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SCANNED MAY 1 1 2011

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state rer

2010

OMB No 1545-0052

_				. The foundation may	be able to use a	copy or				rung requirement	3	
_		lendar year 2010.	or ta	ax year beginning				and end				, 20
G	Che	ck all that apply	_	Initial return	Initia		of a former p	oublic cha		į Į		Final return
_				Amended return		Addre	ss change			lame change		
Na	ame o	of foundation								A Employer iden		
		Alaska	Aiı	rlines Founda	tıon					92-0166	519	98
Νι	ımbe	r and street (or P O bo	ox nu	mber if mail is not delivere	d to street address	i)		Room/su	ute	B Telephone numb	oer (s	ee page 10 of the instructions)
		4750 In	tei	rnational Air	port Blvd					(206) 3	392	2-5719
Cı	ty or	town, state, and ZIP of	ode							C If exemption app pending, check h	dicati	on is
		Anchora	ge,	, AK 99502						D 1 Foreign organ		▶ i l
			_							2 Foreign organ		· —
н	Che	ck type of organiza	ation	X Section 501(c)(3) exempt	private:	foundation			85% test, ched		re and attach
Ī	_			empt charitable trust			rivate founda	tion				
<u></u>				ets at end J Acco						E If private founda		status was terminated 1)(A), check here
•		ear (from Part II, co			ther (specify)		٠, ١٥٠ الـــــ					
	-	▶ \$. (5) 3.	, 494, 446 (Part I,			n cash basis)			I *		a 60-month termination
E				and Expenses (The			í – – – – – – – – – – – – – – – – – – –		ĺ	L	Ť	(d) Disbursements
ليه	-1144	total of amounts in c	:olum	nns (b), (c), and (d)	(a) Revenue expenses		(b) Net inve		(c) Adjusted net		for charitable
		may not necessarily		ial the amounts in of the instructions))	books		incon	ie		income		purposes (cash basis only)
٦					500	0,000		•			-	(ODD) DUSIS OF IT
	1	if the	found	received (attach schedule) , dation is not required to		-,					\dashv	
	2	Check ▶ attach	Sch	В						<u>-</u>	\dashv	
	3	•		porary cash investments	3 (3,753		88,753			\dashv	
	4			om securities	50	, , , , , ,		70, 133		· · · · · · · · · · · · · · · · · · ·	\dashv	
											\dashv	
		-	. –		6	5,195					-+	· · · · · · · · · · · · · · · · · · ·
a	6a h	Net gain or (loss) from Gross sales price for all	sale	of assets not on line 10	0.	7,193					+	
Revenue		Gross sales price for all assets on line 6a						55,195			-	
é	7	Capital gain net inco	ome ((from Part IV, line 2).				03,193	ļ		0	
	8	·	•	ın		-					-	
	9	Income modification Gross sales less returns									\dashv	
	IV a	and allowances · · ·	}								\dashv	 -
		Less Cost of goods sold							_		\dashv	
	С			ach schedule)		1 1 1 1		2 121		_	-+	
	11			nedule)		2,131	1.0	2,131				
4	12	Total. Add lines 1 th	roug	<u>ıh 11</u>	601	5,079	10	6,079			0	
	13	Compensation of office					-				\dashv	
စ္က	14	Other employee sala Pension plans, empl	ries	and wages							4	<u> </u>
Expenses	15	Pension plans templ	oyee	benefits			ļ				\dashv	
ber	16a	Legalitees (attach so	chedu	ule) Q			ļ				4	
	b	Accounting tees (an	ta ć h :	schedule)			ļ ·-				\dashv	
Ve	C	Other professional for	ees (attach schedule)							\dashv	
rati	17	Interest O	3.1	····							4	
Administrati	18	Taxes (attach schedule)	(56e	page 14 of the instructions)		3,088		563			4	
	19			edule) and depletion.					<u> </u>		\dashv	
ď	20	Occupancy									_	
	21			meetings					ļ		_	
	22	Printing and publica	tions								\dashv	<u> </u>
lug	23	Other expenses (atta	ach s	schedule)		5						
perating	24	Total operating and	adn	ministrative expenses.								
ē		, -			3	3,093		563			0	0
つ I	25	ū		its paid	5.5	5,000						55,000
	26		•	ents Add lines 24 and 25	58	3,093		563			0	55,000
٦	27	Subtract line 26 from								· 	T	
		Excess of revenue over ex			547	7,986			L			
			-	(if negative, enter -0-)			10	5,516				
		Adjusted net incom		•							0	

Part	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
L CILL	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	7,913	5,383	5,383
2	Savings and temporary cash investments			
3	Accounts receivable			
	Less allowance for doubtful accounts ▶			
4	Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
5	Grants receivable		<u> </u>	
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see page 15 of the instructions)			
7	Other notes and loans receivable (attach schedule)			
'	Less allowance for doubtful accounts ▶			
₂₀ 8	Inventories for sale or use			
Assets 0 9 0	Prepaid expenses and deferred charges			
8810	Investments - U.S. and state government obligations (attach schedule)			
7	b Investments - corporate stock (attach schedule)	1,357,304	1,907,820	1,989,063
11	and equipment basis			
	Less accumulated depreciation (attach schedule)			
12	Investments - mortgage loans			
13	Investments - other (attach schedule)			
14	Land, buildings, and equipment basis			
	Less accumulated depreciation (attach schedule)			
15	Other assets (describe Sydney Laurence Paint)	1,500,000	1,500,000	1,500,000
16	Total assets (to be completed by all filers - see the			
	ınstructions Also, see page 1, item i)	2,865,217	3,413,203	3,494,446
17	Accounts payable and accrued expenses			
18	Grants payable			
ഗ്ല 19	Deferred revenue			
≟ 20	Loans from officers, directors, trustees, and other disqualified persons			
abilities 20 21	Mortgages and other notes payable (attach schedule)			
ت ₂₂	Other liabilities (describe			
23	Total liabilities (add lines 17 through 22)	0	0	
	Foundations that follow SFAS 117, check here ▶			
	and complete lines 24 through 26 and lines 30 and 31.			
9 24	Unrestricted	1,365,217	1,913,203	
E 25	Temporarily restricted			
E 26	Permanently restricted	1,500,000	1,500,000	
힏	Foundations that do not follow SFAS 117,			
<u> </u>	check here and complete lines 27 through 31. ▶			
ර් 27	Capital stock, trust principal, or current funds			
Net Assets or Fund Balance	Paid-in or capital surplus, or land, bldg , and equipment fund	_		
8 29	Retained earnings, accumulated income, endowment, or other funds]
∑ 30	Total net assets or fund balances (see page 17 of the]
2	instructions)	2,865,217	3,413,203	
31	Total liabilities and net assets/fund balances (see page 17]
	of the instructions)	2,865,217	3,413,203	
Part	Analysis of Changes in Net Assets or Fund I			
	al net assets or fund balances at beginning of year - Part		must agree with	
	I-of-year figure reported on prior year's return)		-	2,865,217
	er amount from Part I, line 27a			547,986
3 Off	er increases not included in line 2 (itemize) ▶		3	
4 Adı	d lines 1, 2, and 3		4	3,413,203
. nu	creases not included in line 2 (itemize) ▶		5	3,123,233
	al net assets or fund balances at end of year (line 4 minus l	ine 5) - Part II, column (b)		3,413,203
וטו ע	armer assers or fund paramoes at end of year time 4 minus	ine o) - i art ii, wiumin (b	<u>,, mie 50 </u>	3,413,203

Part IV Capital Gains	and Losses for Tax on Inve	estment Income					
	d describe the kind(s) of property sold (erick warehouse, or common stock, 200 s	-	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a 62,550.205 Sh Van	nguard Balanced Index S	Signal Fund	P	Various	10/28/10		
b 91.670 Sh Vanguard Balanced Index Signal Fund P Various c 5,203.406 Sh Vanguard Total Bond Market Index Inv Fund P Various							
	uard Total Bond Market	Index Inv Fund	P	Various	12/14/10		
d							
<u>.e</u>							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	us (g)		
a 1,281,028		1,215,926			65,102		
b 1,879		1,786			93		
c 55,000		55,000			0		
<u>d</u>			-		0		
e Complete selvice seest-		d by the ferral datase as 40/04/00			0		
Complete only for assets	showing gain in column (h) and owned	-		Gains (Col (h) g (k), but not less			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	Losses (from co	ol (h)) ´		
<u>a</u>		0			65,102		
<u>b</u>		0			93		
<u>c</u>		0			0		
_d		0			0		
<u>e</u>					0		
2 Capital gain net income or		gain, also enter in Part I, line 7 } (loss), enter -0- in Part I, line 7	2		65,195		
	or (loss) as defined in sections 12						
_	line 8, column (c) (see pages 13 a						
	ine 8		3				
	the section 4942 tax on the distribi	• •	ase period	13	Yes No		
	not qualify under section 4940(e) punt in each column for each year,		fore mak	ing any entries			
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution re (col (b) divided by			
2009	59,533	1,067,489		(441./2/-111.45.7)	0.0558		
2008	55,000	1,212,545			0.0454		
2007	50,000	1,166,035			0.0429		
2006	59,591	1,097,585			0.0543		
2005	49,671	1,074,194			0.0462		
2 Total of line 1, column (d)			2		0.2446		
		the total on line 2 by 5, or by the	-		2.2330		
•	dation has been in existence if less	• • • • •	3		0.0489		
number of years the round	ration has been in existence in less	than o years			0.0105		
4 Enter the net value of non-	charitable-use assets for 2010 fror	m Part X, line 5	4		1,423,138		
5 Multiply line 4 by line 3			5		69,591		
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		1,055		
7 Add lines 5 and 6			7		70,646		
8 Enter qualifying distribution	6 B 13/11 1		8		55,000		
	ater than line 7, check the box in	Part VI, line 1b, and complete t	hat part i	using a 1% tax	rate See the		

Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that Χ Χ Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General Х 8 b Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page Χ 9 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their 10 Χ names and addresses .

	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13		13	X	
	Website address N/A			
14	The books are in care of ▶ J Gammon, Alaska Airlines, Inc. Telephone no ▶ 206-392-57. Located at ▶ 19300 Pacific Highway South, Seattle, WA ZIP+4 ▶ 98188	. 9 		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	. 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority	1	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter			
_	the name of the foreign country	<u> </u>		
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1 "	1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly) (4) Faces on the color of property with a discustified page 2.			
	(1) Engage in the sale of exchange, or leasing or property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	uisquaimed person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?]		
	(4) Fay compensation to, or pay of reimburse the expenses of, a disqualment person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	the beliefit of use of a disqualified person)			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)	1		
h	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
~	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1 ь		NA
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2010?	1c		NA
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	:		
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2010? Yes X No			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			3.770
	all years listed, answer "No" and attach statement - see page 22 of the instructions)	2 b		NA
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2010)	3 b		NA
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		}	v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4 b	0.05	X
	F	om 99	0-PF	(2010)

Form	990-PF (2010)					Page (
	t VII-B Statements Regarding Activities fo	or Which Form 4	720 May Be Requ	ired (continued)		<u>~_</u> _
5 a	During the year did the foundation pay or incur any amou (1) Carry on propaganda, or otherwise attempt to influer (2) Influence the outcome of any specific public election directly or indirectly, any voter registration drive?	nce legislation (section (see section 4955), c		Vec XNe		
	(3) Provide a grant to an individual for travel, study, or other			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	.] [
	(4) Provide a grant to an organization other than a chari					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the ins	structions)	Yes X No	.	
	(5) Provide for any purpose other than religious, charital	ole, scientific, literary,	or educational			
	purposes, or for the prevention of cruelty to children o	r anımals?		Yes X No		
þ	If any answer is "Yes" to 5a(1)-(5), did any of the trans	actions fail to qualify	under the exception	s described in		
	Regulations section 53 4945 or in a current notice regard	ing disaster assistanc	ce (see page 22 of the	instructions)?	5b	NA NA
	Organizations relying on a current notice regarding disast			▶ 🗀		
С	If the answer is "Yes" to question 5a(4), does the foundation	•				
	because it maintained expenditure responsibility for the gr			Yes No		
	If "Yes," attach the statement required by Regulations sect	• •				
6 a	Did the foundation, during the year, receive any funds, d			Yes X No		
	on a personal benefit contract?				1 1	l _x
D	Did the foundation, during the year, pay premiums, direct	tily or indirectly, on a	personal benefit contra	cτ ·	6 в	A
7.0	If "Yes" to 6b, file Form 8870 At any time during the tax year, was the foundation a pai	rty to a probibited tay	sholter transaction?	Yes X No		
	If "Yes," did the foundation receive any proceeds or have					NA
	t VIII Information About Officers, Directors					11,77
	and Contractors				•	
1	List all officers, directors, trustees, foundation m	(b) Title, and average		e page 22 of the instru (d) Contributions to	(e) Expense	account
	(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee benefit plans and deferred compensation	other allow	
Sta	tement 3					
	Compensation of five highest-paid employees (ot f none, enter "NONE."	her than those inc	luded on line 1 - se		ructions).	
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allov	
NON	E					
						=-

Total number of other employees paid over \$50,000

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors (continued)	oyees,
3 Five h	ighest-paid independent contractors for professional services (see page 23 of the instructions). If	none, enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
		1,7,5
NONE		
Total number	er of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A		
2		
		_
3		
4		
Part IX-B	Summary of Program-Related Investments (see page 24 of the instructions)	
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	±	
2		
All other prog	gram-related investments. See page 24 of the instructions	
3		
		<u> </u>
Total. Add	nes 1 through 3	. 0

Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	j	
а	Average monthly fair market value of securities	_	1,437,340
þ	Average of monthly cash balances	1b	7,470
С	Fair market value of all other assets (see page 25 of the instructions)	1 c	
d			1,444,810
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Culatra et line O from line 4d	1 2 1	1,444,810
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		
			21,672
5	the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,423,138
6	Minimum investment return. Enter 5% of line 5	6	71,157
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) proposed foundations and certain foreign organizations check here ▶ and do not complete the	rivate operating	
1	Minimum investment return from Part X. line 6	. 1	71,157
2 a	Tax on investment income for 2010 from Part VI, line 5	10	
Ь	Income tax for 2010 (This does not include the tax from Part VI)	_	
С	Add lines 2a and 2b		2,110
3	Add lines 2a and 2b Distributable amount before adjustments Subtract line 2c from line 1	3	69,047
4	Recoveries of amounts treated as qualifying distributions	4	<u>-</u>
5		1 _ 1	69,047
6	Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	. -	
•	line 1	. 7	69,047
		• 1 • 1	
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	55,000
b	Program-related investments - total from Part IX-B	1b	0
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	,	
		1 1	
3	purposes		
а		3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	• —	55,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	1 1	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	. 6	55,000
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when	calculating wh	
	qualifies for the section 4940(e) reduction of tax in those years		The real real real real real real real rea

r a	t XIII Undistributed Income (see page	26 of the instruction	ns)		
	•	(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7				69,047
	Undistributed income, if any, as of the end of 2010				
	Enter amount for 2009 only			52,408	
	Total for prior years 20,20,20				
	Excess distributions carryover, if any, to 2010				
	From 2005				
	From 2006				
	From 2007				
	From 2008				
	Total of lines 3a through e	0			
	Qualifying distributions for 2010 from Part XII,				
	line 4 ► \$ 55,000			ļ	
а	Applied to 2009, but not more than line 2a			52,408	
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)			_	
d	Applied to 2010 distributable amount				2,592
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2010				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
	indicated below:			:	
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		0		
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions	· · · · · · · · · · · · · · · · · · ·	0		
е	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount - see page 27 of the instructions			0	<u> </u>
	Undistributed income for 2010 Subtract lines				
ı	4d and 5 from line 1. This amount must be				
	distributed in 2011				66,455
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the instructions)				
	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9	<u> </u>			
	Excess from 2006				
	Excess from 2007				
	Excess from 2008				
	Excess from 2009				
	Excess from 2010				

b	roundation, and the ruling	is effective for 20 fu, er	nter the date of the ruling		► NA	
	Check box to indicate whe		private operating found		4942(j)	(3) or 4942(J)(5)
а	Enter the lesser of the ad-	Tax year	45,000	Prior 3 years	(4) 2007	(e) Total
	Justed net income from Part I or the minimum investment	(a) 2010	(b) 2009	(c) 2008	(d) 2007	
	return from Part X for each year listed					0
ь	85% of line 2a	0	0	0	0	0
Ç	Qualifying distributions from Part				-	_
	XII, fine 4 for each year listed .				—	0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0
а	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					0
	(1) Value of all assets(2) Value of assets qualifying under section		· · · · · · · · · · · · · · · · · · ·			0
b	4942(j)(3)(B)(i)					0
c	ment return shown in Part X. line 6 for each year listed "Support" alternative test - enter					0
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)).					
	or royalties) (2) Support from general public and 5 or more exempt organizations as					0
	provided in section 4942 (j)(3)(B)(iii)					0
	port from an exempt organization					0
Pa	rt XV Supplementa	ary Information (Columnia large larg		only if the founda	tion had \$5,000	or more in asset
_	Information Regarding					
а	List any managers of t before the close of any	the foundation who h tax year (but only if th	ave contributed more	e than 2% of the total nore than \$5,000) (Se	contributions receive e section 507(d)(2))	ed by the foundation
10	NE					
b	List any managers of ownership of a partner	the foundation who c ship or other entity) of	own 10% or more of which the foundation	the stock of a corpo has a 10% or greater	ration (or an equally interest	large portion of the
10	NE					
?	Information Regarding Check here ▶ ☐ If the	ne foundation only in	nakes contributions	to preselected charita		
	unsolicited requests forganizations under other	ner conditions, comple	ete items 2a, b, c, and	d		
	The name, address, ar san Bramstedt, 4					(907) 266-72
b	The form in which appl	ications should be sub	omitted and information	on and materials they	should include	
	tter of inquiry Any submission deadlir			<u>. </u>		
_	Any submission deadill	163				
C						
c Se	Any restrictions or lin	mitations on awards	such as hy geogra	nhical areas charitat	ole fields kinds of i	nstitutions or other
c Se	Any restrictions or lir factors		, ,	•		

Part XV . Supplementary Information (continued)

Page **11**

3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or Appr	oved for r	-uture Payment	
Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
2. Poul during the year	or substantial contributor	recipient		<u> </u>
a Paid during the year Statement 4				55,000
Statement 4				33,000
!				
i				
!		1		
•				
				1
,				
!				
Total		<u> </u>	3a	55,000
b Approved for future payment N/A				
N/A				
		1		
Total			▶ 3b	0

	I-A Analysis of Income-Produ			Trustindad b		(e)
·	s amounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	y section 512, 513, or 514 (d) Amount	Related or exempt function income (See page 28 of the instructions)
1 Program	m service revenue	Business code	Alliodit	Exclusion code	Allouit	the instructions)
						
c						
						
e f		-				
	and contracts from accomment accomme			 		
_	and contracts from government agencies ership dues and assessments			1		
	on savings and temporary cash investments			 		
	ids and interest from securities			14	38,753	
	ital income or (loss) from real estate			 		
	ot-financed property					
	debt-financed property					
	al income or (loss) from personal property					
	nvestment income			18	67,326	
	(loss) from sales of assets other than inventory	1				
	ome or (loss) from special events			<u> </u>		
	profit or (loss) from sales of inventory			<u> </u>		
	evenue a					
				1		
е —						
12 Subtota	al Add columns (b), (d), and (e)		0		106,079	0_
	Add line 12, columns (b), (d), and (e)				13	106,079
	sheet in line 13 instructions on page 29					
Part XV	-B Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
Line No.	Explain below how each activit	y for whic	h income is reported i	ın column (e	e) of Part XVI-A contrib	uted importantly to the
▼	accomplishment of the foundation	on's exemp	ot purposes (other than	by providing	g funds for such purpose	es) (See page 29 of the
	instructions)		·			
	N/A					
				,		
				- "-		
					··-	
			· · · · · · · · · · · · · · · · · · ·			
						
			······································			
				-	·	
			-			
						
					· · · · · · · · · · · · · · · · · · ·	
	<u> </u>		<u>.</u> .			
	ļ <u> </u>					
						
					 	
	<u> </u>		·			

Part XVII	Information Exempt Orga		nsfers To and Trans	actions a	nd Relation	onships With N	lonc	hari	table
	-	-	gage in any of the follow ection 501(c)(3) organization					Yes	No
	zations?	000 (00.101 0.101.1 0	30.10.1. 00.1(0)(0) 0.92	,		g p			
•		oundation to a nonc	haritable exempt organization of	f					ł
							1a(1)		Х
							1a(2)		Х
	transactions								
(1) Sa	les of assets to a nonch	naritable exempt orga	inization				1b(1)		_X_
			npt organization						X
(3) Re	ental of facilities, equipm	ent, or other assets					1b(3)		X
							1b(4)		X
							1b(5)		X
(6) Pe	erformance of services of	or membership or fur	draising solicitations				1b(6)		X
	-	=	assets, or paid employees						X
d If the	answer to any of t	the above is "Yes	s," complete the following	schedule C	Column (b) s	hould always show	the	fair i	market
			s given by the reporting						
value	in any transaction or	sharing arrangen	nent, show in column (d)						
(a) Line no	(b) Amount involved NA	(c) Name of non	charitable exempt organization	(d) Desci	ription of transfe	rs, transactions, and share	nng arra	ingeme	nts
									
	· · · · · · · · · · · · · · · · · · ·								
	·····			 					
	··								
									
	· · · · · · · · · · · · · · · · · · ·			-					
							-		
descri	ped in section 501(c) of the complete the following	the Code (other than	ated with, or related to, a section 501(c)(3)) or in section			· · · · · · · [es X	No
NI / D	(a) Name of organization	n	(b) Type of organization		(c) Description of relations	hip		
N/A		-							
	· · · · · · · · · · · · · · · · · · ·								
			· · · · · · · · · · · · · · · · · · ·						
				+ -		 	<u>.</u>		
Lind	er penalties of penury, I de	eclare Mat I have eval	mined this return, including accor	nnanvana scher	dules and staten	nents and to the hest of	ıf mv k	nowled	lne and
	ef, it is true, correct, and con	nplete Declaration of p	reparer (other than taxpayer or fide	ician) is based	on all information	on of which preparer has	any kn	owledg	e
- 1	Dillelan	10den	 1.3	12/11	7	/ice Presider	h +		
Here	Signature of officer or truste		Date	(- / "	Title		10		
1,	Print/Type preparer's		Preparer's signature		Date		PTIN		
	I min Type preparers	Haille	Tropardi 3 signature		5010		4		
Paid						Check if self-employed			
Preparer	Fremis noss : A		<u> </u>		1				
Use Only	Firm's name ► Firm's address ►			-	-	Firm's EfN ►			
	i min a dudiess					Dhone no			

Schedule B (Form 990, 990-EZ,

Schedule of Contributors

OMB No 1545-0047

2010

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

Name of the organization

► Attach to Form 990, 990-EZ, or 990-PF.

Employer identification number

Alaska Airlines F Organization type (check o				92-0166198
Organization type (Check o	ne)			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) n	nonexempt charitable trust not treated as	s a private fou	ndation
	527 political	l organization		
Form 990-PF	X 501(c)(3) exe	empt private foundation		
	4947(a)(1) n	nonexempt charitable trust treated as a p	orivate foundat	ion
	501(c)(3) tax	xable private foundation		
instructions		ation can check boxes for both the Genera	al Rule and a S	Special Rule See
General Rule				
	on filing Form 990, 990-E ly one contributor Comp	EZ, or 990-PF that received, during the plete Parts I and II	year, \$5,000 d	or more (in money or
Special Rules				
sections 509(a)(1) and 170(b)(1)(A)(vi), a	g Form 990 or 990-EZ that met the 331/3 and received from any one contributor, d nount on (i) Form 990, Part VIII, line 1h o	uring the year	, a contribution of the
the year, aggrega	ate contributions of more	nization filing Form 990 or 990-EZ that re e than \$1,000 for use <i>exclusively</i> for religi of cruelty to children or animals. Complete	ious, charitabl	e, scientific, literary, or
the year, contribution aggregate to most gear for an exclusion applies to this org	tions for use exclusively to the than \$1,000. If this bookingly religious, charitable ganization because it rec	nization filing Form 990 or 990-EZ that refor religious, charitable, etc., purposes, ex is checked, enter here the total contribe, etc., purpose. Do not complete any of ceived nonexclusively religious, charitable.	but these con outlons that we the parts unles e, etc., contrib	tributions did not ere received during the es the General Rule
Caution. An organization th 990-EZ, or 990-PF), but it m	at is not covered by the oust answer "No" on Part	General Rule and/or the Special Rules of IV, line 2 of its Form 990, or check the meet the filing requirements of Schedule	does not file So box on line H	of its Form 990-EZ, or on

Name of organization

Alaska Airlines Foundation

Employer identification number 92-0166198

Part I Contributors (see instructions)	
--	--

	<u> </u>		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Alaska Airlines, Inc. PO Box 68900 Seattle, WA 98168-0900	\$500,000.00	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

Alaska	Airlines Foundation	92-0166	5198
Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

Name of organization Alaska Airlines Foundation

92-0166198

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) > \$

	Thinbuttons of \$1,000 of less for the	e year (Linter tins informat	tion once See instructions) > 3
(a) No from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of gi	ift
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
	· · · · · · · · · · · · · · · · · · ·		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			
		(e) Transfer of gif	ft
ľ	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

Statement 1

Alaska Airlines Foundation EIN: 92-0166198

Tax Year: January 1, 2010 to December 31, 2010

Part I: Line 11

Capital gain distr From a RIC or REIT Total	2.131 2,131
Part I: Line 18	
Federal tax	2,500
Foreign tax	563
State tax Total	3,088
Total	3,000
Part I: Line 23	
Other Expenses	-
Bank Fees Total	5
Total	

Alaska Airlines Foundation

EIN: 92-0166198

Tax Year: January 1, 2010 to December 31, 2010

Part II: Line 10b

Vanguard Balanced Index Fund Signal Shares at Cost Vanguard Total International Stock Index Fund at Cost Vanguard Total Bond Market Index Inv Fund at Cost Vanguard Total Stock Market Index Inv Fund at Cost 2 361,469 746,879 799,470

1,907,820

Statement 2

Alaska Airlines Foundation EIN: 92-0166198 Tax Year: January 1, 2010 to December 31, 2010 Part VIII: Line 1

(a) Name and Address	(b) Title and average hours per week devoted to position	(C) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
William S Ayer P O. Box 68900 Seattle, WA 98168-0900	Chairman/President 1 hr/week	0\$	\$0	0\$
Keith Loveless P O Box 68900 Seattle, WA 98168-0900	Vice Pres/Asst Sec'y 2 hr/week	0\$	0\$	0\$
William L MacKay 4750 International Airport Blvd Anchorage, AL 99502	Vice President 1 hr/week	0\$	0\$	0\$
Susan R Bramstedt 4750 International Airport Blvd Anchorage, AK 99502	Executive Director 4 hr/week	0\$	\$0	90
Brandon S Pedersen P.O Box 68900 Seattle, WA 98168-0900	Vice President 1 hr/week	0\$	\$0	\$0
Jeanne Gammon P O Box 68900 Seattle, WA 98168-0900	Secretary/Treasurer 2 hr/week	\$0	0\$	\$0

Statement 4

Alaska Airlines Foundation EIN. 92-0166198

Tax Year January 1, 2010 to December 31, 2010 Part XV: Supplementary Information (continued)

3. Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year					
Recipient Name and Address	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution		Amount
The Association of Village Council Presidents	N/A	501(C)(3)	Support AVCP to provide Human Development, Social Services, and other culturally relevant programs for the people		15,000
Alaska Aviation Museum	N/A	501(C)(3)	Support Alaska Aviation Museum's mission to preserve, display, & honor Alaska's aviation heritage	Θ	15,000
Museum of Flight	Y/N	501(C)(3)	Support the Museum of Flight's mission to acquire, preserve, and exhibit historically significant air and space artifacts	\$	25,000
Total				€	55,000

b Approved for future payment

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