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_{Form} **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury

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

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

	nai nevenu		The organization may have to dood a dopy of this retain to do				mspeation
<u>A</u>				1, and ending			, 20 11
B	Check if a	pplicable	C Name of organization Native Arts and Cultures Foundation, Inc.			D Employ	er identification number
\sqcup	Address of	hange	Doing Business As	r			26-1595870
	Name cha	ange	Number and street (or P O box if mail is not delivered to street address)	Room/suite	÷ 1	E Telepho	ne number
	Initial retu	m	1009 Officers Row			360-314-2421	
	Terminate	ed .	City or town, state or country, and ZIP + 4				
	Amended	return	Vancouver, WA 98661			G Gross re	eceipts \$
	Applicatio	n pending	F Name and address of principal officer Tara Lulani Arquette	-	H(a) Is this a	group return	for affiliates? Yes Vo
		, ,	1009 Officers Row, Vancouver, WA 98661		1		ncluded? Yes No
$\overline{}$	Tax-exem	nt status	✓ 501(c)(3)	or 527			list (see instructions)
J	Website:		w nacf us		H(c) Group	exemption	number ▶
K			✓ Corporation Trust Association Other L	Year of formation			of legal domicile DE
_	art l	Summ				1	
			escribe the organization's mission or most significant activities				
		-	edicated exclusively to the revitalization, appreciation, and perp		adigonous ar	te and c	ulturos in all 50 statos
8	-						
ğ	-		grantmaking, convening, and advocacy we provide support to t		anig creativ	ity airior	gst Native peoples
¶ P ြ Activities & Governance			ee Schedule O for further details				
Š	2 (is box ▶☐ if the organization discontinued its operations or	disposed of	more than	1 1	its net assets.
	3 1		of voting members of the governing body (Part VI, line 1a).			3	
<u>∽</u> 8	4		of independent voting members of the governing body (Part			4	7
鞷	5	Total nur	mber of individuals employed ın calendar year 2011 (Part V, I	ine 2a) .		5	7
(कु	6	Total nun	mber of volunteers (estimate if necessary)			6	35
œ.	7a 7	Total unr	elated business revenue from Part VIII, column @ hine / E _	· ·		7a	0
	l d	Net unrel	lated business taxable income from Form 990-T, line 34	,		7b	0
				18	Prior Yea	ır	Current Year
	8 (Contribut	tions and grants (Part VIII, line 1h) . 중 APR . 0 및 2012	RS-OS	1,	239,200	155,710
	9 F		service revenue (Part VIII, line 2g)		0	0	
	10 I		nt income (Part VIII, column (A), lines 3, 4, and 7d) [1]		327,713	598,153	
<u>ب</u> ر	11 (6,650	0			
Ý.	12		venue (Part VIII, column (A), lines 5, 6d, 8c, 9e, 10c, and 11e) enue—add lines 8 through 11 (must equal Part VIII, column (A),	line 12)	1	573,563	753,863
<u> </u>			nd sımılar amounts paid (Part IX, column (A), lines 1–3)	,	=	394,319	530,287
	ł .		paid to or for members (Part IX, column (A), line 4)	· · ·		0	030,207
	1		other compensation, employee benefits (Part IX, column (A), line			390,003	543,111
Expenses	1			= 5-10, -			343,111
ë	i .		onal fundraising fees (Part IX, column (A), line 11e)	· · · ⊢		83,669	<u>_</u>
꿃	1		draising expenses (Part IX, column (D), line 25)	 -		540.005	710.015
_	1	-	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	<i>:</i> · · ⊢		512,625	718,315
	1	•	penses. Add lines 13-17 (must equal Part IX, column (A), line	25)		380,616	1,791,713
	19 F	Revenue	less expenses. Subtract line 18 from line 12			192,947	-1,037,850
Net Assets or Fund Balances				Ве	ginning of Cur		End of Year
Set	20 1	Total ass	ets (Part X, line 16)	<u>L</u>	12,	608,147	11,309,923
¥₽	21 7	Total liab	ulities (Part X, line 26)			87,587	183,328
ž	22 1	Vet asset	ts or fund balances. Subtract line 21 from line 20		12,	520,560	11,126,595
Pa	art II	Signat	ture Block				
			ry, I declare that I have examined this return, including accompanying schedu				ny knowledge and belief, it is
tru	e, correct,	and compl	lete. Declaration of preparer (other than officer) is based on all information of v	which preparer h	as any knowle	dge	
		M	ald token Harry te		<u> </u>	3-29	-12
Sig	gn	Sygn	ature of officer	1 (10	Date	3	
Here		1	ata Julani Hobertte / Prosid	ant CI	(1)		
		Туре	e or print name and title				
<u> </u>		Print/Ty	pe preparer's name Preparer's signature	Date)	[PTIN
Pa						Check L self-emp	_] #
	eparer	1	iama P		E1		<u>' </u>
US	e Only					s EIN ▶	
Ma	v the IR9		nddress ► s this return with the preparer shown above? (see instruction	ne)	Phon	e no	Yes No
_					· · · ·	<u>· · · · </u>	
ror	raperw	ork Redu	ction Act Notice, see the separate instructions.	Cat No	11282Y		Form 990 (2011)

Part	
	Check if Schedule O contains a response to any question in this Part III
1	We are dedicated exclusively to the revitalization, appreciation, and perpetuation of indigenous arts and cultures in all 50 states
	Through grantmaking, convening, and advocacy we provide support to the field, fostering creativity amongst Native peoples
	Please see Schedule O for further details
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 123,495 including grants of \$ 100,000) (Revenue \$ 0)
	NACF Artist Fellowships
	Grantmaking is a basic component of our mission In 2011 we launched our first artist fellowship program for Native artists
	in visual arts, filmmaking, music, dance, and literature to promote further development of their talents. The Artist Fellowships
	honor Native artists that have made a significant impact in their discipline, are respected by their colleagues and in the
	greater arts field, and who are emerging as powerful voices in the arts
	Supporting those voices is our goal for the fellowships, which provide the artists with the opportunity for study, reflection,
	experimentation, and discovery
	······································
4b	(Code:) (Expenses \$ 135,344 including grants of \$ 110,000) (Revenue \$ 0)
	Artist Networks and Convenings Initiative
	As part of our continuing effort to nurture the activities of artistic communities, we support projects that foster beneficial
	alliances between artists. In 2011 particular consideration was given to organizations presenting arts conferences, convening groups
	of artists, or supporting master artist to artist residencies in the development of connections between artists from different regions,
	across disciplines, or who share in the same practices. Of critical importance to the projects awarded in 2011 was the development
	of artistic and cultural practice and the opportunity for artists and culture bearers to network and collaborate. In those settings, artists and culture bearers will focus on best practices, professional development, change in their fields, their relationship to local,
	national and global communities, and the exchange of knowledge and technical skills
	The control of the group of the trib on the trib on the control of
	We expect the outcomes of those opportunities will provide increased communication in the field, deepen the connection between
	artists, and most importantly, establish a foundation for continued collaboration, exchange, and relationship building
4c	(Code:) (Expenses \$ 123,495 including grants of \$ 100,000) (Revenue \$ 0)
	Artist and Community Collaboration Initiative
	As part of our strategy to foster artistic activities in Native communities, in 2011 we invited Native artists to partner with tribal entities
	and nonprofit organizations to collaborate on artworks that integrated the community into artistic practice. Artists and organizations
	were encouraged to plan projects in which the creation of an artwork was central to the project and in which the artist functioned primarily as an agent for community development
	primarily as an agent for community development
	We expect that the artist's work will serve as an interface for community participation, engaging the community in the artist's work,
	and use the making of art to help strengthen the community, draw attention to an important issue, and engage community members
	in new ways
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 876,526 including grants of \$ 220,287) (Revenue \$ 0)
4e	Total program service expenses ▶ 1,263,860

Part I	V Checklist of Required Schedules		_	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	_		
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	1	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
-	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	1		
	"Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			Ė
	complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	<u> </u>		
-	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	✓	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			,
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	/	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		,	
	Schedule D, Parts XI, XII, and XIII	12a	*	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			1
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	<u> </u>	/
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	L	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	1		
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			١.
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		/
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		 √
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	I

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	1
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	056		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	25b 26		▼
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			3.8
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	35b 36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	

om 99	90 (2011)		ı	Page 3
Part				
	Check if Schedule O contains a response to any question in this Part V			
4.	Saturation would be provided as David of Samura 1000. Satura O. Academic Satura		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
·	reportable gaming (gambling) winnings to prize winners?	1c	/	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	V	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 7			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		Ė	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			,
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country:			
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	<u> </u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	_	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b	ļ	✓
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c		<u> </u>
Vu	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<u> </u>		-
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			,
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			_
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		1
f	If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		V
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] Section 501(c)(12) organizations. Enter:			
''	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			L
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
Ь	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_				
C 140	Enter the amount of reserves on hand	4.4-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	_₹

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response to any question in this Part VI			
Secti	on A. Governing Body and Management		,	
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	4		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar	1		
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	4		
_	any other officer, director, trustee, or key employee?	2	<u> </u>	1
3	Did the organization delegate control over management duties customarily performed by or under the direct		-	
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			-
	one or more members of the governing body?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			1
_	stockholders, or persons other than the governing body?	7b	<u> </u>	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	• •	_		
a	The governing body?	8a	V	-
9	Each committee with authority to act on behalf of the governing body?	8b	/	<u> </u>
Ŭ	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve		ode.)
		7.00	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	Ļ
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		_	
40	describe in Schedule O how this was done	12c	✓	<u> </u>
13 14	Did the organization have a written whistleblower policy?	13	1	
15	Did the process for determining compensation of the following persons include a review and approval by	14	-	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	15b	'	1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			†
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		ļ	
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► AK CA CO FL HI MN NC NM NY OI Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization for make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires and 0104 requires and 010			
10	available for public inspection. Indicate how you made these available. Check all that apply.	ın 501((၁)(၁)၅	only)
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict	of inte	rest r	nolicy
	and financial statements available to the public during the tax year.	J. 1111G		zonoy,
20	State the name, physical address, and telephone number of the person who possesses the books and record	s of the	•	
	organization: ► Rupert Ayton, Finance Director, 1009 Officers Row, Vancouver, WA 98661 360-314-2421			

	000	100441	
-omn	990	(2011)	

Page 7

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization no	r any relate	d orga	anız	atio	n c	ompe	nsa	ited any currer	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	box,	unles	Pos neck ss pe	rson	e than of is both or/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Marshall McKay						8				
Board Chair	2	✓		✓				0	0	0
(2) Elizabeth Woody							ŀ			
Board Secretary	2	✓		✓	L.		<u> </u>	0	0	0
(3) Joy Harjo										
Board Treasurer	2	✓		✓	<u> </u>			0	0	. 0
(4) Barron Tenny						1				
Board Member	2	✓						0	0	0
(5) Susan Jenkins										
Board Member	2	✓						0	0	0
(6) W Richard West, Jr										
Board Member	2	✓						0	0	0
(7) Sven Haakanson										
Board Member	2	✓					L	0	0	0
(8) Tara Lulanı Arquette						,		_		
President & CEO	40			✓				147,917	0	5,863
(9)	-									
(10)										
(11)	_					_				
(12)	-									
(13)	-									
(14)										

(45)		(describe hours for	ודהו	=			or/trust	<u> </u>	compensation from	compensation fro related	ole Estim n from amou oth		(F) stimated mount of other npensation	
(4.5)		related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fro orga and	ensation the nization related in its attention in its att	n L
(15)														_
(16)												_		
(17)							_						<u>-</u>	
(18)		1												
(19)														
(20)								<u> </u>						
(21)														
(22)				-+							+		_	
(23)											+			
(24)											+		· <u>-</u>	
(25)														
1b	Sub-total . Total from continuation sheets to Part			Ll :				>	147,917		0			5,863
<u>d</u>	Total (add lines 1b and 1c)							<u> </u>	147,917		0			5,863
	Total number of individuals (including but reportable compensation from the organi		l to th	ose	iist	ed a	above	e) w	ho received mo	ore than \$100,	000 o	f		
3	Did the organization list any former of	icer, dırec	tor, o	r tru	uste	e,	key e	emp	loyee, or high	est compensa	ited		Yes	No
	employee on line 1a? If "Yes," complete S For any individual listed on line 1a, is the									onestion from	the	3	-	1
	organization and related organizations	greater tha	an \$1	50,0		•			•			i		
5	<i>Individual</i>	r accrue co		nsati						ation or individ	dual	4	√	
	for services rendered to the organization? n B. Independent Contractors	of "Yes," c	ompl	ete S	Sch	edu	ile J f	or s	such person		·	5		✓
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	ress							(B) Description of se	ervices	Co	(C) mpens	ation	
No ven	dors received more than \$100,000 in 2011										_			
											_			

Part	VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ıts ts	1a	Federated campaigns	1a 0				
ira Dun	b	Membership dues	1b 0				
ο, Ĕ	С	Fundraising events	1c 0				
ar /	d	Related organizations	1d 0				
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contributions)	1e 0				
io Si	f	All other contributions, gifts, grants,					
the st		and similar amounts not included above	1f 155,710				
Ēδ	g	Noncash contributions included in lines 1a-	1f \$ 14,168				
a a G	h	Total. Add lines 1a-1f		155,710			
- P			Business Code				
Program Service Revenue	2a		-	0	0	0	0
æ	b			0	0	0	0
<u>8</u>	С		•••	0	0	0	0
ēΓ	d			0	0	0	0
E	е			0	0	0	0
g	f	All other program service revenue		0	0	0	0
P	g	Total. Add lines 2a-2f		0		-	
	3	Investment income (including of	dıvıdends, interest,				
		and other similar amounts)	<i>.</i> > [412,333	0	0	412,333
	4	Income from investment of tax-exem	npt bond proceeds ►	0	0	0	0
	5	Royalties	▶	0	0	0	0
		(ı) Real	(II) Personal	•			
	6a	Gross rents	0 0				
	b	Less: rental expenses	0 0				
	С	Rental income or (loss)	0 0				
	d	Net rental income or (loss)		0	0	0	0
	7a	Gross amount from sales of (i) Securities	es (ii) Other				
		assets other than inventory 4,892	2,258 0				
	b	Less: cost or other basis					}
		and sales expenses . 4,706	· .				
	С	Gain or (loss) 185	5,820 0				
	d	Net gain or (loss)	. <u> </u>	185,820	0	0	185,820
Other Revenue	8a	Gross income from fundraising events (not including \$	[_				
₹	b	Less: direct expenses					
	С	Net income or (loss) from fundral		0		0	0
	9a	Gross income from gaming activiti					
		See Part IV, line 19	a 0				
	b	Less: direct expenses					
	C	Net income or (loss) from gaming		0	0	0	0
	10a	Gross sales of inventory, le returns and allowances					
			·	İ			
	þ	Less: cost of goods sold	-				
	С	Net income or (loss) from sales o	f inventory > Business Code	0	0	0	0
	4.0 -	IVIISCEIMITEOUS REVENUE	business Code				
	11a			0	0	0	0
	b			0	0		0
	C	All other revenue		0	0	0	0
	d	All other revenue		0	U	0	0
	е 12	Total revenue. See instructions.	1	753,863	0	0	753,863
	1 -	i otal referiaci occ monuclions.	🚩 1	/33,003	U	U	100,003

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a respons	se to any question	in this Part IX		
Do no	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	•		gonoral expenses	OAPOI ISOS
	organizations in the United States See Part IV, line 21	443,837	443,837		
2	Grants and other assistance to individuals in	•			
	the United States. See Part IV, line 22	86,450	86,450		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	147,917	81,354	51,771	14,792
6	Compensation not included above, to disqualified	117,017	01,004	31,771	14,732
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	اه	0	o	0
7	Other salaries and wages	335,950	247,238	70,925	17,787
8	Pension plan accruals and contributions (include	333,333	,	7.5,020	
_	section 401(k) and 403(b) employer contributions)	o	o	o	0
9	Other employee benefits	24,792	19434	3,525	1,833
10	Payroll taxes	34,452	23,724	8,494	2,234
11	Fees for services (non-employees):			-,	
а	Management	33,960	o	33,960	0
b	Legal	0	0	0	0
С	Accounting	42,595	0	42,595	0
d	Lobbying	0	0	0	0
е	Professional fundraising services See Part IV, line 17	0			0
f	Investment management fees	54,656	0	54,656	0
g	Other	244,518	151,280	45,053	48,185
12	Advertising and promotion	22,868	19,045	0	3,823
13	Office expenses	66,356	35,688	13,087	17,581
14	Information technology [6,580	4,157	273	2,150
15	Royalties	0	0	0	0
16	Occupancy	36,400	26,000	8,179	2,221
17	Travel	192,170	116,186	73,047	2,937
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	5,631	4,517	1,115	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	4,521	3,229	1,016	276
23	Insurance	2,406	0	2,406	0
24	Other expenses Itemize expenses not covered			-	
	above (List miscellaneous expenses in line 24e If			1	
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Rank Charges	621	0	621	
b	Licenses and Permits	2,623	0	0	2,623
c	Workers Compensation Insurance	1,948	1,391	438	119
ď	Unemployment Insurance	462	330	104	28
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,791,713	1,263,860	411,265	116,588
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	.,, 5 .,, 1 5	1,233,330	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7.10,000
	fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)	0	0	0	0 Form 990 (2011)

Balance Sheet Part X (A) (B) Beginning of year End of year 1 191 1 Cash - non-interest-bearing 2 535,981 2 551587 1,153,000 533.000 3 3 4 4 0 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 0 5 0 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 0 6 0 7 0 7 0 0 0 8 8 9 Prepaid expenses and deferred charges 14,147 9 22,742 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 8,391 15,366 **10c** 16,460 b 10,185,944 Investments—publicly traded securities 10,889,653 11 11 12 Investments—other securities, See Part IV, line 11 12 0 0 13 Investments—program-related. See Part IV, line 11 0 13 0 14 0 14 0 15 0 15 0 11,890,021 11,309,923 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 27,155 17 11,636 18 60,432 18 171,154 19 0 19 538 20 0 20 0 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 0 Pavables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified persons. 0 22 0 23 Secured mortgages and notes payable to unrelated third parties . . . 0 23 0 0 24 Unsecured notes and loans payable to unrelated third parties . . . 24 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 0 0 25 26 Total liabilities. Add lines 17 through 25 87,587 26 183,328 Organizations that follow SFAS 117, check here ▶ ☐ and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 1,446,869 27 1,335,159 2,073,691 791,436 28 28 29 9,000,000 29 9,000,000 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 0 30 Capital stock or trust principal, or current funds 0 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 0 31 0 32 Retained earnings, endowment, accumulated income, or other funds. 32 0 ol 33 33 12,520,560 11,126,595 34 Total liabilities and net assets/fund balances 12,608,147 34 11,309,923

Form 9	0 (2011)		P	age 12	
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	_. .		. 🗸	
1	Total revenue (must equal Part VIII, column (A), line 12)		75	3,863	
2	Total expenses (must equal Part IX, column (A), line 25)		1,79	91,713	
3	Reverlue less'expenses. Subtract line 2 from line 1		-1,03	37,850	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))					
5	Other changes in net assets or fund balances (explain in Schedule O)		-35	6,115	
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	_			
	column (B))		11,12	26,595	
Part	XII Financial Statements and Reporting			_	
	Check if Schedule O contains a response to any question in this Part XII			. 🗸	
			Yes	No	
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓	
b	Were the organization's financial statements audited by an independent accountant?	2b	1		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	1		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:				
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	За		1	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b			
	, , , , , , , , , , , , , , , , , , ,		n 99 0	(2011)	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

OMB No 1545-0047

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

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

Open to Public Inspection

Name of the organization Employer identification number Native Arts and Cultures Foundation, Inc. 26-1595870 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II c Type III-Functionally integrated e By checking this box. I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No 11g(i) 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(ni) Provide the following information about the supported organization(s). (i) Name of supported (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of in col (i) listed in your organization (described on lines 1-9 the organization in organization in col support governing document? col (i) of your above or IRC section (i) organized in the support? US2 (see instructions)) Yes Yes No Yes No (A) (B) (C) (D) (E)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	on A. Public Support			, ·			
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grant's, contributions, and membership fees received. (Do not include any "unusual grants.")		500	102,275	1,239,200	155,710	1,497,865
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				_		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		500	102,275	1,239,200	155,710	1,497,865
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,195,164
6	Public support. Subtract line 5 from line 4.						302,521
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4		500	102,275	1,239,200	155,710	1,497,685
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		49,553	124,483	313,842	412,333	900,216
9	Net income from unrelated business activities, whether or not the business is regularly carried on	I					
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)			ļ	6,650		6,650
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the organization, check this box and stop her	ne organization	•	d, third, fourth	, or fifth tax ye		
Secti	on C. Computation of Public Suppor					·	
14	Public support percentage for 2011 (line 6			1. column (fl)		14	%
15	Public support percentage from 2010 Sch					15	%
16a	331/3% support test - 2011. If the organiz					/3% or more, cl	
	box and stop here. The organization qual	lifies as a publ	licly supported	organization			. ▶ 🗀
b	331/3% support test—2010. If the organ check this box and stop here. The organi					15 is 33 ¹ / ₃ %	or more,
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "factoring organization".	ets the "facts-	and-circumstai	nces" test, che	ck this box an	nd stop here. E	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m supported organization	tion meets the eets the "facts	facts-and-ci	rcumstances" ances" test. T	test, check th	nis box and ste	, and line op here .
18	Private foundation. If the organization did instructions	d not check a	box on line 13,	16a, 16b, 17a	, or 17b, chec	k this box and	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

• •	_	, , , ,
(Complete only if	you checked the box	on line 9 of Part I or if the organization failed to qualify under Part II
If the organization	n fails to qualify under	the tests listed below, please complete Part II)

Secti	on A. Public Support		-			,	
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants.")			1			
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose				<u> </u>		
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3			1			
	received from disqualified persons .					,	
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	•						
С 8	Add lines 7a and 7b						
Ū	line 6.)						
Secti	on B. Total Support	L	1	I	l		
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(, , ,	(1,	()	1 -7	(7)
10a	Gross income from interest, dividends,	-			· -		
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						<u>.</u>
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	L organization	n'e firet, eacon	d third fourth	or fifth tay y	ar ac a costo	501(c)(3)
17	organization, check this box and stop he	_			-		
Secti	on C. Computation of Public Suppor			· · · · · ·	<u> </u>		<u> </u>
15	Public support percentage for 2011 (line			3. column (fl)		15	%
16	Public support percentage from 2010 Scl	,	•				
	on D. Computation of Investment In					<u> </u>	
17	Investment income percentage for 2011 (line 10c, colur	nn (f) divided b	y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2010						%
19a	331/3% support tests-2011. If the organ						
	17 is not more than 331/3%, check this box	and stop here	. The organizati	on qualifies as	a publicly supp	orted organizati	on . ▶ 🗌
b	331/3% support tests - 2010. If the organize				•		•
	line 18 is not more than 331/3%, check this		_				_
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions 🕨 🔲

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Schedule A	, list of unusual grants received
Start up Gra	ant Date
12/31/2008	Amount \$6,500,000
Start up Gr	ant Date
12/31/2008	Amount \$1,000,000
Start up Gra	ant Date
12/31/2009	Amount \$4,500,000
	·····
	·

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number

Native Arts and Cultures Foundation, Inc. 26-1595870 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . . 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and 9 balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X .

Part	Organizations Maintaining	Collections of A	Art, Historical	Treasures,	, or Ot	her Similar As:	sets (cc	ontinu	ued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	ner records, che	eck any of the	e follov	ving that are a si	gnificant	t use	of its
а	☐ Public exhibition		d 🗍 Loa	n or exchang	ie progi	rams			
b	☐ Scholarly research			_					
c	Préservation for future generations		0 🗀 🖽						
4	Provide a description of the organizat		nd evoluin how	they further	the ora	anization's ever	nt nurn	oco ir	Dart
4	XIV.	ion's collections a	ind explain now	mey lurther	trie org	janization's exem	pt purp	ose ir	ı Parı
5	During the year, did the organization	solicit or receive	donations of art	, historical tr	easure	s, or other simila	r		
	assets to be sold to raise funds rather							es 🗆	l No
Pari	IV Escrow and Custodial Arra								
ı Çı	line 9, or reported an amoun			gamzanom	a. 10 ** 0.	100 1010	iiii 000,	, i ui i	
40	Is the organization an agent, trustee,			for contribut	iono or	other esecte no			
1a								_	
	included on Form 990, Part X?						☐ Ye	es L	No
b	If "Yes," explain the arrangement in Pa	art XIV and comple	ete the following	table:				_	
						Ar	nount		
С	Beginning balance				1c				
d	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance				1f				
2a	Did the organization include an amour						☐ Ye		No
	If "Yes," explain the arrangement in Pa		ut A, iiile Z I: .		• • •		··	-3 <u></u>	, 140
Par			ation anailiara	d "Voo" to F	O	OO Dort IV line	10		
Par	Endowment Funds. Comple			(c) Two year		(d) Three years back			h a al.
		(a) Current year	(b) Prior year	+ ' ' '		(d) Three years back	(e) Four	years	Dack
1a	Beginning of year balance	10,570,969	10,500,00	_ _	000,000		ļ		
b	Contributions			4,5	00,000	6,000,000	<u> </u>		
С	Net investment earnings, gains, and								
	losses	239,592	797,35	4					
d	Grants or scholarships	463,920	425,57	7					
е	Other expenditures for facilities and						1		
	programs	54,656	300,80	R					
f	Administrative expenses	3 1,7555	300,00			-		-	
	End of year balance	10,291,985	10,570,96	10.5	00,000	6,000,000	<u> </u>		
g							<u> L. </u>		
2	Provide the estimated percentage of the			g, column (a)) neid a	1 S:			
a	Board designated or quasi-endowmen		_%						
b		45_%							
C	Temporarily restricted endowment ▶								
	The percentages in lines 2a, 2b, and 2								
3a	Are there endowment funds not in the	possession of the	e organızatıon tl	nat are held a	and adı	ministered for the	•		
	organization by:							Yes	No
	(i) unrelated organizations					<i>.</i>	3a(i)		1
	(ii) related organizations						3a(ii)		1
b	If "Yes" to 3a(II), are the related organized						3b		
4	Describe in Part XIV the intended uses								
Part									
ı Çılı	Description of property	(a) Cost or oth		or other basis	(a) (Accumulated	(d) Boo	k volus	
	Description of property	(investme	, ,	(other)		epreciation	(0) 500	n value	,
	Land	, , , , , , , , , , , , , , , , , , , ,	 			·		-	
1a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment			25,391		8,391	·	1:	5,366
е	Other								
	Add lines 1a through 1e. (Column (d) m	wat assed Farms OC	O Dort V solver	- /D) / 10	V=1.1				5.366

Part VII	Investments - Other Securities	See Form 990, Part X,	line 12.	
(а) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year m	
(1) Financial	derivatives			
(2) Closely-h	neld equity interests	_		
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(1)	11			
	b) must equal Form 990, Part X, col. (B) line 12.)	Coo Forms 000 Don't V	lma 10	
Part VIII	Investments – Program Related			<u> </u>
	(a) Description of investment type	(b) Book value	(c) Method of vali Cost or end-of-year m	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	b) must equal Form 990, Part X, col. (B) line 13)			
Part IX	Other Assets. See Form 990, Pa	rt Y line 15		
raitix) Description		(b) Book value
(1)		,	· -	(-,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)	-			
(9)				
(10)				
	mn (b) must equal Form 990, Part X, co		<u> </u>	
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Book value		
	income taxes			
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)			1	
(9)			1	
(10)			1	
(11)				
	b) must equal Form 990, Part X, col. (B) line 25)		1	
	SC 740) Footnote. In Part XIV, provide	the text of the footnote to	the organization's financial statem	ents that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents	<u> </u>
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	753,863
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,791,713
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-1,037850
4	Net unrealized gains (losses) on investments	4	-356,115
5	Donated services and use of facilities	5	. <u>-</u>
6	Investment expenses	6	<u> </u>
7	Prior period adjustments	7_	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	-356,116
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-1,393,965
Part		T	
1	Total revenue, gains, and other support per audited financial statements	1	343,092
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	<u>5 </u>	
b	Donated services and use of facilities	4	
C	Recoveries of prior year grants	_	
d	Other (Describe in Part XIV.)	6	_
e	Add lines 2a through 2d	26	
3	Subtract line 2e from line 1	3	753,863
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	4	
b	Other (Describe in Part XIV.)	_	_
_C	Add lines 4a and 4b	40	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part			
1	Total expenses and losses per audited financial statements	1	1,737,057
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	٦	
b	Prior year adjustments	,,	
c	Other losses	- `	
d	Other (Describe in Part XIV.)	_	54.050
e	Add lines 2a through 2d	3	
3	Subtract line 2e from line 1	-3	1,791,713
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIV.)	\dashv	
b		-	-
_C	Add lines 4a and 4b	40	
Part		j 3	1,791,713
Comp Part V any ac	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; I, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also conditional information. I, Line 4 We maintain endowment funds to support Native arts and cultures initiatives		
adjusi	the year 2007		
Parts	XII line 2d and XIII line2d For GAAP reporting we net investment management fees against investment in	come	3

Schedule D (For	m 990) 2011	Page :
Part XIV	Supplemental Information (continued)	
	·	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Native Arts and Cultures Foundation, Inc

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Employer identification number

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations f Solicitation of government grants Phone solicitations g Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☑ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) fundraiser listed in custody or control of contributions? (or retained by) organization (ii) Activity from activity or entity (fundraiser) col (i) Yes No 1 2 6 10 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AK, CA, CO, DE, FL, HI, MN, NM, NY, OK, OR, WA, UT

		gross receipts greater tha	III BO.UUU.			
		g. 000 100 pto grado. W.	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
		•	(event type)	(event type)	(total number)	col (c))
nue		_	-			
Revenue	1 2	Gross receipts Less: Charitable				_
_	-	contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
t Exp	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses .				
	10 11	Direct expense summary Ac Net income summary. Comb				()
Pa	rt III					reported more
	r	than \$15,000 on Form 9	90-EZ, line 6a.			
					***	T
/enne			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1		(a) Bingo	1 ''	(c) Other gaming	
		Gross revenue	(a) Bingo	1 ''	(c) Other gaming	
	1 2	Gross revenue	(a) Bingo	1 ''	(c) Other gaming	
			(a) Bingo	1 ''	(c) Other gaming	
Direct Expenses Revenue	2	Cash prizes	(a) Bingo	1 ''	(c) Other gaming	
	2	Cash prizes		bingo/progressive bingo		
	2 3 4	Cash prizes Noncash prizes Rent/facility costs	(a) Bingo Yes% No	bingo/progressive bingo	(c) Other gaming Yes % No	
	2 3 4 5	Cash prizes	☐ Yes%	bingo/progressive bingo Yes% No	☐ Yes%	
	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses . Volunteer labor	Yes % No	bingo/progressive bingo Yes% No column (d)	☐ Yes% ☐ No	
Direct Expenses	2 3 4 5 6 7 8	Cash prizes	Yes % No dd lines 2 through 5 in course.	bingo/progressive bingo Yes% No column (d)	☐ Yes% ☐ No	
Direct Expenses	2 3 4 5 6 7 8	Cash prizes	Yes % No dd lines 2 through 5 in control y. Combine line 1, columns ganization operates gaperate gaming activities	bingo/progressive bingo Yes % No column (d) ming activities: s in each of these states	☐ Yes%	col (a) through col (e))
Direct Expenses	2 3 4 5 6 7 8	Cash prizes	Yes % No dd lines 2 through 5 in control y. Combine line 1, columns ganization operates gaperate gaming activities	bingo/progressive bingo Yes% No column (d) mn d, and line 7	☐ Yes%	col (a) through col (e))
Direct Expenses	2 3 4 5 6 7 8 Er a Is b If	Cash prizes	Yes% No Id lines 2 through 5 in course ganization operates gaperate gaming activities gaming licenses revoked	bingo/progressive bingo Yes% No column (d) mn d, and line 7 aming activities: s in each of these states	Yes% No	() Yes No

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more

ocnedu	ile G (FOITH 950 OF 550-EZ) 2011		۲	age 🔾
11 12	Does the organization operate gaming activities with nonmembers?	ty	res □ res □	
13	Indicate the percentage of gaming activity operated in:	1		
а	The organization's facility	a		%
b	An outside facility			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books ar records:		-	
	Name ►			
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gamin revenue?		∕es 🔲	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
	Name ▶			
	Address ▶			
16	Gaming manager information:			
	Name ▶			·
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds retain the state gaming license?		∕es □	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations spent in the organization's own exempt activities during the tax year > \$	or		
Part	Supplemental Information. Complete this part to provide the explanations required by Part columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also part to provide any additional information (see instructions).			

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Vame of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No 1545-0047

Open to Publi Inspection

Employer identification number

Vetworks and Convening Networks and Convening Networks and Convening Networks and Convening Networks and Convening **%** □ Regional Collaboration Artist and Community (h) Purpose of grant or assistance Artist and Community to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. √Yes 26-1595870 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes' Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) . Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 10,000 15,000 10,000 14,000 15,000 10,000 40,000 14,000 14,000 10,000 10,000 10,000 (d) Amount of cash grant Part II can be duplicated if additional space is needed (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance (p) EIN Native Arts and Cultures Foundation, Inc 2522 Kwina Road Bellingham, WA 9 (12) Univ Georgia Inst Native Americ (3) California Indian Museum and C P O Box 2977 Rapid City, SD 57709 (4) Confederated Tribes Chehalis R 145 Tremont Street, 7th Floor Bosto (11) Tomaquag Indian Memorial Mus 390 A Summit Road Exeter, RI 0282 P O Box 22304 Honolulu, HI 96823 (8) NE Foundation for the Arts 5811 Jacks Spring Road Atmore, AL (2) Assn Tribal Archives, Libraries, 6308 Harden Drive Oklahoma, OK 1 (a) Name and address of organization (7) Hula Preservation Society P O Box 6274 Kaneohe, HI 96744 (10) Poarch Band of Creek Indians (1) Alaska Native Heritage Center P O Box 536 Oakville, WA 98568 5250 Aero Drive Santa Rosa, CA Peabody Hall Athens, GA 30602 (6) Hawaii Youth Opera Chorus 8800 Heritage Ctr Dr Anchorage (9) Northwest Indian College or government (5) First Peoples Fund Part I Part II

Enter total number of other organizations listed in the line 1 table

12

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Native Arts and Cultures Foundation, Inc

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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OMB No 1545-0047

Open to Public Inspection

Employer identification number

26-1595870

12 Networks and Convening Networks and Convening Networks and Convening ° | Artist and Community C Artist and Community C Artist and Community C Artist and Community C Regional Collaboration Regional Collaboration Regional Collaboration Regional Collaboration (h) Purpose of grant or assistance to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 √Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" Fellowship Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 14,000 10,000 40,000 20,000 40,000 10,000 40,000 40,000 10,000 10,000 12,000 12,000 (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table Part II can be duplicated if additional space is needed (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance (b) EIN P O Box 786 602 Peace Pipe Road F (4) Sundance Institute 8530 Willshire Blvd, 3rd Floor Beverl (6) Alaska Native Arts Foundation 500 W 6th Avenue Anchorage, AK 9 (7) Longhouse Education and Cultu 2700 Evergreen Parkway NW Olympi (8) American Indian Center, Inc 1630 W Wilson Ave Chicago, IL 606 P O Box 235012 Honolulu, HI 96823 15358 Cerro Gordo Santa Fe, NM 87 (1) Northwoods Nigii Enterprise Co (2) Center for Multi-Cultural Cooper P O Box 61218 Honolulu, HI 96839 1 (a) Name and address of organization 1331 Garden Highway Sacramento, P O Box 549 Kamuela, HI 96743 P O Box 4569 Arcata, CA 95518 (9) Kahilu Theatre Foundation 541 Keku Road, Kae, AK 99830 (10) Organized Village of Kake (12) Seventh Generation Fund (5) Dancing Earth Creations (11) Kuleana 'Oıwı Press or government (3) Pa'ı Foundation Part Part II

Schedule I (Form 990) (2011)

No 50055P

Cat

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

Schedule I (Fo	Schedule I (Form 990) (2011)					Page 2
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	ividuals in the Uspace is needed	Jnited States. Com 1.	plete if the organiza	ation answered "Yes" to	Form 990, Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Fellowships	ships	4	\$80,000	0\$	\$0 n/a	n/a
2 Travel	2 Travel Scholarships	21	\$6,450	\$0	\$0 n/a	n/a
က						
4						
ß						
9						
7						
Part IV 2011 Grant	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 2011 Grants and Fellowships were awarded based upon a process of nomination, application, application review, and expert panel discussion and scoring followed by a staff	e this part to pro a process of nomin	wide the information	n required in Part I, ation, application revie	provide the information required in Part I, line 2, and any other additional information. mination, application invitation, application review, and expert panel discussion and scoring followe	ditional information. on and scoring followed by a staff
recommen	recommendation to the board Documentation from the entire process is maintained in hard copy and digital form where possible	entire process is ma	aintained in hard copy	and digital form where		All awards are funded 90% at the time of the award, and
10% upon	10% upon the receipt of a final use of funds report from the awardee	he awardee				

Schedule I (Form 990) (2011)

SCHEDULE J (Form 990)

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Native Arts and Cultures Foundation, Inc

Employer identification number

26-1595870

Part	Questions Regarding Compensation				
			Yes	No	
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.				
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			ĺ	
	☐ Travel for companions ☐ Payments for business use of personal residence				
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees				
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)				
b	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment				
-	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to				
	explain				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,	1b			
_	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2			
			\vdash		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III				
	☐ Compensation committee ☐ Written employment contract				
	☐ Independent compensation consultant ☐ Compensation survey or study				
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee				
4	organization or a related organization:				
а	Receive a severance payment or change-of-control payment?	4a 4b		1	
b					
С					
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.				
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:				
а	The organization?	5a		1	
a b	Any related organization?	5b		1	
	If "Yes" to line 5a or 5b, describe in Part III.	35		<u> </u>	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any				
J	compensation contingent on the net earnings of:				
а	The organization?	6a	l	1	
b	Any related organization?	6b		7	
	If "Yes" to line 6a or 6b, describe in Part III.			<u> </u>	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed		ļ		
•	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		1	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject		 	<u> </u>	
•	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe				
	in Part III	8	'	1	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		 	 	
•	Regulations section 53 4958-6(c)?		l		

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)⊢(iii) for each listed individual must equal the total amount of Form 990. Part VII. Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Note: The sum of countils (b)()-(iii) for each instea individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts-for that individual	ם פקר	an iisted individual mu	ist equal the total ame	ount of Form 990, Pa	rt vii, Section A, Illie	а, аррисаріе соічіт	n (U) and (E) amount	s-tor that individual.
		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Bettrement and	(D) Montavable	sominos jo leto L (3)	
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(E) (D(H)-(D)	(F) Compensation geported as deferred in prior Form 990
Tara Lulanı Arquette	9	147,917	0	0	0	5,863	153,780	0
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Schedule J (Form 990) 2011

•	Page 3	•

Schedule J (Form 990) 2011

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Schedule J (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

Internal Revenue Service	► Attach to Form 990 or 990-EZ.	Inspection
Name of the organization	· · · · · · · · · · · · · · · · · · ·	Employer identification number
Native Arts and Cultur	es Foundation, Inc	26-1595870
Form 990 Part III Line		
Our goal is to create a	permanently endowed fund to revitalize, strengthen, and promote the arts and o	cultures of the Native peoples
residing in America to	ensure cultural continuity for Native peoples and support for present and future	e generations of Native artists through
grants to individual Na	tive artists and to organizations that serve Native artists and provide Native art	s and cultural activities, by
establishing a nationa	infrastructure to strengthen connections among local and regional Native arts	and cultural efforts and create
partnerships with other	r philanthropic institutions to leverage resources for Native arts and cultures, b	y encouraging financial support and
other forms of support	of Native arts and cultures by Native leaders, communities, foundations, gover	nment entities, and others, by
supporting tribal and o	ther Native communities in their preservation and education efforts related to t	heir arts, cultures, and identities, and

Form 990, Part VI, Section B, Line 11 The form is prepared internally and reviewed with our finance committee of the board of directors The form is then distributed to the full board prior to filing

Form 990, Part VI, Section B, Line 12c Each director, officer, and staff member must annually sign a statement that affirms that such person has (a) received a copy of our conflict of interest policy, (b) has read and understands this policy, and (c) has agreed to comply with our policy Compliance includes the following provisions

Whenever any director, officer, or staff member becomes aware that we are considering a transaction that potentially creates a conflict of

interest, that person is obligated to notify the board and to disclose all material facts relating to the person's interest in the transaction The board will determine whether an actual conflict of interest exists and take action that the board deems appropriate. The interested person may not be present when the board makes its determination other than to answer questions. If no conflict of interest is found to exist, the minutes of the meeting must record the basis of the board's determination

If the board determines that a transaction would create a conflict of interest the transaction must be approved in advance by only those board members who do not have a conflict with respect to the transaction. Any interested person therefore must excuse themselves from consideration of the transaction Such person may not vote on the transaction or be present during any discussion of the transaction other

than to answer questions. Interested persons may be counted for the purpose of determining existence of a quorum

educate the American public regarding Native arts and cultures

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

▶ Attach to Form 990 or 990-EZ.

Native Arts and Cultures Foundation, inc	26-1595870			
Form 990 Part III Line 4d				
Code Expenses \$241,990 including Grants \$200,000 and Revenues \$0				
Regional Collaboration Pilot Program				
Support for the field is of vital importance to the sustainability of Native arts and cultures practices across the board and has become the				
the most significant of our strategies to develop meaningful assets amongst a strong cohort of regional partners. In 2011 our strategy was to				
increase our investment and deepen our involvement with partner organizations in developing the capacity of their operations and the				
quality of their respective programs				
We expect that the initiative will bring organizational leadership together to build synergies on a nation	nal stage, sharing best practices, and			
developing programming and advocacy strategies that best serve the field				
Code Expenses \$111,951 including Grants \$0 and Revenues \$0				
National Convening of Native Arts and Cultures Field				
Convening the Native arts and cultures field is core to our mission We gathered one hundred representatives of Native artist service				
organizations, cultural centers, museums, Native artists, musicians, writers, and educators from 25 states on November 4th and 5th in				
Portland, Oregon, for "Strengthening the Bones," our first convening of the Native arts and cultures field The participants at this historic				
gathering represented the four directions and four corners of our diverse Native arts and cultures field	The convening had four primary			
objectives to map and share individual strengths and priorities, to identify collective connections and	energy, to identify strategies and			
action steps for supporting Native arts coalitions, and identify strategies and action steps for Native ar	ts advocacy efforts The two-day			
event included performances by Native artists, panel discussions, breakout sessions, and unique netw	vorking opportunities for attendees			
Code Expenses \$522,585 including Grants \$20,287 and Revenues \$0				
Advocacy for the Field				
Advocacy for the field of Native Arts and Cultures throughout all fifty states through general support a	nd representation is a significant part			
of our mission Beyond our website and our publications, we achieved our objective in 2011 through attending field-specific conferences				
hosted by affiliate organizations such as Grant Makers in the Arts and Native Americans in Philanthrop	by, collaborative meetings with			

Schedule O (Form 990 or 990-EZ) (2011) Jame of the organization	Page Employer identification number
Native Arts and CutlersFoundation, Inc	26-1595870
stakeholders such as the Longhouse Education and Cultural Center and th	he National Museum of the American Indian, attending stakeholde
events such as the Ke'Kukuı 3 Days of Aloha Festival and the Native Forui	
Dine be'iina, Inc. and Native Alaska Heritage Center, serving as reviewers	
Commission, National Association of Latino Arts and Culture, and The NE	
	,
Today	