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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

JUL 1, 2011 JUN 30, 2012 For the 2011 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number Address change First Nations Oweesta Corporation Name change 54-1970097 Doing Business As Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Terminc/o FNDI 351 Coffman Street (303)774-8838 Amended return 2,775,395. City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-Longmont , CO 80501 H(a) Is this a group return pendina F Name and address of principal officer Chrystel Cornelius Yes 🗓 No for affiliates? same as C above H(b) Are all affiliates included? Tax-exempt status X 501(c)(3) 501(c) ()◀ (insert no.) | 4947(a)(1) or If "No," attach a list (see instructions) J Website: www.oweesta.org H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other L Year of formation: 1999 M State of legal domicile: VA Part I Summary Bnefly describe the organization's mission or most significant activities. To provide assistance, loan Governance capital and training to Native tribes, communities, and peoples. if the organization discontinued its operations or disposed of more than 25% of its net assets Check this box ▶ L 10 Number of voting members of the governing body (Part VI, line 1a) 8 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 14 5 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 9 Total number of volunteers (estimate if necessary) 6 Ο. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a ٥. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 2,478,509. 713,582 Contributions and grants (Part VIII, line 1h) 1,242,656 283,243. 9 Program service revenue (Part VIII, line 2g) 130,931 13,643. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. 0. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,087,169 2,775,395. 12 Total revenue add lines 8 through 11 (must equal Part-Vill, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines V-9) 74,000. 0 Benefits paid to or for members (Part IX, column-(A), line 4) 0 0. 15 Salaries, other compensation, employee benefits (Part) X column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) 949,751 644,913. 0 0. 68,138. 17 Other expenses (Part IX, column (A), lines 11a-11d (1) 1,181,612, 914,063. 2,131,363, 1,632,976. 18 Total expenses Add lines 13-17 (must equal-Part 1X, column (A), line 25) <44.194. 1,142,419. 19 Revenue less expenses Subtract line 18 from line 12 28 **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 7,388,396 8,303,263. 21 Total liabilities (Part X, line 26) 5,377,174. 5,151,110. 2,011,222. 3,152,153. Net assets or fund balances Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature d'officer Ovid Sign Chrystel Cornelius Here Type or print name and title PTIN Date Print/Type preparer's name Preparer's signature Check 1/10/13 maria monta 01363907 Paid Maria Montoya Preparer Kundinger, Corder & Engle P.C. Firm's EIN Firm's name Firm's address 475 Lincoln Street, Suite 200 Use Only Denver, CO 80203 Phone no. (303) 534-5953 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

Form **990** (2011)

	990 (2011) First Nations Oweesta Corporation	54-1970097 Page 2
Par	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	<u>x</u>
1	Briefly describe the organization's mission	
	First Nations Oweesta Corporation (the "Organization") enhances the	
	capacity of Native tribes, communities and peoples to access, control,	
	create, leverage, utilize, and retain financial assets and to provide	
	appropriate financial capital for Native development efforts.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	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	
	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 \$	ue\$)
	Institutional Development- The primary goal is to help create, develop,	
	expand and strengthen Native Community Development Financial	
	Institutions (CDFIs). Activities reflect the provision of regional and	
	local CDFI workshops, participation and attendance at other industry	
	conferences, participation on the CDFI Coalition, and follow-up	
	outreach, technical assistance and training to tribes who have	
	expressed an interest in or are in the process of forming a CDFI.	
4b	(Code) (Expenses \$ 335,732. including grants of \$ 74,000.) (Revenue	ue\$ 141,324.)
	Lending-The Organization provides capitalization to qualifying	
	organizations, enabling them to reinvest the capital back into their	
	communities and programs and/or to use as leverage to attract other	
	capital. Oweesta makes loans to various types of Native community	
	development financial institutions such as small business loan funds	
	and credit associations to make consumer, business and housing loans.	
	Oweesta also lends to housing loan funds for capitalizing construction	
	loan funds or for mortgage lending.	
4c	(Code) (Expenses \$ 19,159. including grants of \$) (Revenue	ue\$ 0.)
	Public Education- Oweesta provides financial education and asset	
	building to Native communities. The organization strives to enhance,	
	through training, technical assistance and development of educational	
	materials, the capacity of Tribes, Native organizations and individuals	
	to better manage their financial assets. Activities reflect the	
	provision of instructors, training workshops, follow-ups, technical	
	assistance in asset building strategies and programs, participation in	
	the Native Financial Coalition and their activities, and the	
	development and distribution of new educational resources.	
4d	Other program services (Describe in Schedule O)	
-	(Expenses \$ 1,831. including grants of \$) (Revenue \$	١
	Total program service expenses 1,300,931.	

Form 990 (2011) First Nations Owee Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
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		_ X
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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,	١.,		
	Part VI	11a	Х	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
C	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		x
ч	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	110		<u> </u>
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	٠٠		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	х	1
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			١
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			,
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			,
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
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	10	ŀ	x
20-		19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b	<u> </u>	
U	1 163 to mile 204, did the organization attach a copy of its addited infancial statements to this return?		990	2011)

Form 990 (2011) First Nations Oweesta Corporation
Part IV 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	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		
	Schedule J	23		_х
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		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			l
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
ZJa	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		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	ZSa		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or 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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
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		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
20	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		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
~	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?			
-	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
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	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38		х
		Form	990 (2011)

•				
Form	990 (2011) First Nations Oweesta Corporation 54-197009	7	Р	age 5
Par				
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 1a 1	7		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 1	4		}
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		ļ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	ł		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	<u> </u>	Х
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.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	-	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			١.,
	any contributions that were not tax deductible?	6a	<u> </u>	х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1
7	were not tax deductible? Organizations that may receive deductible contributions under continual 170/c)	6b	 	-
7 a	Organizations that may receive deductible contributions under section 170(c). 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	, ,	Ì	x
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 <u>7a</u> 7b	<u> </u>	 ^
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	10		
·	to file Form 8282?	7c	İ	x
d	If "Yes," indicate the number of Forms 8282 filed during the year	1,0	<u> </u>	<u> </u>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 _e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/A	1
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		N/A	1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			1
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	1	i
9	Sponsoring organizations maintaining donor advised funds.			1
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
	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	<u> </u>	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1	I	l .

Х

14a

13b

13c

organization is licensed to issue qualified health plans

14a Did the organization receive any payments for indoor tanning services during the tax year?

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

c Enter the amount of reserves on hand

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

	Check if Schedule O contains a response to any question in this Part VI					X			
Sec	tion 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	10						
	If there are material differences in voting rights among members of the governing body, or if the governing			1					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1							
b	Enter the number of voting members included in line 1a, above, who are independent	1b	8	3					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other	1					
	officer, director, trustee, or key employee?		•	2	•	x			
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	supervision						
	of officers, directors, or trustees, or key employees to a management company or other person?		•	3		x			
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	4		х			
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		х			
6									
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point o	one or						
	more members of the governing body?			7a	x				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, si	tockho	lders, or						
	persons other than the governing body?		,	7b	l '	x			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea	r by the	following:	<u> </u>		-			
а	The governing body?	,		8a	x				
	· · · · · · · · · · · · · · · · · · ·								
9									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	1	x			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code)	<u> </u>					
					Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a		х			
	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	. affiliates.						
	and branches to ensure their operations are consistent with the organization's exempt purposes?		,	10b					
11a	11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
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	x				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conf	licts?	12b	х				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	es," de	scribe						
	ın Schedule O how this was done			12c	х				
13	Did the organization have a written whistleblower policy?			13	х				
14	Did the organization have a written document retention and destruction policy?			14	х				
15	Did the process for determining compensation of the following persons include a review and approva	l by in	dependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-	•	1					
а	The organization's CEO, Executive Director, or top management official			15a	х				
b	Other officers or key employees of the organization			15b	х				
	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	nent w	th a	1		[
	taxable entity during the year?			16a		x			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its p	articipation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nzation	ı's						
	exempt status with respect to such arrangements?			16b					
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶SD, VA								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Section	on 501(c)(3)s only)	availat	le				
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial								
	statements available to the public during the tax year								
20	State the name, physical address, and telephone number of the person who possesses the books an	nd reco	ords of the organiza	ation 🕽	_				
	Bo Lewis - (303)774-8838								
	351 Coffman Street, Longmont, CO 80501								

54-1970097 Form 990 (2011) Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

 \mathbf{x}

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 employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization	nor any related	orga	anıza	ation	ı co	mpe	nsa	ted any current officer, o	director, or trustee	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average		Position (do not check more than one box, unless person is both an		Reportable	Reportable	Estimated			
	hours per week	offi	c, unie icer ar	ss pe id a d	erson Irrecto	is bot or/trus	th an stee)	compensation from	compensation from related	amount of other
	(describe	ctor				Г		the	organizations	compensation
	hours for	or dire		i		ted	l	organization	(W-2/1099-MISC)	from the
	related) stee	truste			beusa		(W-2/1099-MISC)		organization
	organizations in Schedule	la Tr	lonal		ploye	E CO				and related
	O)	Individual trustee or director	Institutional trustee	Officer	Кеу етрюуее	Highest compensated employee	Former			organizations
(1) B. Thomas Vigil		 =	=	-	Ť	Ξ.0	<u> </u>			
Chair	2,00	x		x				0.	0.	0.
(2) Marguerite Smith	-	t								
Vice Chair	2.00	x		x				0.	0.	0.
(3) David Lester					T					
Secretary	2,00	x		х				0.	0.	0.
(4) Donald Sampson										
Treasurer	2,00	x		х				0.	0.	0.
(5) Michael Roberts										,
President	2.00	х		х				0.	140,440.	8,992.
(6) Chandra Hampson							Γ			
Director	2,00	х						0.	0.	0.
(7) Benny Shendo, Jr.									•	
Director	2.00	х				L	L	0.	74,000.	0.
(8) Shyla Grace Sheppard		1		1						
Director	2.00	х			<u> </u>	<u> </u>		0.	0.	0.
(9) Siobhan Oppenheimer-Nicolau										
Director	2.00	Х	ᆫ		_	<u> </u>	_	0.	0.	0.
(10) Gelvin Stevenson										1
Director	2.00	Х			<u> </u>			0.	0.	0.
(11) Chrystel Cornelius										
Acting CEO starting June 2012	40.00	_	┞	х	┡	<u> </u>	_	19,207.	0,	1,279.
(12) Bo Lewis				l_						
Director of Finance	40.00	_		х	├	<u> </u>	┡	55,757.	0.	8,459.
(13) Jon Panamaroff	40.00			١						0.154
CEO through April 2012	40.00	<u> </u>	-	х	⊢	-	L	83,349.	0.	9,154.
							l			
	 	├	├	\vdash	\vdash	├-	\vdash			
	 	╁	╁	\vdash	\vdash	┢	⊢	-		
	 	 -	\vdash	\vdash	╁╴	\vdash	\vdash			
						•				
					<u> </u>		1	ı		

rait	VII Section A. Officers, Directors, Tr		mplo	yee			High	est					/F		
	(A)	(B)							(D)	(E)			(F)	ام	
	Name and title	Average POSITION (do not check more than one box, unless person is both an							Reportable compensation	Reportable compensatio			mate ount		
		week					or/trus		from	from related			ther	J,	
		(describe	ctor						the	organization				tion	
		hours for	a dir		ŀ	ŀ	ed		organization	(W-2/1099-MIS	SC)		m th		
		related organizations	stee	truste		a u	bens		(W-2/1099-MISC)			_	nızat		
		in Schedule	돌	ional		ploye	e ye					and orgar	relat		
		0)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				Olgai	IIZUU	0110	
			<u> </u>	=_	۳	<u> </u>	1 8	۳						-	
			i												
				<u> </u>											
	-	<u> </u>	├												
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		 	┢			-	╁	┝							
			İ												
1b	Sub-total		_				┢	_	158,313.	214,	440.	440. 27,884.			
	Total from continuation sheets to Part \	II, Section A					•		0.		0.			0 ,	
d	Total (add lines 1b and 1c)						>		158,313.	214,	440.		27	884.	
2	Total number of individuals (including but	not limited to th	hose	liste	ed a	bov	e) w	ho r	eceived more than \$100	,000 of reportab	ie				
	compensation from the organization	,							4, •			13		<u> </u>	
_	5.11												Yes	No	
	Did the organization list any former office			e, ke	ey er	npic	oyee	, or	highest compensated e	mployee on		3	-	x.	
	line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the s			omn	anc.	atioi	n an	4 0+	her compensation from	the organization		3		<u> </u>	
	and related organizations greater than \$15	•		•					•	the organization		4		ı X	
	Did any person listed on line 1a receive or									idual for services	3				
	rendered to the organization? If "Yes," cor								<u> </u>			5		х	
Sect	ion B. Independent Contractors														
	Complete this table for your five highest c		-								npens	ation fr	om		
	the organization. Report compensation for	the calendar y	/ear	endı	ing v	vith	or w	/ithii		year I					
	(A) Name and busines	s address	NO	NF					(B) Description of s	services	r	(C) compen		n	
	. Tamo and addition		140	-14				-	2 330						
		<u>_</u> _						-							
2	Total number of independent contractors	 (including but r	not li	mite	d to	the	se li	ster	d above) who received n	nore than					
_	\$100,000 of compensation from the organ	•	.0011				0					- • (
	,											Form C			

Statement of Revenue (D) Revenue excluded from (A) (B) (C) Unrelated Total revenue Related or exempt function business tax under sections 512, 513, or 514 revenue гечелие Contributions, Giffs, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c d Related organizations 1d 2,268,682. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 209,827 g Noncash contributions included in lines 1a-1f \$ 2,478,509 Total. Add lines 1a-1f Business Code 2 a Program Service Fees 900099 141,919 141,919 Program Service Revenue 900099 141,324 Loan Portfolio Income 141,324 f All other program service revenue 283,243 Total. Add lines 2a-2f Investment income (including dividends, interest, and 13,643. 13,643. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less. direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b d All other revenue Total. Add lines 11a-11d 0. 13,643, 2,775,395. 283,243 Total revenue. See instructions. Form 990 (2011) 132009 01-23-12

Form 990 (2011) First Nations Oweest 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)

Do	not include amounts reported on lines 6b,	se to any question in this	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	74,000.	74,000.		
_	organizations in the United States. See Part IV, line 21	74,000.	74,000.	-	····
2	Grants and other assistance to individuals in				
_	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
4	United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,	 		··· · · · · · · · · · · · · · · · · ·	
3	trustees, and key employees	204,855.	95,139.	97,387.	12,329.
6	Compensation not included above, to disqualified	201,000.		37,301.	
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	357,320.	287,842.	51,962.	17,516.
8	Pension plan accruals and contributions (include	337,320.	207,042.	31,302.	17,310.
۰	,	5,854.	5,325.	224.	305.
^	section 401(k) and section 403(b) employer contributions)	31,778.	27,380.	2,931.	1,467.
9	Other employee benefits	45,106.	31,260.	11,468.	2,378.
10	Payroll taxes	45,100.	31,200.	11,400.	2,370.
11	Fees for services (non-employees):				
a	Management				
0	Legal				
	Accounting				
d	Lobbying Professional fundraising services. See Part IV, line 17				
4	· · · · · · · · · · · · · · · · · · ·				
'	Investment management fees	300,011.	244,874.	39,648.	15,489.
g 12	Other Advertising and promotion	300,011.	222,072.	05,010.	20,102,
12 13	Office expenses	31,352.	26,931.	3,095.	1,326.
14	Information technology	104.	92.	7.	5,
15	Royalties				
16	Occupancy	31,070.	27,879.	1,985.	1,206.
17	Travel	150,781.	125,365.	20,791.	4,625.
18	Payments of travel or entertainment expenses				-,
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	73,293.	64,916.	5,485.	2,892.
20	Interest	103,403.	103,403.		
21	Payments to affiliates	96,877.	85,349.	7,072,	4,456.
22	Depreciation, depletion, and amortization	21,695.	19,113.	1,584.	998,
23	Insurance	964.		964.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule (D.)				
а	Equip Rental & Maint.	38,478.	31,879.	5,317.	1,282.
b	Loan Loss Reserve	22,500.	22,500.		<u> </u>
c	Printing & Publications	16,675.	16,069.	318.	288,
d	Bank Fees	6,203.	25.	6,178.	
_	All other expenses	20,657.	11,590.	7,491.	1,576.
25	Total functional expenses. Add lines 1 through 24e	1,632,976.	1,300,931.	263,907.	68,138.
<u></u> 26	Joint costs. Complete this line only if the organization	• • •			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Pac

54-1970097

					(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing			200.	1	113,167.
	2	Savings and temporary cash investments			2,371,176.	2	2,773,985.
	3	Pledges and grants receivable, net			3,058.	3	272,574.
	4	Accounts receivable, net			311,410.	4	636,
	5	Receivables from current and former officers, dir	ectors	, trustees, key			
		employees, and highest compensated employee	s Co	nplete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as	define	d under section			
		4958(f)(1)), persons described in section 4958(c)					:
		employers and sponsoring organizations of sect		- 1			
	Ì	employees' beneficiary organizations (see instru			'	6	
ets	7	Notes and loans receivable, net		Ī	3,582,250.	7	4,009,750.
Assets	8	Inventories for sale or use				8	
•	9	Prepaid expenses and deferred charges		Ť	8,184.	9	5,984.
	l	Land, buildings, and equipment cost or other	l				
		basis Complete Part VI of Schedule D	10a	177,719.			•
	Ь	Less. accumulated depreciation	10b	142,485.	43,562.	10c	35,234.
	11	Investments - publicly traded securities			1,060,390.	11	1,064,990.
	12	Investments - other securities. See Part IV, line 1	1	·	_ 	12	
	13	Investments - program-related. See Part IV, line		ļ		13	
	14	Intangible assets		ļ l		14	
	15	Other assets. See Part IV, line 11		. [8,166.	15	26,943.
	16	Total assets. Add lines 1 through 15 (must equa	al line	34)	7,388,396.	16	8,303,263.
	17	Accounts payable and accrued expenses		-/	107,547.	17	205,907.
	18	Grants payable		ļ	_ 	18	
	19	Deferred revenue			483,863.	19	110,074.
	20	Tax-exempt bond liabilities				20	
v	21	Escrow or custodial account liability Complete f	Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, director					
Ē		highest compensated employees, and disqualifi					
Ë		of Schedule L	- - - -	50115		22	
	23	Secured mortgages and notes payable to unrela	ted th	ird parties		23	
	24	Unsecured notes and loans payable to unrelated		· · · · · · · · · · · · · · · · · · ·	4,780,000.	24	4,795,000.
	25	Other liabilities (including federal income tax, pa		· .		<u> </u>	
		parties, and other liabilities not included on lines					
		Schedule D		,	5,764.	25	40,129.
	26	Total liabilities. Add lines 17 through 25			5,377,174.	26	5,151,110.
		Organizations that follow SFAS 117, check he	re D	x and complete			· · · · · · · · · · · · · · · · · · ·
ģ		lines 27 through 29, and lines 33 and 34.					
JCe	27	Unrestricted net assets			1,861,222.	27	2,989,653.
ala	28	Temporarily restricted net assets		ř	0.	28	162,500.
8	29	Permanently restricted net assets		<u> </u>	150,000.	29	0.
Š		Organizations that do not follow SFAS 117, cl	neck l	ere ▶ 🔲 and	-		
<u> </u>		complete lines 30 through 34.					
ţ	30	Capital stock or trust principal, or current funds				30	
SSe	31	Paid-in or capital surplus, or land, building, or eq	uipme	nt fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	•	F		32	
ž	33	Total net assets or fund balances	,		2,011,222.	33	3,152,153.
	34	Total liabilities and net assets/fund balances		· •	7,388,396.	34	8,303,263.

Form **990** (2011)

	990 (2011) First Nations Oweesta Corporation	54-1970097		Pac	ge 12			
Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI				X			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	,775,	395.			
2 Total expenses (must equal Part IX, column (A), line 25)								
3 Revenue less expenses Subtract line 2 from line 1								
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4								
5	Other changes in net assets or fund balances (explain in Schedule O)	5		<1,	488.			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	3	,152,	153.			
Pa	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII				х			
		-		Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.						
2a Were the organization's financial statements compiled or reviewed by an independent accountant?								
b	Were the organization's financial statements audited by an independent accountant?		2b	х				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	х				
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.						
ď	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue							
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis X Both consolidated and separate basis							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit						
	Act and OMB Circular A-133?	J	За	х				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	х				
			Form	990 (2011)			

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

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

OMB No 1545-0047

Open to Public Inspection

Name of	the organizat	ion				-		E	mployer	identification number
			ons Oweesta Corpor						54	-1970097
Part I	Reason	for Public Char	ity Status (All organi	ations mu	st comple	te this par	t) See ins	tructions.		
The organ	nization is not	a private foundation	because it is. (For lines	1 through	11, check	only one b	oox)	_		-
1 🖳	A church, co	nvention of churche	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)).		
2 🗀			70(b)(1)(A)(ii). (Attach Sc							
з 🗔	A hospital or	a cooperative hospi	tal service organization	described	ın section	170(b)(1)	(A)(iii).			
4 🗀			operated in conjunction					(b)(1)(A)(ii	i). Enter t	he hospital's name,
	city, and stat									•
5 🔲	An organizat	on operated for the	benefit of a college or u	niversity o	wned or or	perated by	a govern	mental uni	t describ	ed in
		(b)(1)(A)(iv). (Comple								
6 🖳	A federal, sta	ate, or local governm	ent or governmental uni	t describe	d ın sectio	n 170(b)(1)(A)(v).			
7 📖	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit o	or from the	general p	oublic described in
	section 170	(b)(1)(A)(vi). (Comple	ete Part II.)							
8 <u> </u>	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II)					
9 X	An organizat	on that normally rec	eives (1) more than 33	1/3% of its	support f	rom contri	butions, n	nembershi	p fees, ar	nd gross receipts from
	activities rela	ited to its exempt ful	nctions - subject to certa	aın excepti	ons, and (2) no more	than 33 ¹	1/3% of its	support	from gross investment
	income and	unrelated business t	axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	ınızatıon a	after June 30, 1975.
	See section	509(a)(2). (Complete	e Part III)							
10 🖳	An organizat	ion organized and oj	perated exclusively to te	st for publ	ic safety. S	See sectic	n 509(a)(4	4).		
11 📖	An organizat	ion organized and oj	perated exclusively for the	he benefit	of, to perfo	orm the fu	nctions of	, or to carr	y out the	purposes of one or
	more publicly	y supported organiza	ations described in secti	on 509(a)(1) or section	on 509(a)(2	2). See se e	ction 509(a)(3). Che	eck the box that
		·· · · ·	organization and compl		•				_	•
	a L Type		• •	• •	e III - Func	•	•		d L	Type III - Other
e 📖			at the organization is not						-	
			han one or more publicl		_				9(a)(1) or	section 509(a)(2)
f			tten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		
		rganization, check th								
9			organization accepted ai			•		• •		
			lirectly controls, either a	lone or tog	ether with	persons o	described	ın (ıi) and (III) below,	
			upported organization?	•						11g(i)
	-	·	n described in (i) above?		- 0					11g(ii)
h		-	person described in (i)							[11g(iii)]
h	Flovide the i	ollowing information	about the supported or	ganization	(S)					
		/// F/M	(iii) Type of	(iv) le the c	organization	(v) Did voi	notify the	(vi) ls	the I	
	e of supported anization	(ii) EIN	organization		sted in your		ion in col.	organizátio	on in col.	(vii) Amount of
org	amzauom		(described on lines 1-9 above or IRC section	, ,	document?		support?	(i) organız U.S		support
			(see instructions))	Yes	No	Yes	No	Yes	No	
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Total		I	1		l	ŀ	l	I	1	

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.) Section A. Public Support Calendar 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") 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 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008(c) 2009(d) 2010 (e) 2011 (f) Total 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain

11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions)

or loss from the sale of capital assets (Explain in Part IV)

12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of	f Public Support	Percentage
---------------------------	------------------	------------

			_	
14	Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14		9
15	Public support percentage from 2010 Schedule A, Part II, line 14	15		9

16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990 EZ) 2011 First Nations Oweesta Corporation 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 fails to qualify under the tests listed below, please complete Part II.)

Se	Section A. Public Support											
Cale	endar 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											
	ınclude any "unusual grants ")	1,105,553.	1,052,446.	1,919,780.	713,582.	2,478,509.	7,269,870.					
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	1,575,256.	2,061,849.	1,271,965.	1,242,656.	283,243.	6,434,969.					
3	Gross receipts from activities that		, ,	, ,	, , ,	, ,						
Ū	are not an unrelated trade or bus- iness under section 513											
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf											
5	The value of services or facilities furnished by a governmental unit to the organization without charge		:									
6	Total. Add lines 1 through 5	2,680,809.	3,114,295.	3,191,745.	1,956,238.	2,761,752.	13,704,839.					
7:	a Amounts included on lines 1, 2, and											
	3 received from disqualified persons						0.					
ı	n 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	1,488,941.	1,899,522. 1,899,522.	1,126,021. 1,126,021.	1,151,149.	102,981.	5,768,614.					
	c Add lines 7a and 7b	1,151,149.	102,981.	5,768,614.								
8 Public support (Subtract line 7c from line 6.) 7,936, 2												
Section B. Total Support												
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2007 2,680,809.	(b) 2008 3,114,295.	(c) 2009 3,191,745.	(d) 2010	(e) 2011	(f) Total					
	Amounts from line 6	1,956,238.	2,761,752.	13,704,839.								
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties	105.070	120,026	127.046	120 021	13 643	F2C 010					
	and income from similar sources	125,272.	129,926.	127,046.	130,931.	13,643.	526,818.					
	b Unrelated business taxable income											
	(less section 511 taxes) from businesses											
	acquired after June 30, 1975	122 222			100 001		505.010					
	c Add lines 10a and 10b	125,272.	129,926.	127,046.	130,931.	13,643.	526,818.					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on											
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	2,212.	48,742.				50,954.					
13	Total support (Add lines 9, 10c, 11, and 12)	2,808,293.	3,292,963.	3,318,791.	2,087,169.	2,775,395.	14,282,611.					
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ix year as a sectioi	n 501(c)(3) organız	ation,					
_	check this box and stop here											
Se	ction C. Computation of Publ	ic Support Per	rcentage									
15	Public support percentage for 2011 (ine 8, column (f) di	vided by line 13, c	olumn (f))		15	55.57 %					
16						16	46.97 %					
Se	ction D. Computation of Inves	stment Income	e_Percentage									
17	Investment income percentage for 20	11 (line 10c, colum	nn (f) divided by lir	e 13, column (f))		17	3.69 %					
18	Investment income percentage from	2010 Schedule A, I	Part III, line 17		[18	4.71 %					
19	a 33 1/3% support tests - 2011. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not					
	more than 33 1/3%, check this box a	nd stop here. The	organization qual	fies as a publicly s	supported organiza	ation	\mathbf{x}					
1	b 33 1/3% support tests - 2010. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%,	and					
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	ınızatıon qualifies a	as a publicly suppo	orted organization	. ▶∐					
20	Private foundation. If the organization	n did not check a l	box on line 14, 19	a, or 19b, check th	is box and see ins	tructions	<u> </u>					

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ 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.

2011
Open to Public Inspection

Name of the organization

First Nations Oweesta Corporation

Employer identification number

Da	t I Organizations Maintaining Depart Advise		Other Cimiles Free	do er A	000:::::	\$4-1970097	
Pai			Other Similar Fund	us or A	ccoun	ts. Complete if	the
	organization answered "Yes" to Form 990, Part IV, lin						
		(a) Don	or advised funds	(b) Funds	and other acco	ounts
1	Total number at end of year						
2	Aggregate contributions to (during year)			<u> </u>			
3	Aggregate grants from (dunng 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 ad	vised fun	ds		
	are the organization's property, subject to the organization's	exclusive legal	control?			L Yes	L No
6	Did the organization inform all grantees, donors, and donor a	advisors in writii	ng that grant funds can l	oe used o	only		
	for chantable purposes and not for the benefit of the donor of	or donor adviso	r, or for any other purpo:	se confer	nng		
	ımpermissible private benefit?			_		Yes_	No_
Pa	t II Conservation Easements. Complete if the or	ganization ansv	vered "Yes" to Form 990	, Part IV,	line 7.		
1	Purpose(s) of conservation easements held by the organizat	tion (check all th	nat apply)				
	Preservation of land for public use (e.g., recreation or e	education)	Preservation of an I	historical	ly import	ant land area	
	Protection of natural habitat		Preservation of a co	ertified hi	storic str	ucture	
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a quali	ified conservation	on contribution in the for	m of a co	onservati	on easement or	n the last
	day of the tax year.						
					Н	eld at the End of	the Tax Year
а	Total number of conservation easements				2a		
b	Total acreage restricted by conservation easements				2b		
¢	Number of conservation easements on a certified historic sti	ructure included	d ın (a)		2c		
d	Number of conservation easements included in (c) acquired	after 8/17/06, a	and not on a historic stru	cture			
	listed in the National Register				2d		
3	Number of conservation easements modified, transferred, re	eleased, extingu	ished, or terminated by	the orgar	nization c	during the tax	
	year ▶						
4	Number of states where property subject to conservation ea	asement is locat	ted >	_			
5	Does the organization have a written policy regarding the pe	enodic monitorin	g, inspection, handling o	of			
	violations, and enforcement of the conservation easements	ıt holds?				Yes	☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing	conservation easements	during t	he year	-	
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing cons	ervation easements dun	ng the ye	ear 🕨 💲		_
8	Does each conservation easement reported on line 2(d) abor-	ve satisfy the re	equirements of section 1	70(h)(4)(E	3)(i)		
	and section 170(h)(4)(B)(ii)?					Yes	L No
9	In Part XIV, describe how the organization reports conservat	tion easements	in its revenue and exper	ise state	ment, an	d balance shee	t, and
	include, if applicable, the text of the footnote to the organization	ation's financial	statements that describe	es the or	ganızatıo	n's accounting	for
	conservation easements						
Pa	t III Organizations Maintaining Collections o	of Art, Histo	rical Treasures, or	Other	Similar	r Assets.	
	Complete if the organization answered "Yes" to Form	1 990, Part IV, iii	ne 8				
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to	report in its revenue stat	tement a	nd balan	ce sheet works	of art,
	historical treasures, or other similar assets held for public ex	hibition, educat	tion, or research in furthe	erance of	public se	ervice, provide,	ın Part XIV,
	the text of the footnote to its financial statements that descri	nbes these item	s				
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to rep	ort in its revenue statem	ent and t	alance s	heet works of a	ırt, historical
	treasures, or other similar assets held for public exhibition, e	education, or res	search in furtherance of	public se	rvice, pro	ovide the follow	ing amounts
	relating to these items						
	(i) Revenues included in Form 990, Part VIII, line 1				▶ \$		
	(ii) Assets included in Form 990, Part X		•		▶ \$		
2	If the organization received or held works of art, historical tre	easures, or othe	er sımılar assets for finan	ciat gain,			
	the following amounts required to be reported under SFAS 1	116 (ASC 958) r	elating to these items:				
а	Revenues included in Form 990, Part VIII, line 1				▶ \$		
b	Assets included in Form 990, Part X				▶ \$		

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued, check all that apply) a
(check all that apply) a
a
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table: Arnount C Beginning balance Distributions during the year 1 Ending balance 1 If Inding balance 2a Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Tiwo years back (d) Three years back (e) Four years of Not investment earnings, gains, and losses of Grants or scholarships C Net investment earnings, gains, and losses of Grants or scholarships 1 Administrative expenses 9 End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment P00 % b Permanent endowment P00 % b Permanent endowment P00 % c Temporarily restricted endowment P00 % b Permanent endowment P00 %
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
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During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes
to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? □ Yes □
Part IV
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years of Grants or scholarships c Net investment earnings, gains, and losses of Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 2 Permanent endowment 3 00 % c Temporarily restricted endowment 3 00 % c Temporarily restricted endowment 3 00 %
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs 150,000.
on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years and programs of Grants or scholarships c Net investment earnings, gains, and losses of Grants or scholarships d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 10 Amount 10 Pes Let Amount 10 Amount
b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance 1c 1c 1c 1d 1c 1d 1d 1d
Amount C Additions during the year 1d 1d 1d 1d 1d 1d 1d 1
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part ▼ Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs 1 Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶00% b Permanent endowment ▶00% c Temporarily restricted endowment ▶00% c Temporarily restricted endowment ▶00% c Temporarily restricted endowment ▶00%
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part ▼ Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs 1 Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶00% b Permanent endowment ▶00% c Temporarily restricted endowment ▶00% c Temporarily restricted endowment ▶00% c Temporarily restricted endowment ▶00%
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years 150,000. 150,000. 150,000. b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs 150,000. 150,000. 150,000. f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment
Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 8 Beginning of year balance 9 Contributions 1 Beginning of year balance 1 Contributions 1 Contributions 1 Contributions 1 Contributions 1 Contributions 1 Contributions 1 Contributions 1 Contributions 1 Contributions 1 Contributions 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: 2 Provide the estimated endowment 3 Permanent endowment 4 Permanent endowment 5 Permanent endowment 6 Permanent endowment 7 Permanent endowment 8 Permanent endowment 9
1 Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? b ff "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years
Did the organization include an amount on Form 990, Part X, line 21? b ff "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. a Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years 1a Beginning of year balance 150,000. 150,000. 150,000. b Contributions 150,000. 150,000. 150,000. c Net investment earnings, gains, and losses 150,000. d Grants or scholarships 150,000. 150,000. f Administrative expenses 150,000. 150,000. g End of year balance 150,000. 150,000. g End of year balance 150,000. 150,000. g End of year balance 150,000. 150,000. h Permanent endowment 0.00 % c Temporarily restricted endowment 0.00 %
b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years 150,000. 150,000. 150,000. 150,000. 150,000. b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs 150,000. 150,000. 150,000. 150,000. f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ .00
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years
Beginning of year balance Contributions Contribu
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment Permanent endowment .00 % Temporarily restricted endowment .00 %
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ .00 % b Permanent endowment ▶ .00 % c Temporarily restricted endowment ▶ .00 %
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b
and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment Permanent endowment .00 % Temporarily restricted endowment .00 %
f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b
g End of year balance 150,000. 150,000. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment .00 % b Permanent endowment .00 % c Temporarily restricted endowment .00 %
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶
a Board designated or quasi-endowment ► .00 % b Permanent endowment ► .00 % c Temporarily restricted endowment ► .00 %
b Permanent endowment ► .00 % c Temporarily restricted endowment ► .00 %
c Temporarily restricted endowment ▶%
The percentages in lines 2a, 2b, and 2c should equal 100%.
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization
by. Yes
(i) unrelated organizations (ii) related organizations
(ii) related organizations 3a(iii)
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.
Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value basis (investment) basis (other) depreciation
1a Land
b Buildings
c Leasehold improvements
d Equipment 177,719. 142,485. 35
e Other
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2011

Part VII Investments - Other Securities. Se	e Form 990, Part X, li	ne 12.	_	·
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)	_			
(B)				
(C) (D)		_		
(E)		-		
(F)		_		
(G)		-		
(H)				
(I)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			·····	
Part VIII Investments - Program Related. Se	ee Form 990, Part X,	line 13		
(a) Description of investment type	(b) Book value	Cos	(c) Method of valua st or end-of-year mar	
(1)				
(2)				
(3)				
				· · · · · · · · · · · · · · · · · · ·
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	<u></u>			
Part IX Other Assets. See Form 990, Part X, line	15. Description			(b) Book value
	Description			(b) Book value
<u>(1)</u> (2)				
(3)				
(4)				<u>-</u>
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	45)	 		
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X,	ine 25		<u>P</u>	
1. (a) Description of liability	III C 20	(b) Book value		
(1) Federal income taxes				
(2) Due to Affiliate		40,129.		
(3)				
(4)				
(5)			:	
(6)				
(7)				
(8) (9)				
(10)	_·			
(11)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)	40,129.		
2. FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the rootnote to	o une organization s financial	statements that reports the organi	zation s liability for uncerta	in tax positions under
132053 01-23-12			Sch	edule D (Form 990) 2011

First Nations Oweesta Corporation

54-1970097

Page 3

Schedule D (Form 990) 2011

_	dule D (Form 990) 2011 First Mactons Oweesta Corporation		54-19/009	/ Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited F	inancial Sta	<u>tements</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		2,775,395.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		1,632,976.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		1,142,419.
4	Net unrealized gains (losses) on investments	4		<1,488.
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Pnor period adjustments	7		
8	Other (Describe in Part XIV.)	8		
9	Total adjustments (net). Add lines 4 through 8	9		<1,488.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		1,140,931.
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With R	evenue per	Return	
1	Total revenue, gains, and other support per audited financial statements		1	2,773,907.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		1 1	
а	Net unrealized gains on investments	<1,48	<u>18.</u> >	
b	Donated services and use of facilities 2b		_	
С	Recovenes of pnor year grants 2c		_	
d	Other (Describe in Part XIV)			
е	Add lines 2a through 2d		2e	<1,488.
3	Subtract line 2e from line 1		3	2,775,395.
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			
b	Other (Describe in Part XIV)			
С	Add lines 4a and 4b		4c	0.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	2,775,395.
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With I	Expenses p	er Return	
1	Total expenses and losses per audited financial statements		1	1,632,976.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.			
а	Donated services and use of facilities 2a			
b	Prior year adjustments 2b			
С	Other losses 2c			
d	Other (Describe in Part XIV)		7	
е	Add lines 2a through 2d			0.
3	Subtract line 2e from line 1		3	1,632,976.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV.)		-	
С	Add lines 4a and 4b		4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	1,632,976.
Pa	rt XIV Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	4, Part IV, line	s 1b and 2b; P	art V, line 4, Part
X, lın	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part	to provide any	additional infor	mation
	V, line 4: During 2004, the Organization received a \$150,000 gift	-		
that	was recorded as permanently restricted based on management's			
unde	erstanding of the gift at the time. Upon further review of the grant			
	second duration 2012 and based were additional incompany that are			
agre	ement during 2012 and based upon additional information obtained,			
mana	gement concluded that this was not an endowment gift to be maintained			
in p	perpetuity. This resulted in a reclassification of net assets of			
\$150	,000 from permenantly restricted net assets to temporarily restricted			
			<u> </u>	
net	assets.			

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

First Nations Oweesta Corporation

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.

2011 Open to Public Inspection

Employer identification number

54-1970097

► Attach to Form 990.

Part General Information on Grants and Assistance	ind Assistance				:			
1 Does the organization maintain records to substantiate the amount	to substantiate th		or assistance, the	grantees' eligibilit	y for the grants or ass	of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	lion	
	stance?						X Yes	ž П
露	ocedures for mon	toring the use of grant	funds in the United	d States				
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any receipment that received more than \$5,000. Check this box if no one receiped more than \$5,000. Dot II can be decided if additional space is needed.	Governments an	d Organizations in the	• United States. C	complete if the organia	anization answered "Y	res" to Form 990, Part	IV, line 21, for any	
1 (a) Name and address of organization or government	(a) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, PMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	1
Chi Ishobak, Inc. PO Box 117 Downiac MT 49047	35-2372805	R01(7)(3)	12 500	c			Capacity building for	
, POOR 177 () 31451100	004.04-00	101101	.000,21				יייים מפנים מייים ייים מ	
First Ponca Financial Inc. 941 "O" Street, Suite 107 Lincoln , NE 68107	27-4973866	501(c)(3)	12,500.	0			Capacity building for CDFI's development.	4.
Ysleta del Sur Pueblo 119 S. Pueblo El Paso , TX 79907	74-1851338	501(c)(3)	12,500.	0			Capacity building for CDFI's development.	
Crow Tribe Economic Development Dept - PO Box 970 - Crow Agency , MT 59023	81-0372588	501(c)(3)	12,500.	0			Capacity building for CDFI's development.	
	nd government or	틸	s listed in the line 1 table				•	4
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table					^	
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the instruct	ions for Form 990.					Schedule I (Form 990) (2011)	(2011)

Page 2 (f) Description of non-cash assistance (book, FMV, appraisal, other) 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. Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (d) Amount of non-cash assistance (c) Amount of cash grant accordance with the subrecipient monitoring requirements under OMB Circular Schedule I, Part I, Line 2: All subrecipients are monitored closely and in (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2011) Part III A-133.

54-1970097

First Nations Oweesta Corporation

Schedule I (Form 990) (2011)

132102 01-27-12

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

First Nations Oweesta Corporation

Employer identification number 54-1970097

Form 990, Part III, Line 4d, Other Program Services:	
Advocacy, Policy and Research is a program through which the	
Organization collaborates on research studies that focus on identifying	
and mitigating barriers to Native control of and access to financial	
assets. The Organization's national voice works to create and retain	
the integrity policy favorable to building assets in Native	
communities.	
Expenses \$ 1,831. including grants of \$ 0. Revenue \$ 0.	
Form 990, Part VI, Section B, line 11: Board members are presented with	
draft copies of Form 990 and all schedules and attachments, which they are	
asked to review and approve. At the same time, board members are asked to	
disclose any potential conflicts of interest.	
Form 990, Part VI, Section B, Line 12c: The by-laws provide the conflict	
of interest policy for board members. The employee handbook provides the	-
conflict of interest policy for employees. If conflicts of interest arise	
during the year, they are verbally disclosed to the board and the affected	
person recuses him or herself from related decisions. Starting in fiscal	
year 2013, conflict of interest questionnaires will be completed by board	-
members and management on an annual basis.	
Form 990, Part VI, Section B, Line 15: Board members approve the salary of	
the President/CEO and are informed of the salaries of other key employees.	
The members of the board are all familiar with the not-for-profit sector	
and with the environment in which the Organization works and from which it	
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-FZ	Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization First Nations Oweesta Corporation	Employer identification number 54-1970097
recruits employees. Therefore the board has sufficient knowledge to	34 1570057
evaluate and approve these salaries.	
Form 990, Part VI, Section A, Lines 6 and 7a,	
First Nations Development Institute is the sole member of First Nations	
Oweesta Corporation, and as such, elects members to the governing body.	
Form 990, Part VII	
Michael Roberts devotes an average of about 40 hours per week to First	
Nations Development Institute. All other directors reported on Part VII	
devoted approximately 2 hours per week to First Nations Development	
Institute.	
During 2012, Benny Shendo performed services for Fist Nations	
Development Institute under a consulting agreement and received	
compensation for such services from First Nations Development Institute	
totaling \$74,000.	
Form 990, Part XI, line 5, Changes in Net Assets:	
Net unrealized loss on investments -1,488.	
Part XII, Line 2c	
The Finance Committee of the Board reviews the audited financial	
statements. The Board of Directors also reviews and approves the	
audit.	

(Form 990)
Department of the Treasury
Internal Revenue Service
Name of the organization SCHEDULE R

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990.

► See separate instructions.

2011 Open to Public Inspection

OMB No 1545-0047

Employer identification number 54-1970097

> Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) First Nations Oweesta Corporation Parti

		(O 1 Olin 200) 1 arc 14, mrs oc	,				
(a)	(a)	(0)	<u>ව</u>	(e)		E	
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	r Total income	me End-of-year assets		Direct controlling entity	
	i			-			
	····						
			<u>-</u> .				
Part II Identification of Related Tax-Exempt Organizations (Complete organizations during the tax year.)	ations (Complete if the organization a	if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	Part IV, line 34 be	scause it had one o	or more related tax-exe	mpt	
(e)	(q)	(0)	(p)	(e)	())	(6)	0,000
Name, address, and EIN of related organization	Pnmary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section	Direct controlling entity	controlled controlled entity?	4(5) (3) ed ?
				501(c)(3))		Yes	N _o
First Nations Development Institute -							
54-1254491, 351 Coffman Street, Ste 200,							
Longmont , CO 80501	Economic Assistance	Virginia	501(c)(3)	Line 11a, I	NA		×
				-			
	,						
					:		
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2011

Page 2

54-1970097

Schedule R (Form 990) 2011 First Nations Oweesta Corporation

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

(i) (k) General of Percentage managing ownership				!	elated	(h) Percentage ownership					0) 2011
General or Per managing Ow partner?					or more re					_	Form 99
UBI Gerection of the contraction	21				had one o	(g) Share of end-of-year assets			:		Schedule R (Form 990) 2011
(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)					ecause r				<u> </u>		Sct
oortion-					line 34 b	(f) Share of total income			ı		
					0, Part IV,						_
(g) Share of end-of-year assets					o Form 99	(e) Type of entity (C corp, S corp, or trust)					
					d "Yes" t						
(f) Share of total income					Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year)	(d) Direct controlling entity					
income alated, ax under					rganizatio	(C) Legal domicile (state or foreign country)					1
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	:				te if the o	Lega (s)					
			_		t (Comple	activity					
(d) Direct controlling entity					n or Trus	(b) Pnmary activity		:		<u> </u> -	
			-		rporation ax year)						
(C) Legal domicile (state or foreign					as a Co						
activity					Taxable trust dur	:					
(b) Primary activity		:			nizations oration or	,					
					ted Orga as a corp	(a) Name, address, and EIN of related organization					
and EIN nization					n of Rela	(a) , address ated orga					
(a) Name, address, and EIN of related organization					Identification of Related Organizations Taxable as a Corporatio organizations treated as a corporation or trust during the tax year)	Name of rel					
Name, of rek					-						132162 01-23-12
					Part IV						132162

54-1970097

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

				-	<u> </u>
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1. Direct the tax year did the organization engage in any of the following transactions with one or many related expansions listed in Bode II NO.	y cycles de de de de de de de de de de de de de	cotol encetoring potal		Yes	2
a Receipt of (i) interest (ii) annutres (iii) royalties or (iv) rent from a controlled entity		dated organizations lister	ב ווידענט ווידענ	- E	×
b Gift, grant, or capital contribution to related organization(s)				9	×
c Gift, grant, or capital contribution from related organization(s)				5 ×	
d Loans or loan guarantees to or for related organization(s)				19	×
e Loans or loan guarantees by related organization(s)				1e ×	Ц
f Sale of assets to related organization(s)				;	×
g Purchase of assets from related organization(s)				19	×
h Exchange of assets with related organization(s)				4	×
i Lease of facilities, equipment, or other assets to related organization(s)				÷	×
					;
J Lease of racilities, equipment, or other assets from related organization(s)	(*)			F	< >
 refrommance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) 	anization(s) anization(s)			¥ =	< ×
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			± ±	
n Sharing of paid employees with related organization(s)				t X	Ц
 Reimbursement paid to related organization(s) for expenses 				10 ×	
p Reimbursement paid by related organization(s) for expenses				1	×
				-	>
 q outer transfer of cash or property to related organization(s) r Other transfer of cash or property from related organization(s) 				- -	« ×
s for inf	who must complete the	nis line, including covered	ormation on who must complete this line, including covered relationships and transaction thresholds.	 - - -	
(a) Name of other organization	(b) Transaction	(c) Amount involved	(d) Method of determining		
	type (a-r)		amount involved		
(1)					
(2)					
(3)					
(4)					
(5)					
(b) 132163 01-23-12			Schedule	Schedule R (Form 990) 2011	2011

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

3	centage nership					0) 2011
	\$ <u>\$</u> §	 				 rm 99
5	General or managing partner? Yes NO	-			 	 R (Fo
(0)	Code V-UBI General or Percentage amount in box 20 managing ownership of Schedule K-1 partner? (Form 1065) Yes No					Schedule R (Form 990) 2011
ε	Dispropor- tionate a allocations?				 	
	Dispr alloca Yes					
(6)	Share of end-of-year assets					
(ı)	Share of total income					
(e)	Are all partiners sec 501(c)(3) orgs?					
(d)	Predominant income (related, unrelated, excluded from tax under section 512-514) y			_		
(c)	Legal domicile (state or foreign country)		,			
(b)	Primary activity					
that was not a related organization. See instructions regarding exclusion for certain investment partnerships. (a) (b) (c) (d)	Name, address, and EIN of entity					