham City School					
District,P O Box 170					
Dillingham, AK 99576	92-0031132	501(c)3	25,000	l 0	Metal Shop Equipment
Dillingham City School		, , ,	·		
District,P O Box 170					
Dillingham, AK 99576	92-0031132	501(c)3	16,605	l o	Wrestling Mat
Dillingham City Schools -				1	
KDLG Radio, P O Box 670				Ì	
Dillingham, AK 99576			25,000	0	FM radio tower installation
Fairbanks Community Food					
Bank,725 26th Avenue					
Suite 1 Fairbanks, AK					
99701	92-0088266	501(c)(3)	1,000	l o	General support
Fairbanks Community Food			<del></del>		
Bank,725 26th Avenue					
Suite 1 Fairbanks, AK					
99701	92-0088266	501(c)(3)	4,000	n	Bonebuilders Nutrition Program
First United Methodist	02 0000200	100 (0)(0)	4,000	† <u>-</u>	
Church, 104 S Pineapple	ĺ				
Ave Sarasota, FL 34236	59-0637841		5,000		General operating support
Holy Cross Parrish,2627	33-0037041		3,000		General operating support
Lore Road Anchorage, AK					
99507	92-0122494	501(0)(3)	5,000	ا ا	Religious Education
Holy Family Cathedral,811	32-0122434	301(0)(3)	3,000		Trengious Education
West 6th Avenue 99051	92-0122447	501(c)3	100,000	ا ا	Education center renovation
vvest 6th Avenue 99051	92-0122441	301(0)3	100,000	"	Ludcation center renovation
Halis Basans Asadamy 1010					
Holy Rosary Academy, 1010 West Fireweed Lane		İ			
	92-0126315	E01(a)(3)	50,000	ا ا	General Operating Support
Anchorage, AK 99503	92-0120313	30 1(0)(3)	50,000	0	General Operating Support
Holy Transfiguration of Our Lord Church, PO Box 225					
			25,000	ا ا	Church construction completion
Newhalen, AK 99606 Homer Foundation,P O			25,000		Charch construction completion
Box 2600 Homer, AK	02 0120102		4,000	ا ا	Conorel energing support
99603	92-0139183		4,000	-	General operating support
Homer Foundation,P O					
Box 2600 Homer, AK	00 0420402		10.000	ا ا	Conoral anarating august
99603	92-0139183		10,000	0	General operating support
Igiugig Tribal Village					
Council,P O Box 4008	00 0070000	504(-)0	00.072	۱ ؍	Denomble Francis Creamberra Branch
Igiugig, AK 99613	92-0072200	501(c)3	60,073	U	Renewable Energy Greenhouse Project
Iliamna Village					
Council,P O Box 286		504(-)0	05.000	١ ,	l accordance at an el force and a social and
Iliamna, AK 99606	92-00249	501(c)3	25,000	U	Laundromat and freezer equipment
Juneau Community					
Foundation,350 North					
Franklin Street Suite 2			<b></b>	_	 
Juneau, AK 99801	52-2395867	501(c)(3)	75,133	0	For disbursing charitable grants
Juneau Community		]			
Foundation,350 North					
Franklin Street Suite 2					_ , , ,
Juneau, AK 99801	52-2395867	501(c)(3)	5,000	0	General grantmaking - second CABI match
Kenai Central High School					
Choir,9583 Spur Highway					
Kenai, AK 99611	920030923	501(c)3	15,000	0	Support for choir tour
Kenai Peninsula Food					
Bank,33955 Community					
College Drive Soldotna,					
AK 99669	94-3112445		5,000	0	Food storage warehouse and equipment

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Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Kenai Peninsula Food					
Bank,33955 Community				ļ	
College Drive Soldotna,	04.0440.45		500		<b></b>
AK 99669 Kenai Peninsula Food	94-3112445	ļ	500	0	Warehouse expansion project
Bank,33955 Community					
College Drive Soldotna,	1				
AK 99669	94-3112445		100		General operating support
Kenai Peninsula Food	104-0112440	<del> </del>	100		General operating support
Bank,33955 Community					
College Drive Soldotna,					
AK 99669	94-3112445		100	0	General operating support
Kıng Salmon Vıllage					out of the state o
Council,PO Box 68 King					
Salmon, AK 99613	92-0177073	501(c)3	15,000	0	Energy Efficiency Project
Kokhanok Village					
Council, P O Box 1007		1			
Kokhanok, AK 99606	92-0071118	501(c)3	25,000	0	Solid Waste Improvements
Kokhanok Village					
Council,P O Box 1007					heavy duty truck with snow plow attachment
Kokhanok, AK 99606	92-0071118	501(c)3	22,995	0	for Kokhanok roads
Kokhanok Village					
Council,P O Box 1007	00 0074440	5046.30			
Kokhanok, AK 99606	92-0071118	501(c)3	33,000	0	Burn box purchase
KTOO Legacy Foundation,360 Egan Drive				,	
Juneau, AK 99801	90-0033326		77,524	ام	Polongo of fund requested
Lake & Peninsula	190-0033320		11,524	— · · · · · · · · · · · · · · · · · · ·	Balance of fund requested
Borough, P O Box 495					
King Salmon, AK 99613	92-0128922	501(c)3	25,000	ام	Scrap metal and hazardous material removal
Lake & Peninsula School	02 0 120022	001,070	20,000	<u>-</u>	Colap motal and nazaradas material removal
District,P O Box 498 King					
Salmon, AK 99613	92-0057379	501(c)3	175,098	o	School to Life Project expansion
Lutheran Social Services of					
Alaska, Inc ,1313 West		!			
33rd Street Anchorage, AK				l	
99503	94-3055592		7,000	0	Direct Assistance Program
Lutheran Social Services of					
Alaska, Inc ,1313 West					
33rd Street Anchorage, AK	94-3055592		1 000		Area of areatest mond
99503	94-3055592		1,000	<del>- 4</del>	Area of greatest need
Municipality of					
Anchorage, Accounts					
Payable P O Box 196650	]			}	2008-2009 ice maintenance for the Cuddy
Anchorage, AK 99519-6650	92-0059987		10,000		Family Midtown Park Skating Oval
Native Council of Port			.,	1	
Heiden,2200 James Street					
Port Heiden, AK 99549	92-0059922	501(c)3	10,095	0	fire extinguishers
Native Village of Ivanof					
Bay,7926 Old Seward	j		•	l	
Highway Suite B-5					
Anchorage, AK 99518			52,373	0	Chignik Smolt Study
Native Village of					
Nuiqsut,P O Box 89169	0000455=	5044 ) :=	60.555	_	0.5
Nuiqsut, AK 99789	920042378	501(c)(3)	30,382	0	Office Equipment
Our Bodies, Ourselves,5	ĺ				To promote the wild of the second of the sec
Haland David Cold #6					To promote the midwifery model of care in all
Upland Road, Suite #3 Cambridge, MA 02140	23-7274169	501(c)(3)	20,000		settings, hospital, birth center, and home

Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Outpouring Ministries,P O					
Box 369 Naknek, AK	04 0074050	504/5//2	25.000		Portable classroom, outdoor play area &
99633	91-2071852	501(c)(3)	25,000	0	science supplies
Perryville School,Lake and					
Peninsula School District	1	1			
P O Box 103 Perryville,					
99648	92-0057379	501(c)3	5,000	0	Cultural Trip
Pilot Point Tribal			.I		
Council,P O Box 449 Pilot				_	
Point, AK 99649	99-0143318	501(c)3	50,000	0	Dago Creek Dock crane project
Pilot Point Tribal				]	
Council,P O Box 449 Pilot				i :	
Point, AK 99649	99-0143318	501(c)3	50,000	0	Lower Bristol Bay Test Fishery Project
Port Alsworth Improvement	ļ				
Corporation,P O Box 9998	İ				
Port Alsworth, AK 99653	94-3137666		25,000	0	road improvements and development
Providence Alaska					
Foundation,3200				•	
Providence Drive					Parish Nursing - \$1,000, Pallitive Care -
Anchorage, AK 99508	92-0093565	501(c)(3)	5,000	0	\$400
Rabbit Creek Community					
Church,3401 Rabbit Creek					
Road Anchorage, AK					
99516	92-0096694	501(c)3	2,400	l o	General support
Rabbit Creek Community					
Church,3401 Rabbit Creek		•			
Road Anchorage, AK					
99516	92-0096694	501(c)3	2,500	l ol	General support of church activities
Rabbit Creek Community			,		
Church,3401 Rabbit Creek					
Road Anchorage, AK		i			
99516	92-0096694	501(c)3	2,400	o	General support
SAGA,P O Box 33037		<b>\</b>	<del></del>		
Juneau, AK 99803	92-0129698	501(c)(3)	17,680	0	Girdwood weed removal
Say Yes to Education,162		1			
West 56th Street Suite 405					
	22-3139858		10,000	o	Academic services
SeaView Community					
Services,P O Box 1045					
Seward, AK 99664	92-0043803	501(c)(3)	4,000	ol	Salary for "Play & Chat" coordinator
SeaView Community		1-1-7			,
Services,P O Box 1045					
Seward, AK 99664	92-0043803	501(c)(3)	1,700	ol	Salary for "Play & Chat" coordinator
Solace International,408		- \-/\-/	, , , , ,		,
East Camino Limon Verde					Materials needed to complete construction of
	81-0622816	501(c)(3)	60,000		health center, water wells and latrines
Solace International,408		- \-/\-/	2-12-0	<del></del>	and the later to t
East Camino Limon Verde			l		Assist in purchasing and transport of
Sahuarita, AZ 85629	81-0622816	501(c)(3)	25,000		materials for ASMP project
Solace International,408					
East Camino Limon Verde			ļ	İ	
	81-0622816	501(c)(3)	7,650	ام	Kenya Mbita Girls Center
Solace International,408	01-0022010	50 1(5)(5)	- ,,,,,,,,,	<del></del>	Nonya Mibita Olina Gentel
East Camino Limon Verde				j	Construction costs - Girl's Vocational School
	81 0622016	501/03/23	3 000		
oanuania. AZ 00029 — 1	81-0622816	501(c)(3)	3,000	ᆝ	Kenya
Solace International,408 East Camino Limon Verde					Materials needed to complete construction o

Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
Solace International,408 East Camino Limon Verde					Support continuation of projects at Belle,
Sahuarita, AZ 85629	81-0622816	501(c)(3)	10,000	0	Liberia, West Africa
Spirit of Youth					
Foundation,P O Box				·	
243721 Anchorage, AK		l			Alaska Teen Media Institute summer parks
99524-372	92-0168893	501(c)(3)	3,000	0	programs
Spirit of Youth					
Foundation,P O Box 243721 Anchorage, AK					
99524-372	92-0168893	501(c)(3)	2,000	۸	Contribution for March 2009 wards banquet
St Nicholas Russian	92-0 100093	30 1(0)(3)	2,000		Contribution for March 2009 wards banquet
Orthodox Church,P O Box					
3 Chignik Lake, AK 99548	135559373	501(c)3	23,838	0	Church Rennovations
The Challenger Learning	100000070	001(0)0	20,000		Ondron Nonnovations
Center of Alaska,9711					
Kenai Spurr Highway					
Kenai, AK 99611	92-1761906	501(c)(3)	5,000	0	General support
Twin Hills Moravian					
Church,Box TWA Twin					
Hills, AK 99576			49,320	0	passenger van and pews
Twin Hills Village					
Council,P O Box TWA					Telecommunications and First Responders
Twin Hills, AK 99576	92-0062296	501(c)3	14,244	0	equipment upgrade
Ugashik Traditional					
Village,206 East Fireweed					
Lane Anchorage, AK	00 0400507	504(-)0	44.075	0	0
99503	92-0160597	501(c)3	14,875	- 0	Greenhouse project
University of Alaska Anchorage,Grants & Contracts P O Box 141628 Anchorage, AK 99514-1620	92-6000147	į	208	0	Invasive plants project in parks
University of Alaska Anchorage, Grants & Contracts P O Box 141628 Anchorage, AK 99514-1620	92-6000147		2,748	0	Invasive plants project in parks
University of Alaska Anchorage, Grants & Contracts P O Box 141628 Anchorage, AK 99514-1620	92-6000147		2,300	0	Invasive plants project in parks
University of Alaska Anchorage, Grants & Contracts P O Box 141628 Anchorage, AK 99514-1620	92-6000147		1,548	0	Invasive plants project in parks
University of Alaska Anchorage, Grants & Contracts P O Box 141628 Anchorage, AK 99514-1620	92-6000147		3,967	0	Invasive plants project in parks
University of Alaska Bristol Bay Campus,P O Box 1070 Dillingham, AK 99576	92-6000147	501(6)3	42,002	a	Bristol Bay Summer Environmental Science Education Program

	7				
Name, address, and zip	EIN	IRC Code	Cash Grant	Non- Cash Grant	Purpose of Grant or Assistance
University of Alaska					
Fairbanks,Office of			İ		
Financial Aid P O Box					
756360 Fairbanks, AK					Scholarship Award - Meghan O'Leary,
99775	92-6000147	501(c)3	4,000	0	student ID# 30975167
University of Alaska					
Fairbanks,Office of	1				
Financial Aid P O Box					
756360 Fairbanks, AK					Scholarship award for Annette D Dyakanoff,
99775	92-6000147	501(c)3	4,000	0	ID #30924185
University of Alaska					
Fairbanks,Office of					
Financial Aid P O Box					
756360 Fairbanks, AK					
99775	92-6000147	501(c)3	1,000	0	Scholarship award for Panteleimom Askoak
University of Alaska					
Fairbanks,Office of				l	
Financial Aid P O Box				:	
756360 Fairbanks, AK					
99775	92-6000147	501(c)3	1,000	0	Andrew Cloward, student ID# 30953452
University of Alaska					
Foundation-Anchorage,	1				
3211 Providence Drive					
Anchorage, AK 99508	23-7394620	501(c)(3)	5,000	0	General support
Washington State					
University					
Foundation, University					
Advancement P O Box					
641042 Pullman, WA	ľ				
99164-1042	91-1075542	501(c)(3)	5,000	0	Sciences
Young Generation					İ
Center,P O Box 6205 -					
CODE 40103 Kısumu,					School fees for orphans to attend secondary
Kondele Kenya,			10,000	0	school
Young Generation					
Center,P O Box 6205 -					
CODE 40103 Kısumu,					School fees for orphans to attend secondary
Kondele Kenya,			7,500	0	school

Total

3,363,729