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Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0052

2010

For calendar year 2010, or tax year beginning 04-01-2010 , and ending 03-31-2011

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

Name of foundation
KONIAG EDUCATION FOUNDATION

A Employer identification number
92-0145017

Number and street (or P O box number if mail is not delivered to street address)
4241 B STREET
ROOM/SUITE 303B

Room/suite

B Telephone number (see page 10 of the instructions)

(907) 562-9093

City or town, state, and ZIP code
ANCHORAGE, AK 99503

C If exemption application is pending, check here ☐

D 1. Foreign organizations, check here ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ☐








H Check type of organization ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

I Fair market value of all assets at end of year (from Part II, col. (c), line 16)
\$ 5,746,745

J Accounting method ☐ Cash ☒ Accrual
☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	433,792			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	35,643	35,643	35,643	
	4 Dividends and interest from securities.	107,742	107,742	107,742	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 	156,567			
	b Gross sales price for all assets on line 6a _____ 937,544				
	7 Capital gain net income (from Part IV , line 2)		55,576		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
Operating and Administrative Expenses	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule) 	5,481		5,481	
	12 Total. Add lines 1 through 11	739,225	198,961	148,866	
	13 Compensation of officers, directors, trustees, etc	82,147			82,147
	14 Other employee salaries and wages	123,913			123,913
	15 Pension plans, employee benefits	47,202			42,172
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule). 	21,517			21,388
	c Other professional fees (attach schedule) 	18,762	18,762		
	17 Interest				
	18 Taxes (attach schedule) (see page 14 of the instructions) 	1,802			
	19 Depreciation (attach schedule) and depletion 	4,576			
	20 Occupancy	28,184			25,419
	21 Travel, conferences, and meetings	15,753			14,085
	22 Printing and publications	2,145			2,145
	23 Other expenses (attach schedule). 	125,181			144,371
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	471,182	18,762		455,640
	25 Contributions, gifts, grants paid	218,632			218,632
	26 Total expenses and disbursements. Add lines 24 and 25	689,814	18,762		674,272
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	49,411			
	b Net investment income (if negative, enter -0-)		180,199		
	c Adjusted net income (if negative, enter -0-)			148,866	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Cat No 11289X

Form **990-PF** (2010)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	4,271	5,367	5,367
	2	Savings and temporary cash investments	15,969	5,588	5,588
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable	29,219	29,089	29,089
	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 ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges	7,738	5,776	5,776
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ 43,671 Less accumulated depreciation (attach schedule) ▶ _____ 37,169	11,083	6,502	
15	Other assets (describe ▶ _____)	5,231,976	5,700,925	5,700,925	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	5,300,256	5,753,247	5,746,745	
Liabilities	17	Accounts payable and accrued expenses	26,421	9,117	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)	4,154	8,134	
	23	Total liabilities (add lines 17 through 22)	30,575	17,251	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	5,269,681	5,735,996	
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see page 17 of the instructions)	5,269,681	5,735,996	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	5,300,256	5,753,247	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1 5,269,681
2	Enter amount from Part I, line 27a	2 49,411
3	Other increases not included in line 2 (itemize) ▶ _____	3 416,904
4	Add lines 1, 2, and 3	4 5,735,996
5	Decreases not included in line 2 (itemize) ▶ _____	5
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6 5,735,996

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a				
(e) Gross sales price		(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	
(h) Gain or (loss) (e) plus (f) minus (g)				
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(j) F M V as of 12/31/69		(k) Adjusted basis as of 12/31/69	(l) Excess of col (i) over col (j), if any	
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)			2	55,576
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8				

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If “Yes,” the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2009	496,834	4,534,756	0 109561
2008	465,085	4,753,177	0 097847
2007	475,192	5,643,446	0 084202
2006	384,544	5,701,354	0 067448
2005	377,331	5,202,619	0 072527
2 Total of line 1, column (d).			
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5.			
5 Multiply line 4 by line 3.			
6 Enter 1% of net investment income (1% of Part I, line 27b).			
7 Add lines 5 and 6.			
8 Enter qualifying distributions from Part XII, line 4.			
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions on page 18			

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)		
1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		11,802
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2
3 Add lines 1 and 2.		31,802
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		51,802
6 Credits/Payments		
a 2010 estimated tax payments and 2009 overpayment credited to 2010	6a1,476	
b Exempt foreign organizations—tax withheld at source	6b	
c Tax paid with application for extension of time to file (Form 8868)	6c	
d Backup withholding erroneously withheld	6d	
7 Total credits and payments Add lines 6a through 6d.		71,476
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached		8
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9326
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		10
11 Enter the amount of line 10 to be Credited to 2011 estimated tax 0 Refunded		11

Part VII-A Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		1b	No
c Did the foundation file Form 1120-POL for this year?.		1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ (2) On foundation managers \$			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?.		4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?.		4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	Yes
7 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		7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) AK			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .		8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV		9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	No

Part 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		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW KONIAGEDUCATION ORG	13	Yes	
14	The books are in care of DAWNI HAINES Telephone no (907) 338-0040 Located at PO BOX 212672 ANCHORAGE AK ZIP+4 99521			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority 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.				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any 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 20 of the instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b		
c	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		
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))			
a	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years 20 , 20 , 20 , 20			
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 all years listed, answer "No" and attach statement—see page 20 of the instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.</i>)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here.	5b		No
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870.</i>	6b		No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."				
(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 account, other allowances
NONE				
Total number of other employees paid over \$50,000.				

Part VIII

3 Five highest-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
NONE		

Total number of others receiving over \$50,000 for professional services.

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
--	----------

1	
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 program-related investments See page 24 of the instructions	
3		

Total. Add lines 1 through 3.

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	5,466,451
b	Average of monthly cash balances.	1b	15,597
c	Fair market value of all other assets (see page 24 of the instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	5,482,048
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	5,482,048
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions).	4	82,231
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,399,817
6	Minimum investment return. Enter 5% of line 5.	6	269,991

Part XI

Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	269,991
2a	Tax on investment income for 2010 from Part VI, line 5.	2a	1,802
b	Income tax for 2010 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,802
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	268,189
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	268,189
6	Deduction from distributable amount (see page 25 of the instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	268,189

Part XII

Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	674,272
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	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	4	674,272
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).	5	1,802
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	672,470
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see page 26 of the instructions)

		(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1	Distributable amount for 2010 from Part XI, line 7				268,189
2	Undistributed income, if any, as of the end of 2010				
a	Enter amount for 2009 only.				
b	Total for prior years 20____, 20____, 20____				
3	Excess distributions carryover, if any, to 2010				
a	From 2005.				119,822
b	From 2006.				108,370
c	From 2007.				198,548
d	From 2008.				232,748
e	From 2009.				273,044
f	Total of lines 3a through e.	932,532			
4	Qualifying distributions for 2010 from Part XII, line 4 ▶ \$ 674,272				
a	Applied to 2009, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see page 26 of the instructions)				
c	Treated as distributions out of corpus (Election required—see page 26 of the instructions). . .				
d	Applied to 2010 distributable amount.				268,189
e	Remaining amount distributed out of corpus	406,083			
5	Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,338,615			
b	Prior years' undistributed income Subtract line 4b from line 2b.				
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 . . .				
e	Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions				
f	Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011				0
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)	119,822			
9	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	1,218,793			
10	Analysis of line 9				
a	Excess from 2006.				108,370
b	Excess from 2007.				198,548
c	Excess from 2008.				232,748
d	Excess from 2009.				273,044
e	Excess from 2010.				406,083

Part XIV

Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2010	(b) 2009	(c) 2008	(d) 2007	
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed.					
d	Amounts included in line 2c not used directly for active conduct of exempt activities.					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number of the person to whom applications should be addressed

KONIAG EDUCATION FOUNDATION
4241 B STREET SUITE 303B
ANCHORAGE, AK 99503
(907) 562-9093

b

The form in which applications should be submitted and information and materials they should include

ALL APPLICATIONS ARE AVAILABLE ON THE WEBSITE AT WWW.KONIAGEDUCATION.ORG

c

Any submission deadlines

SUBMISSION DEADLINES ARE AVAILABLE ON THE WEBSITE AT WWW.KONIAGEDUCATION.ORG

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

AWARD RESTRICTIONS OR LIMITATIONS ARE AVAILABLE ON THE WEBSITE AT WWW.KONIAGEDUCATION.ORG

Part XV

Supplementary Information (continued)

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

Recipient	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
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			▶ 3a	218,632
b Approved for future payment				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments			14	35,643	
4 Dividends and interest from securities.			14	107,742	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory			14	55,576	100,991
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory.					
WORLD COM CLASS ACTION					
11 Other revenue a REC _____			25	5,481	
b _____					
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e).				204,442	100,991
13 Total. Add line 12, columns (b), (d), and (e).					

[illegible]

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a

Transfers from the reporting foundation to a noncharitable exempt organization of

1

Cash.

1a(1)

No

2

Other assets.

1a(2)

No

b

Other transactions

1

Sales of assets to a noncharitable exempt organization.

1b(1)

No

2

Purchases of assets from a noncharitable exempt organization.

1b(2)

No

3

Rental of facilities, equipment, or other assets.

1b(3)

No

4

Reimbursement arrangements.

1b(4)

No

5

Loans or loan guarantees.

1b(5)

No

6

Performance of services or membership or fundraising solicitations.

1b(6)

No

c

Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

1c

No

d

If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a

Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐

Yes

☒

No

b

If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
--------------------------	--------------------------	---------------------------------

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

2011-06-30

Date

Title

Paid Preparer's Use Only

Preparer's Signature

CLAY HIGHTOWER CPA

Date

2011-06-21

Check if self-employed

☐

PTIN

Firm's name

SRAMEK-HIGHTOWER CPAS PC

Firm's EIN

Firm's address

2525 C STREET SUITE 100

ANCHORAGE, AK 99503

Phone no

(907) 563-6722

Form 990-PF (2010)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Name of organization KONIAG EDUCATION FOUNDATION	Employer identification number 92-0145017
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule—

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An Organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization KONIAG EDUCATION FOUNDATION	Employer identification number 92-0145017
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Part I Contributors (see Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>	KONIAG INC 4300 B STREET ANCHORAGE, AK 99503 	\$ 169,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>2</u>	EXXON MOBIL CORPORATION 5959 LAS CLINAS BLVD IRVING, TX 75039 	\$ 15,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u> </u>	 	\$ <u> </u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u> </u>	 	\$ <u> </u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u> </u>	 	\$ <u> </u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u> </u>	 	\$ <u> </u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization KONIAG EDUCATION FOUNDATION	Employer identification number 92-0145017
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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
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>

Name of organization KONIAG EDUCATION FOUNDATION	Employer identification number 92-0145017
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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) ► \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div>(e) Transfer of gift</div>		
	<div>Transferee's name, address, and ZIP + 4</div> <div>Relationship of transferor to transferee</div>		
—	<div></div>	<div></div>	<div></div>
	<div>(e) Transfer of gift</div>		
	<div>Transferee's name, address, and ZIP + 4</div> <div>Relationship of transferor to transferee</div>		
—	<div></div>	<div></div>	<div></div>
	<div>(e) Transfer of gift</div>		
	<div>Transferee's name, address, and ZIP + 4</div> <div>Relationship of transferor to transferee</div>		
—	<div></div>	<div></div>	<div></div>
	<div>(e) Transfer of gift</div>		
	<div>Transferee's name, address, and ZIP + 4</div> <div>Relationship of transferor to transferee</div>		
—	<div></div>	<div></div>	<div></div>
	<div>(e) Transfer of gift</div>		
	<div>Transferee's name, address, and ZIP + 4</div> <div>Relationship of transferor to transferee</div>		


Additional Data

Software ID:
Software Version:
EIN: 92-0145017
Name: KONIAG EDUCATION FOUNDATION


Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
TYAN HAYES 	EXEC DIR	82,147	0	0
4241 B STREET SUITE 303B ANCHORAGE, AK 99503	40 00			
EDWARD WARD 	PRESIDENT	0	0	0
13640 VERN DRIVE ANCHORAGE, AK 99516	1 00			
TONY CANGE 	SEC/TRES	0	0	0
5310 WOODCREST CIR ANCHORAGE, AK 99507	1 00			
LAURIE FAGNANI 	DIRECTOR	0	0	0
3501 DENALI STREET SUITE 200 ANCHORAGE, AK 99503	1 00			
JACQUELINE MADSEN 	DIRECTOR	0	0	0
4241 B STREET SUITE 303B ANCHORAGE, AK 99503	1 00			
JANISSA JOHNSON 	DIRECTOR	0	0	0
3900 C STREET SUITE 801 ANCHORAGE, AK 99503	1 00			
STEPHEN PARSONS 	DIRECTOR	0	0	0
4009 ROSEMEADE DR FAIRFAX, VA 22033	1 00			
UWE GROSS 	DIRECTOR	0	0	0
275 W MONTE CRISTO WICKENBURG, AZ 85390	1 00			
JON PANAMAROFF 	V PRESIDENT	0	0	0
4241 B STREET SUITE 303B ANCHORAGE, AK 99503	1 00			
WILLIAM ANDERSON JR 	DIRECTOR	0	0	0
104 CENTER AVE STE 205 KODIAK, AK 99615	1 00			
JUDY FULP 	DIRECTOR	0	0	0
PO BOX 2306 KODIAK, AK 99615	1 00			
LORENA SKONBERG 	DIRECTOR	0	0	0
6531 BABY BEAR DRIVE ANCHORAGE, AK 99507	1 00			


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
BLAINE SCOULLER 101 KIKSADI CT SITKA,AK 99835			SCHOLARSHIP	1,000
DESIREE NELSON PO BOX 751017 FAIRBANKS,AK 99775			SCHOLARSHIP	600
DANIEL PANAMAROFF 1128 HESS ROAD FAIRBANKS,AK 99775			SCHOLARSHIP	500
LILLIAN O'BRIEN PO BOX 346 NENANA,AK 99760			SCHOLARSHIP	1,700
KAROLYN VANWINGERDEN 1281 PEPPER STREET HOUSTON,AK 99694			SCHOLARSHIP	1,613
LARRY SHUGAK PO BOX 123 OLD HARBOR,AK 99693			SCHOLARSHIP	750
DERICK MAGNUSEN PO BOX 1124 UNALASKA,AK 99685			SCHOLARSHIP	2,300
JOHNNIE STOCK 65679 S VICTORY RD SUTTON,AK 99674			SCHOLARSHIP	600
PAT MULLAN PO BOX 4284 SOLDOTNA,AK 99669			SCHOLARSHIP	100
NIKITA NAUMOFF PO BOX 1283 SOLDOTNA,AK 99669			SCHOLARSHIP	1,000
NATALIE PARAZOO PO BOX 2766 SOLDOTNA,AK 99669			SCHOLARSHIP	500
STACEY SIMMONS 263 WEST REDOUBT AVE SOLDOTNA,AK 99669			SCHOLARSHIP	1,800
KRISTOPHER VANWINGERDEN PO BOX 521644 BIG LAKE,AK 99652			SCHOLARSHIP	2,500
BEN HOLMSTROM 2212 TABASCO CAT PALMER,AK 99645			SCHOLARSHIP	1,800
HANNAH HOLMSTROM 2212 N TABASCO CAT DR PALMER,AK 99645			SCHOLARSHIP	1,200
Total  3a				218,632

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year				
OLIVER HOLMSTROM PO BOX 3578 PALMER, AK 99645			SCHOLARSHIP	600
JANELL SHANAGIN PO BOX 64 OUZINKIE, AK 99644			SCHOLARSHIP	1,250
NINA KRUMREY 1 MT VIEW DRIVE OLD HARBOR, AK 99643			SCHOLARSHIP	500
SOFIA INFANTE 280 BOYER AVE WALLA WALLA, WA 98632			SCHOLARSHIP	1,200
CHARLES CARLSON PO BOX 93 LARSEN BAY, AK 99624			SCHOLARSHIP	900
CHARLES CARLSON PO BOX 93 LARSEN BAY, AK 99624			SCHOLARSHIP	900
ZACHARY BAILOR 3535 SITKINAK DR KODIAK, AK 99615			SCHOLARSHIP	400
JOSH BAILOR 3535 SITKINAK DR KODIAK, AK 99615			SCHOLARSHIP	500
JOSHUA BAKER 3226 ARCTIC TERN KODIAK, AK 99615			SCHOLARSHIP	600
CHANTELLE BARTLESON BOX 8736 KODIAK, AK 99615			SCHOLARSHIP	1,000
MARTHA BRANSON PO BOX 451 KODIAK, AK 99615			SCHOLARSHIP	1,000
ALANA BRANSON 1310 E REZANOF DR KODIAK, AK 99615			SCHOLARSHIP	1,075
MARLON BRANSON PO BOX 451 KODIAK, AK 99615			SCHOLARSHIP	2,300
AMANDA CARLOUGH 2815 WOODY WAY KODIAK, AK 99615			SCHOLARSHIP	1,200
MATTHEW DELGADO BOX 8736 KODIAK, AK 99615			SCHOLARSHIP	625
Total  3a				218,632


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year				
ALISHA DRABEK PO BOX 261 KODIAK, AK 99615			SCHOLARSHIP	1,150
NINA GRONN 1511 BARANOFF KODIAK, AK 99615			SCHOLARSHIP	250
CHRISTOPHER MALUTIN PO BOX 633 KODIAK, AK 99615			SCHOLARSHIP	1,500
SARAH MILES PO BOX 2607 KODIAK, AK 99615			SCHOLARSHIP	2,150
JASON OPHEIM PO BOX 9056 KODIAK, AK 99615			SCHOLARSHIP	1,700
PATRICIA PRINCE PO BOX 8787 KODIAK, AK 99615			SCHOLARSHIP	964
PATRICK SCHNEIDER PO BOX 311 KODIAK, AK 99615			SCHOLARSHIP	250
SARAH SHORT PO BOX 348 KODIAK, AK 99615			SCHOLARSHIP	2,649
KAYLEE GRANT PO BOX 1793 KENAI, AK 99611			SCHOLARSHIP	2,500
DECEMBER SHUGAK PO BOX 2460 KENAI, AK 99611			SCHOLARSHIP	700
ANDREA TAYLOR PO BOX 1231 KASILOF, AK 99610			SCHOLARSHIP	1,000
MICHELLE MEZA 17521 BEAUJOLAIS DR EAGLE RIVER, AK 99577			SCHOLARSHIP	1,433
GREGORY LUKIN BOX 41 PORT LIONS, AK 99550			SCHOLARSHIP	1,000
PETER SQUARTSOFF 111 BIRCH DRIVE PORT LIONS, AK 99550			SCHOLARSHIP	1,000
PETER BOSKOFISKY PO BOX 48024 CHIGNIK LAKE, AK 99548			SCHOLARSHIP	10,000
Total  3a				218,632

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year				
STEVE HELGASON PO BOX 240647 ANCHORAGE,AK 99524			SCHOLARSHIP	1,000
ANTHONY REED PO BOX 220513 ANCHORAGE,AK 99522			SCHOLARSHIP	1,000
MELISSA MARVIN 2906 W 30TH AVENUE 15 ANCHORAGE,AK 99517			SCHOLARSHIP	1,366
STACY PULIS 3717 W 43RD AVE ANCHORAGE,AK 99517			SCHOLARSHIP	1,800
BLAKE AVERY 4341 SAGE CIRCLE ANCHORAGE,AK 99516			SCHOLARSHIP	3,200
JUSTIN KEWAN 12910 SILVER SPRUCE DR ANCHORAGE,AK 99516			SCHOLARSHIP	1,000
ESTHER STEVENS 7905 UPPER HUFFMAN ROAD ANCHORAGE,AK 99516			SCHOLARSHIP	1,800
SIDNEY HOEDEL 110563 SPINDRIFT LOOP ANCHORAGE,AK 99515			SCHOLARSHIP	1,075
MICHELLE MCCOY 12531 TONODA LP2 ANCHORAGE,AK 99515			SCHOLARSHIP	2,150
ALEXANDRIA MULLAN 10613 BOYSEN BERRY PL ANCHORAGE,AK 99515			SCHOLARSHIP	400
LAURA MULLER 1810 VASHON CIRCLE ANCHORAGE,AK 99515			SCHOLARSHIP	1,000
JARON CARLSON 6955 CARAVELLE DR ANCHORAGE,AK 99508			SCHOLARSHIP	400
JARON CARLSON 6955 CARAVELLE DR ANCHORAGE,AK 99508			SCHOLARSHIP	400
SARAI ETHERIDGE 2677 ASPEN HEIGHTS LOOP ANCHORAGE,AK 99508			SCHOLARSHIP	2,150
LANCE GATTER 3240 E 42ND AVE ANCHORAGE,AK 99508			SCHOLARSHIP	1,800
Total ▶ 3a				218,632

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year				
YOLANDA INGA 390 S BRAGAW ST 9 ANCHORAGE, AK 99508			SCHOLARSHIP	700
JAMES ANDERSON 9499 BRAYTON DR 86 ANCHORAGE, AK 99507			SCHOLARSHIP	132
GUNDERSEN DWAYNE 9499 BRAYTON DRIVE SPACE ANCHORAGE, AK 99507			SCHOLARSHIP	1,000
BRADLEY KNOWLES 6321 NORM DR ANCHORAGE, AK 99507			SCHOLARSHIP	1,000
STEPHANIE LEFFEL 3611 E 68TH AVE ANCHORAGE, AK 99507			SCHOLARSHIP	866
PARKER QUIMBY 2017 TUDOR HILLS CT ANCHORAGE, AK 99507			SCHOLARSHIP	1,800
RALPH UNGER 9641 VANGUARD DR 3 ANCHORAGE, AK 99507			SCHOLARSHIP	275
DALE CARLOUGH 1001 BONIFACE PKWY 22E-1 ANCHORAGE, AK 99504			SCHOLARSHIP	595
CAROLINE ELIE 7721 EAST 4TH AVENUE UNIT ANCHORAGE, AK 99504			SCHOLARSHIP	1,005
JOHN GREGORIOFF 4306 REKA DRIVE ANCHORAGE, AK 99504			SCHOLARSHIP	429
SHAWN WOLKOFF 7721 E 4TH AVE UNIT A ANCHORAGE, AK 99504			SCHOLARSHIP	1,000
JENNA BURCH 423 W 22ND AVE ANCHORAGE, AK 99503			SCHOLARSHIP	1,000
DANICA CLARION 611 W 32ND AVE APT 107 ANCHORAGE, AK 99503			SCHOLARSHIP	1,200
TABITHA FISCHER 908 CLAY COURT ANCHORAGE, AK 99503			SCHOLARSHIP	1,500
NICHOLAS SHURAVLOFF 2906 DAWSON ST APT 1 ANCHORAGE, AK 99503			SCHOLARSHIP	957
Total  3a				218,632

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year				
DIANA VELEZ 4840 CANTERBURY WAY ANCHORAGE,AK 99503			SCHOLARSHIP	700
FORFEITURES 4241 B STREET SUITE 303B ANCHORAGE,AK 99503			SCHOLARSHIP	-3,038
JAMES PFEIFER 9447 NOBLEWOOD ST ANCHORAGE,AK 99502			SCHOLARSHIP	2,150
CHRISTINE REFT 6800 COLONIAL CT 3 ANCHORAGE,AK 99502			SCHOLARSHIP	160
VERONICA HENSON 605-NW 117TH ST VANCOUVER,WA 98685			SCHOLARSHIP	2,150
LOGAN RHEAUME 1338 STELLA RD LONGVIEW,WA 98632			SCHOLARSHIP	1,000
SARAH RHEAUME 1338 STELLA RD LONGVIEW,WA 98632			SCHOLARSHIP	300
ZOYIA COMBES 1014 VALLEY VIEW WAY ABERDEEN,WA 98520			SCHOLARSHIP	2,150
REBECCA CADLE 422 EASTBAY DR NE OLYMPIA,WA 98506			SCHOLARSHIP	700
ASHLEY PETERSEN 922 66TH AVE E FIFE,WA 98424			SCHOLARSHIP	600
ZACHARY SHAW 21509 102ND ST CT E BONNEY LAKE,WA 98391			SCHOLARSHIP	250
JESSICA DOTSON 5018 NW UFF DA LANE SILVERDALE,WA 98383			SCHOLARSHIP	2,150
STEPHANIE COALE 4955 HIDDEN TERRACE LN SE PORT ORCHARD,WA 98366			SCHOLARSHIP	2,150
SAVANNAH DUNHAM 20302 6TH ST NE SNOHOMISH,WA 98290			SCHOLARSHIP	1,433
DREW YOUNG 2918 BROOK LN SEDROWOLLEY,WA 98284			SCHOLARSHIP	1,800
Total ▶ 3a				218,632


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ANNA NATAN 9626 58TH PL W MUKILTEO, WA 98275			SCHOLARSHIP	1,800
KAREN WARREN 1115 MADDOX CREEK LANE MOUNT VERNON, WA 98274			SCHOLARSHIP	735
KAYLA WOODS 618 57TH DR NW TULALIP, WA 98271			SCHOLARSHIP	1,500
DANIELLE GRIFFITH 6915 111TH DR NE LAKE STEVENS, WA 98258			SCHOLARSHIP	1,200
KATIEANNN HAUBRICH 6799 DAFFODIL TERRACE FERNDALE, WA 98248			SCHOLARSHIP	1,000
WHITNEY HEYSER 5040 MOSQUITO LK RD DEMING, WA 98244			SCHOLARSHIP	800
NATALIE KING 5050 50TH AVE SW SEATTLE, WA 98136			SCHOLARSHIP	1,800
EMILY LAVASSAR 702 W CREMORA ST SEATTLE, WA 98119			SCHOLARSHIP	2,150
TIMOTHY VON SCHEELE 4 151ST PLACE SOUTHEAST LYNNWOOD, WA 98087			SCHOLARSHIP	1,800
TIMOTHY FARNAN 1010 1 ST N 7 RENTON, WA 98057			SCHOLARSHIP	1,000
LAURA WOODMAN 16144 NE 113TH CT REDMOND, WA 98052			SCHOLARSHIP	1,200
KATRINA WOODMAN 16144 NE 113TH CT REDMOND, WA 98052			SCHOLARSHIP	1,900
TAMARA KLOPFSTEIN 26115 220TH PLACE SE MAPLE VALLEY, WA 98038			SCHOLARSHIP	600
BRIAN WATTS 630 HILLCREST KENT, WA 98030			SCHOLARSHIP	1,000
ALICIA PARSONS 18630 66TH AVE NE KENMORE, WA 98028			SCHOLARSHIP	7,300
Total ▶ 3a				218,632

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year				
SHELBY PARSONS 18630 66TH AVE NE KENMORE,WA 98028			SCHOLARSHIP	850
WILLIAM HENSON 7804 OLYMPIC VIEW DR EDMONDS,WA 98026			SCHOLARSHIP	500
BRIANNA LARSEN 23824 2ND AVE SE BOTHELL,WA 98021			SCHOLARSHIP	1,350
WENDY WICK - BURRIL PO BOX 222 PRAIRIE CITY,OR 97869			SCHOLARSHIP	1,075
KYLE VAUGHN 94196 HORTON RD BLACHLY,OR 97412			SCHOLARSHIP	2,300
KATHERINE PAUL 211 SE 12TH AVE APT B PORTLAND,OR 97214			SCHOLARSHIP	1,000
JASMINE TEMPLE 50 KERR PARKWAY 94 LAKE OSWEGO,OR 97035			SCHOLARSHIP	2,150
KINSEY BAGWELL 9720 SW NEW FOREST DR BEAVERTON,OR 97008			SCHOLARSHIP	1,800
JORDAN NAKASONE 707 PARTRIDGE COURT LINCOLN,CA 95648			SCHOLARSHIP	1,200
CHELSIE NAKASONE 707 PARTRIDGE COURT LINCOLN,CA 95648			SCHOLARSHIP	1,400
JON JOINER 4841 PATRICIA DR EUREKA,CA 95503			SCHOLARSHIP	800
SAMANTHA MATTHEWS 2336 GRENOBLE DR LODI,CA 95242			SCHOLARSHIP	1,000
ARCHIE PETERSON 11508 PACIFIC HARBOR AVE BAKERSFIELD,CA 93312			SCHOLARSHIP	1,000
DANIEL PETERSON 11508 PACIFIC HARBOR AVE BAKERSFIELD,CA 93312			SCHOLARSHIP	1,000
NATHAN PETERSON 11508 PACIFIC HARBOR AVE BAKERSFIELD,CA 93312			SCHOLARSHIP	1,000
Total ▶ 3a				218,632


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year				
WANDA NICHOLS 6410 VIA REAL CARPINTERIA,CA 93013			SCHOLARSHIP	1,000
KATHRYN HANSEN 15063 COBALT RD VICTORVILLE,CA 92394			SCHOLARSHIP	2,500
DARIN WOOLPERT 4438 OHIO STREET SAN DIEGO,CA 92116			SCHOLARSHIP	2,500
GARRETT SCHMIDT 1240 HOLLYWOOD BLVD CORRALES,NM 87048			SCHOLARSHIP	1,800
NICHOLAS KRAFT 177 W GOLD RUSH TRAIL FLAGSTAFF,AZ 86001			SCHOLARSHIP	1,250
TARA STILLER 2863 W FIREBROOK TUCSON,AZ 85741			SCHOLARSHIP	1,200
KAYLA CHESTER 26630 N 45TH ST CAVE CREEK,AZ 85331			SCHOLARSHIP	1,200
SIMEONOFF RICHARD 949 W 13TH AVE APACHE JUNCTION,AZ 85120			SCHOLARSHIP	1,000
SHANDICE BEAL 5944 WEST CARDINGTON CIRC SALT LAKE CITY,UT 84118			SCHOLARSHIP	866
THOMAS SWENSEN 175 4TH AVENUE SALT LAKE CITY,UT 84103			SCHOLARSHIP	3,500
ARIEL NATAN 351 E 10TH ST LOVELAND,CO 80537			SCHOLARSHIP	750
ERICA SMITH 1000 ARTEMIS CIR LAFAYETTE,CO 80026			SCHOLARSHIP	600
PATRICIA ELIE-WOLKOFF 781 SOUTH WILLIS STREET ABILENE,TX 79605			SCHOLARSHIP	800
VANESSA GARZA 3601 N 25TH LN MCALLEN,TX 78501			SCHOLARSHIP	800
RACHAEL SCHWANTES 225 PRAIRIE RIDGE DR BARTLESVILLE,OK 74006			SCHOLARSHIP	2,500
Total  3a				218,632

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
EMILY STRETCHER 703 MAY STREET JENNINGS,LA 70546			SCHOLARSHIP	2,150
HAYDEN BRADLEY 8021 S 66 AVENUE LAVISTA,NE 68128			SCHOLARSHIP	750
GABRIEL ECKSTEIN 800 PLATTE AVE EDGERTON,MO 64444			SCHOLARSHIP	1,500
DANIEL LARSEN 825 W CALISTA KANKAKEE,IL 60901			SCHOLARSHIP	575
KIRSTIN FELTON 91 BIG PINE LANE CASCADE,MT 59421			SCHOLARSHIP	600
CHELSEA LAPORTA 252 EAST KING ST WINONA,MN 55987			SCHOLARSHIP	1,800
SANTINO LAPORTA 252 EAST KING STREET WINONA,MN 55987			SCHOLARSHIP	250
RYAN BARCLAY 312 POTTER ST MULLIKEN,MI 48861			SCHOLARSHIP	1,000
FRANCES BABER 26801 HAMPDEN ST MADISON HEIGHTS,MI 48071			SCHOLARSHIP	1,000
MATTHEW D COOPER 8355 CHADBURN WAY MONTGOMERY,AL 36116			SCHOLARSHIP	1,500
VICTORIA KRAFT 3318 WILLIS DR BIRMINGHAM,AL 35243			SCHOLARSHIP	2,150
CARA BURNIDGE 1529 BELMONT TRACE TALLAHASSEE,FL 32301			SCHOLARSHIP	2,500
NATASHA MAYBERRY 1299 NORMANDY STREET CONOVER,NC 28613			SCHOLARSHIP	2,150
MATTHEW F COOPER 124 GATHERING PLACE DURHAM,NC 27713			SCHOLARSHIP	1,800
HAYDEN FITZGERALD 115 POINTE PLACE HILLSBOROUGH,NC 27278			SCHOLARSHIP	1,200
Total  3a				218,632

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year				
DANA MORRISON 2012 SANDERSON ROAD CHESAPEAKE, VA 23322			SCHOLARSHIP	1,200
ROBERT NIELSEN 5636 INVERCHAPEL RD SPRINGFIELD, VA 22151			SCHOLARSHIP	500
MARGARET NIELSEN 5636 INVERCHAPEL RD SPRINGFIELD, VA 22151			SCHOLARSHIP	11,200
JOHN ONEILL 8890 STANFORD BLVD 131 COLUMBIA, MD 21045			SCHOLARSHIP	1,000
JEREMY GILBREATH 3204 REGINA DR SILVER SPRING, MD 20906			SCHOLARSHIP	2,517
ANDREW DILWORTH 5412 SANDY POINT LANE CLIFTON, VA 20124			SCHOLARSHIP	2,300
AMY CHABITNOY 16 DIANA DR ANNVILLE, PA 17003			SCHOLARSHIP	1,600
REBECCA BADNER 106 W GARDEN RD LARCHMONT, NY 10538			SCHOLARSHIP	1,000
JOHNSON TANYA 486 BALDWIN AVE JERSEY CITY, NJ 07306			SCHOLARSHIP	1,000
Total  3a				218,632

Form

4562

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2010

Attachment
Sequence No 67

Department of the Treasury
Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

Name(s) shown on return KONIAG EDUCATION FOUNDATION	Business or activity to which this form relates INDIRECT DEPRECIATION	Identifying number 92-0145017
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 .	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	4,576
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System						
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System						
20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	4,576
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No						24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No		
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost
25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1							29	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) A mortization period or percentage	(f) A mortization for this year
42 A mortization of costs that begins during your 2010 tax year (see instructions)					
43 A mortization of costs that began before your 2010 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report				44	

TY 2010 Accounting Fees Schedule

Name: KONIAG EDUCATION FOUNDATION

EIN: 92-0145017

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING AND BOOKKEEPING	21,517			21,388

TY 2010 Compensation Explanation**Name:** KONIAG EDUCATION FOUNDATION**EIN:** 92-0145017

Person Name	Explanation
TYAN HAYES	
EDWARD WARD	
TONY CANGE	
LAURIE FAGNANI	
JACQUELINE MADSEN	
JANISSA JOHNSON	
STEPHEN PARSONS	
UWE GROSS	
JON PANAMAROFF	
WILLIAM ANDERSON JR	
JUDY FULP	
LORENA SKONBERG	

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TY 2010 Depreciation Schedule

Name: KONIAG EDUCATION FOUNDATION
EIN: 92-0145017

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
VARIOUS FIXED ASSETS	1997-04-01	1,340	1,340	S/L	7 0000				
FURNITURE	1998-04-22	1,450	1,450	S/L	7 0000				
COMPUTERS	1998-05-28	2,500	2,500	S/L	5 0000				
FURNITURE	1998-07-15	823	823	S/L	7 0000				
ARTWORK	1999-04-14	32							
BROCHURE RACK	1999-04-14	413	413	S/L	7 0000				
ARTWORK	1999-04-30	59							
ARTWORK	2000-05-22	138							
STORAGE SHELF	2001-03-07	100	100	S/L	7 0000				
OFFICE REFREGERATOR	2001-03-07	130	130	S/L	7 0000				
TV STAND	2001-04-27	109	109	S/L	7 0000				
ART WORK	2002-04-15	125							
ARCTIC OFFICE PRODUCTS	2002-07-15	267	267	S/L	5 0000				
COMPUTER SERVER/INSTALLATION	2005-05-26	7,684	7,242	200DB	5 0000	442			
TOSHIBA LAPTOP	2006-08-11	935	789	200DB	5 0000	106			
NETWORKING COMPUTER	2006-08-24	225	190	200DB	5 0000	25			
DESK	2006-09-15	397	278	200DB	7 0000	35			
CHAIRS	2006-09-15	198	139	200DB	7 0000	17			
FILE CABINET	2006-09-15	220	154	200DB	7 0000	20			
PHONE	2006-09-15	138	116	200DB	5 0000	16			
TWO HARD DRIVES	2006-11-03	324	265	200DB	5 0000	36			
COMPUTER UPGRADE	2006-12-15	25	20	200DB	5 0000	3			
COPIER	2007-01-11	4,700	3,736	200DB	5 0000	514			
APPLE MAC DESKTOP	2007-08-15	1,554	1,106	200DB	5 0000	179			
CHAT HEADPHONES	2007-08-15	248	176	200DB	5 0000	29			
DESK	2007-09-13	414	233	200DB	7 0000	51			
FILE CABINET	2008-05-01	600	416	200DB	7 0000	53			
DIGITAL CAMERA & MEMORY	2008-05-05	247	188	200DB	5 0000	23			
HP 530 NOTEBOOK	2008-10-15	741	563	200DB	5 0000	71			
INTEL DESKTOP PC & MONITOR	2008-10-30	839	638	200DB	5 0000	80			
IPHONE	2008-11-30	398	354	200DB	3 0000	29			
DELL LAPTOP COMPUTERS(2)	2009-12-01	3,300	1,980	200DB	5 0000	528			
SERVER	2009-07-20	7,284	4,370	200DB	5 0000	1,165			
PROJECTOR	2010-03-17	793	159	200DB	5 0000	253			
OFFICE FURNITURE	2010-01-22	1,330	190	200DB	7 0000	326			
COMPUTER MONITORS (2)	2009-12-12	1,350	810	200DB	5 0000	216			
E4300-DELL COMPUTER	2009-09-02	1,337	802	200DB	5 0000	214			
ROUTER	2009-06-01	905	543	200DB	5 0000	145			

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TY 2010 Gain/Loss from Sale of Other Assets Schedule

Name: KONIAG EDUCATION FOUNDATION

EIN: 92-0145017

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
RAYMOND JAMES		PURCHASE			881,968	780,977			100,991	

TY 2010 Land, Etc. Schedule

Name: KONIAG EDUCATION FOUNDATION

EIN: 92-0145017

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
	43,671	37,169	6,502	

TY 2010 Other Assets Schedule

Name: KONIAG EDUCATION FOUNDATION

EIN: 92-0145017

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ENDOWMENT INVESTMENTS	5,231,976	5,700,925	5,700,925

TY 2010 Other Expenses Schedule

Name: KONIAG EDUCATION FOUNDATION

EIN: 92-0145017

Description	Revenue and Expenses per Books	Net Invest ment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
ADVERTISING AND MARKETING	37,681			53,393
BANK AND PROCESSING FEES	347			347
DEVELOPMENT	22,929			24,264
DIRECTORS FEES AND EXPENSES	4,278			4,278
STUDENT RESOURCES AND BOOKS	8,187			12,937
DUES AND SUBSCRIPTIONS	415			415
EDUCATION	2,962			2,962
EQUIPMENT AND MAINTENANCE	2,407			2,407
INSURANCE	4,252			4,498
OFFICE SUPPLIES	1,950			1,950
STRATEGIC PLANNING	1,980			1,980
POSTAGE	2,701			2,578
RECOGNITION AND AWARDS	145			145
TELEPHONE	7,454			7,336
GRANT WRITING AND EVALUATION	5,725			3,113
COMPUTER SERVICES	21,768			21,768

TY 2010 Other Income Schedule

Name: KONIAG EDUCATION FOUNDATION

EIN: 92-0145017

Description	Revenue And Expenses Per Books	Net Invest ment Income	Adjusted Net Income
WORLD COM CLASS ACTION REC	5,481		5,481

TY 2010 Other Increases Schedule

Name: KONIAG EDUCATION FOUNDATION

EIN: 92-0145017

Description	Amount
UNREALIZED HOLDING GAINS ON INVESTMENTS	416,904

TY 2010 Other Liabilities Schedule

Name: KONIAG EDUCATION FOUNDATION

EIN: 92-0145017

Description	Beginning of Year - Book Value	End of Year - Book Value
EXCISE TAX PAYABLE		344
PAYROLL TAX PAYABLE	4,154	7,790

TY 2010 Other Professional Fees Schedule

Name: KONIAG EDUCATION FOUNDATION

EIN: 92-0145017

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	18,762	18,762		

TY 2010 Taxes Schedule

Name: KONIAG EDUCATION FOUNDATION

EIN: 92-0145017

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAXES	1,802			