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Department of the Treasury Internal Revenue Service

## **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)

Inspection

OMB No 1545-0047

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

Open to Public

	A F	or the 2	2012 calendar year, or tax year beginning and	enaing	·				
	B Cl	neck if	C Name of organization	ntification r	number				
		Address change							
		Name change	Doing Business As		80	80-0013433			
		Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone nu	mber			
	F=	Termin-	P. O. BOX 23320		90	7-225-	2440		
		]Amender Jreturn			G Gross receipts \$		964,258.		
		Applica-	KETCHIKAN, AK 99901		H(a) Is this a grou	un return			
		Ition pending	F Name and address of principal officer: STEVEN KANTOR		for affiliates'		Yes X No		
			SAME AS C ABOVE		H(b) Are all affiliate	_			
			ppt status	or 527	1 ` '		e instructions)		
			ETCHIKANCHARR COM	01021	H(c) Group exem	•	•		
	N A	ebsite	rganization: X Corporation Trust Association Other	I Vear			f legal domicile: AK		
ĺ			Summary	<u> </u>	or formation. 200	O IVI State 0	riegal domicile. AIL		
1	$\neg \neg$		riefly describe the organization's mission or most significant activities. ALCO	HOL AW	ARENESS E	DUCATT	ON		
	Governance	, 0	entry describe the organization's mission of most significant determines.			<u> </u>			
	Lua	2 C	heck this box 🕨 🔲 if the organization discontinued its operations or dispos	sed of more	than 25% of its n	et assets.			
	Š	3 N	umber of voting members of the governing body (Part VI, line 1a)			3			
		4 N	umber of independent voting members of the governing body (Part VI, line 1b)			4	7		
	Activities &	5 To	otal number of individuals employed in calendar year 2012 (Part V, line 2a)			5	0		
**	ij.	6 To	otal number of volunteers (estimate if necessary)			6	0		
2013	늉		otal unrelated business revenue from Part VIII, column (C), line 12			7a	94,327.		
7	⋖		et unrelated business taxable income from Form 990-T, line 34			7b	0.		
re					Prior Year	C	urrent Year		
		8 C	ontributions and grants (Part VIII, line 1h)		12,05	6.	8,250.		
N	Revenue		rogram service revenue (Part VIII, line 2g)	h		0.	0.		
=	- Ke		vestment income (Part VIII, column (A), lines 3, 4, and 7d)		5	9.	68.		
$\bigcirc$	Œ		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		102,46	7.	103,948.		
SCANNED			otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		114,58	2.	112,266.		
<b>Z</b>			rants and similar amounts paid (Part X, column (A), lines 1-3)		31,45	4.	36,325.		
8	1		enefits paid to or for members (Part IX Colling Appline 4)7			0.	0.		
$\mathcal{O}$	S		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		5,50	0.	6,000.		
90	Expenses		rofessional fundraising toes (Partally, column (A), line 16)	ì		0.	0.		
	ē	b To	otal fundraising expenses (Part IX, column (D) line 25)	0.					
	<u>ш</u>		ther expenses (Part IX, column (A) lines-11a-11d, 11ii (A)		35,15	4.	24,021.		
		18 T	otal expenses, Add liges 13-1 Venustredival Part IX, column (A), line 25)		72,10		66,346.		
		19 R	evenue less expenses. Subtract line 18 from line 12		42,47	4.	45,920.		
	28			Be	ginning of Current Ye		nd of Year		
	용퇴	20 To	otal assets (Part X, line 16)		85,13	3.	130,990.		
	<b>888</b>		otal liabilities (Part X, line 26)		23		169.		
	Net Assets or Fund Balances		et assets or fund balances Subtract line 21 from line 20		84,90	1.	130,821.		
	Pa		Signature Block						
	Unde	er penalti	es of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ents, and to the best	of my knowled	dge and belief, it is		
	true,	correct,	and complete Diclaration of preparer (other than officer) is based on all information of wi	hich preparer	has any knowledge.				
			May W. Jank			-2-1	3		
	Sigr	, []	Signature of office:		Date				
	Here		STEVEN KANTOR, PRESIDENT						
			Type or print name and title						
		F	Print/Type preparer's name Preparer's signature	100	Tate Check	- [ P	TIN		
	Paid	Į:	Print/Type preparer's name Preparer's signature  [AROLD R. HOWARD  [AROLD R. HOWARD	CAL	<del>-//</del>		1375243		
	Prep		Firm's name MILNER, HOWARD & PALMER, CPAS (	PC)	Firm's EIN	92-	0042888		
	Use	Only [	Firm's address 426 MAIN STREET						
			KETCHIKAN, AK 99		· Phone no.	(907)	225-1040		
	May	the IRS	S discuss this return with the preparer shown above? (see instructions)	·		<u> </u>			
	23200	01 12-10-	12 LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		1	Form <b>990</b> (2012)		

	t III   Statement of Program Service Accomplishments
Pai	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	ALCOHOL AWARENESS EDUCATION
2	Did the organization undertake any significant program services during the year which were not listed on
2	
	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 measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
	20 550
4a	
	CONTRIBUTIONS TO ORGANIZATIONS LOCATED WITHIN THE STATE OF ALASKA 20
	ORGANIZATIONS SERVED
415	(Code ) (Expenses \$ 5,775 • including grants of \$) (Revenue \$)
4b	·
	AND LIVING EXPENSES WHILE SEEKING CARE AND PROVIDE ASSISTANCE TO 31
	INDIVIDUALS SEEKING THEIR GED'S.
	<u></u>
4-	(Code) (Expenses \$
4c	(Code ) (Expenses \$ 2,133. including grants of \$ ) (Revenue \$ )
	MONTHLY MEMBERSHIP MEETINGS TO DISCUSS INDUSTRY ISSUES, PLAN EVENTS,
	REVIEW AND VOTE ON APPLICATIONS FOR FUNDS FROM OTHER ORGANIZATIONS AND
	INDIVIDUALS.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 38,458.
	Form <b>990</b> (2012)

			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		X
2	is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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	<u> </u>	X
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		
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	L	X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?		ĺ	
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	ļ		,
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	1	l	
	as applicable.		ζ,	٠.
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X
d		}		j
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11 <u>d</u>		<u> </u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ļ		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	·	(		
′	Schedule D, Parts XI and XII	12a		X
þ	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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_
þ	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	441		v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
40	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		
16	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	- 1	_X
4-	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	. [	X
40	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''		
18	1c and 8a? If "Yes," complete Schedule G, Part II	18	j	X
10	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	- 10		
19	complete Schedule G, Part III	19	x	
20~	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		_ <u></u>
			990 (	2012)
			- (	- · <b>-</b> /

	990 (2012) KETCHIKAN CHARR INC. 80-0013	<u> 433</u>	<u> </u>	age 4
Pa	rt 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	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,		<del> </del>	
	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			$\vdash$
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1	1	
		23	1	x
04-	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	25		<del>  ^</del>
248	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			-
		24-		x
	Schedule K. If "No", go to line 25	24a	<del> </del>	<del>  ^</del>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<del> </del>	┼
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	١	ĺ	ł
	any tax-exempt bonds?	24c	<del> </del>	₩
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<del>├</del> -
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a		1	Ī
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<del> </del>
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	ļ	1	
	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	<u> </u>	<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified		İ	ļ
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	<u> </u>	<u> </u>
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			1
	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	,,,	,	4.5
	instructions for applicable filing thresholds, conditions, and exceptions).		( '	
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	. }	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	х	ı
35a	540/->4400	35a		X
-	If "Yes" to line 35a, 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	1	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	ļ	
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 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Note. All Form 990 filers are required to complete Schedule O

38

Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V Yes No 0 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O **3**b X At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a b If "Yes," enter the name of the foreign country. ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? ..... 5h c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? <u>5</u>c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . ... . . . . . . . . . . . . . . . . ..... .. .. . 6b 7 Organizations that may receive deductible contributions under section 170(c). a 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? <u>7</u>a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required 7c d If "Yes," indicate the number of Forms 8282 filed during the year ...... Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 76 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . ... 7f f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting 8 organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9b h Section 501(c)(7) organizations. Enter 10 Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter-11 Gross income from other sources (Do not net amounts due or paid to other sources against 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year ... ... 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? ....... 13a Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b

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

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

X

\_13c

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		_	
Sec	tion A. Governing Body and Management			
	1 1 -		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	] ,		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	]		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		•	
•	of officers, directors, or trustees, or key employees to a management company or other person?	3	Х	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
_	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
5	Did the organization have members or stockholders?	6	Х	
6	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		-2	
7a		7-	x	
٠.	more members of the governing body?	7a		
b				
	persons other than the governing body?	7b	_X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		[	
а	The governing body?	8a	<u> X</u>	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		1	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		)	
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		X
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
_	ın Schedule O how this was done	12c	- 1	X
13	Did the organization have a written whistleblower policy?	13	$\neg \uparrow$	X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	-'-	+	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_		450	į	v
	The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization	15a	-+	$\frac{x}{x}$
b	Other officers or key employees of the organization	15b	$\dashv$	
16 -		]		
юа	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40.	- [	v
	taxable entity during the year?	16a	<del></del>	<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation		1	
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization'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 ►AK			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailabl	9	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	l financ	cial	
	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 and records of the organization	on. ►		
	THE ORGANIZATION - 907-225-2440			
	P. O. BOX 23320, KETCHIKAN, AK 99901			

Form	aan	(2012)	

### KETCHIKAN CHARR INC.

80-0013433

Page 7

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key 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.

Name and Title  Average hours per week (list any hours for box in less person is both an hours for box in less person is both an officer and a director/trustee)  Average hours per box, unless person is both an officer and a director/trustee)  (list any hours for box in less person is both an officer and a director/trustee)  (list any hours for box in less person is both an officer and a director/trustee)  (list any hours for box in less person is both an officer and a director/trustee)  (list any hours for box in less person is both an officer and a director/trustee)  (list any hours for box in less person is both an officer and a director/trustee)  (list any hours for box in less person is both an officer and a director/trustee)  (list any hours for box in less person is both an officer and a director/trustee)  (list any hours for box in less person is both an officer and a director/trustee)  (list any hours for box in less person is both an officer and a director/trustee)	(E) ortable ensation related	(F) Estimated amount of
hours per box, unless person is both an officer and a director/frustee) from from the organ	ensation	1
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related organizations below line) line) line)   which is the composition of the compositi		organizations
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PRESIDENT STEVEN KANTOR X X X 6,000.	0.	0.
(2) WALLY KUBLEY 5.00		
VICE PRESIDENT X X X 0.	0.	0.
(3) DONNA LUTHER 1.00	<u>_</u>	
SECRETARY/TREASURER X X X 0.	0.	0.
(4) ANN SIMMONS 1.00		
VP - SPECIAL PROJECTS X X X 0.	0.	0.
(5) LANDON MORGAN 1.00	<del> </del>	
VP - SPECIAL PROJECTS X X X 0.	0.	0.
(6) CARRIE MCLAUGHLIN 1.00		
GENERAL MEMPERSHIP REP X X X 0.	0.	0.
(7) STEVE TURNER 1.00		
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Part VII   Section A. Officers, Directors, Trus	tees, Key Em	ploy	<u>ees</u>	, an	<u>d Hi</u>	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	/,,	not c		ition		ane	Reportable	Reportable		E:	stimat	ed
	hours per	box	, unle	ss pe	erson	is bot	th an	compensation	compensatio	n i	ar	nount	of
	week	-	cer an	nd a d	irecto	or/trus	stee)	from	from related	- 1		other	
	(list any	individual trustee or director				Į.		the	organizations		com	pensa	ation
	hours for	ŧ		ļ	ļ	喜		organization	(W-2/1099-MIS	iC)	fı	rom th	10
	related	寶	ruste	l		E S		(W-2/1099-MISC)			org	anıza	tion
	organizations	al tro	Institutional trustee		Key employee	Highest compensated employee					an	d rela	ted
	below	흫	聲	Officer	를	pest Pest	<b>E</b>				orga	anızat	ions
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								0,000.					0.
c Total from continuation sheets to Part V									<del></del>	0.			0.
d Total (add lines 1b and 1c)						<u> </u>	_	6,000.		0.			_0
2 Total number of individuals (including but n	ot ilmited to th	ose	liste	d at	oove	e) wh	no re	eceived more than \$100	,000 of reportable	Э			
compensation from the organization													(
												Yes	No
3 Did the organization list any former officer,	director, or tru	stee	e, ke	y en	nplo	yee,	, or I	highest compensated e	mployee on	]	)	<u> }</u>	- 7
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su										ſ			-
and related organizations greater than \$15											4		X
5 Did any person listed on line 1a receive or a										·			
rendered to the organization? If "Yes," com							Ciat	co organization or more	dual for services	ĺ	_	ľ	v
	ipiete Scrieduii	<del>2</del> J 1	UI SL	ICH J	Ders	UII	_	<del></del>	<del></del>		_5		X
Section B. Independent Contractors									4400 000 5		<del></del>		
1 Complete this table for your five highest co										pensa	ition fi	rom	
the organization Report compensation for	the calendar y	ear e	endir	ng w	<u>/ith (</u>	or w	<u>ithin</u>		/ear				
(A)								(B)	-	_	(C		
Name and business	address	NO	NE	<u> </u>				Description of s	ervices		omper	nsatio	า 
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	-						-+						
							- 1						
2 Total number of independent contractors (	ncluding but n	ot iır	nrted	d to	thos	se lis	sted	above) who received m	ore than				
\$100,000 of compensation from the organi	zation 🕨					<u> </u>		<del></del>					

		Check if Schedule O contains a response to	any question	in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	(	Related organizations 1d	7,375. 875.			-	
ntribution d Other S	f	All other contributions, gifts, grants, and similar amounts not included above  1f  Noncash contributions included in lines 1a-1f \$					
ರ್ಷ	h	Total. Add lines 1a-1f		8,250.			,
Program Service Revenue	2 a b		Business Code				
Progra Re	d e f	All other program service revenue					-
	g	Total. Add lines 2a-2f	<b>_</b>				
-	3	Investment income (including dividends, interest other similar amounts)	🕨	68.	68.		
	5	Royalties					
	6 a		(II) Personal	,		,	,
	С	Less: rental expenses	•	,			
		Gross amount from sales of (i) Securities assets other than inventory Less: cost or other basis	(ií) Other	,	,	,	, , , , , , , , , , , , , , , , , , , ,
		and sales expenses		, ,	*		
Other Revenue	8 a		7,050.			, 1	
Othe	c	Less direct expenses b  Net income or (loss) from fundraising events  Gross income from gaming activities. See	506. ▶	6,544.	,		6,544.
	b	Part IV, line 19 a 9	48,890. 51,486.	97,404.	,	94,327.	<u>3</u> ,077.
	10 a	Gross sales of inventory, less returns and allowances a  Less cost of goods sold b			`		
			usiness Code				
	11 a b c						
		All other revenue	•				
]	12	Total revenue. See instructions.		112,266.	68.	94,327.	9,621.

Form 990 (2012) KETCHIKAN CHA
Part IX Statement of Functional Expenses

Check of Schedule Contains a electrone to any Question in this Part IX   Contains and amounts reported on flance 50,   Do not include and mans 60,   Do not include and 6	Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	omplete column (A)						
Total expenses		Check if Schedule O contains a response to any question in this Part IX									
organization in the United States. See Part IV, line 2   30 , 550   30 , 550      Grants and other assistance to individuals in the United States. See Part IV, line 2   5 , 775   5 , 775      Grants and other assistance to governments, organizations, and individuals outsade the United States. See Part IV, lines 15 and 16      Benefits paid to or for membros.    Compensation of current officers, directors, trustees, and key employees    Compensation of current officers, directors, trustees, and key employees    Compensation of current officers, directors, trustees, and key employees    Compensation of current officers, directors, trustees, and key employees    Compensation of current officers, directors, trustees, and key employees    Compensation of current officers, directors, trustees, and key employees    Compensation of current officers, directors, trustees, and key employees    Compensation of current officers, directors, trustees, and key employees    Peanon plan acrusia and comfability and persons described and section 4698(r)(3)(8)    Peanon plan acrusia and comfability and persons described and persons and comfability of the series    Payroll taxes    Payroll taxes    Conter employee benefits    Payroll taxes    Conterior of the series of the 25    Coulting (A) and 400(b) employee contributions    Office prophyse benefits    Coulting (A) and 400(b) employee contributions    Office prophyse described and series    Coulting (A) and 400(b) employee contributions    Office prophyse benefits    Office prophyse benefits    Office prophyse of the 25    Coulting (A) and 400 officers    Coulting (A) and 400(b) employee contributions    Office prophyse    Of		•	(A) Total expenses		Management and	Fundraising					
2 Grants and other assistance to individuals in the United States See Part N, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part N, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Compensation of current officers, directors, trustees, and key employees 8 Pension plan accruals and contributions (adults section 401(k)) and 403(b) employer centributions 9 Other employee benefits 10 Payroll taxes 11 Fees for services ((ind-employees)): 12 Analysement 13 Legal	1	Grants and other assistance to governments and									
the United States See Part IV, line 22 Grants and other assestance to governments, organizations, and individuals outside the United States. See Part IV, line 15 and 16 Benefits paid to for formations Compensation of current officers, directors, trustees, and key emptyoes Compensation of current officers, directors, trustees, and key emptyoes Compensation of united shows, to disqualified persons (as other dividuals should be persons (as other dividuals of the persons) Passons discribed in section 465(0(s)(9) Other enables and variety organization of the section 465(0(s)(9) Persons discribed in section 465(0(s)(9) Persons discribed in section 465(0(s)(9) Persons discribed in section 465(0(s)(9) Persons discribed in section 465(0(s)(9) Persons discribed in section 465(0(s)(9) Persons discribed in section 465(0(s)(9) Persons discribed in section 465(0(s)(9) Persons discribed in section 465(0(s)(9) Persons discribed in 465(0(s)(9) Persons discribe		organizations in the United States. See Part IV, line 21	30,550.	30,550.		- <u></u>					
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organizations, and individuals outside the United States. See Part IV, thes 15 and 16  Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees  Compensation of current officers, directors, trustees, and key employees  Compensation of undered above, to disqualified persons (as entired under section 4580(k1)) and persons described in section 4580(k1) and persons described in section 4580(k1) and persons described in section 4580(k1) and persons described in section 4580(k1) and persons described in section 4580(k1) and persons described in section 4580(k1) and persons described in section 4580(k1) and persons described in section 4580(k1) and display contributions (section 401(k) and 403(k) employee contributions)  Other employees benefits  Person plan accrusia and contributions (section 401(k) and 403(k) employee contributions)  Other organization of the section 401(k) and 403(k) employees  I Fees for services (non-employees):  a Management  Legal  C Accounting  I Fees for services (non-employees):  a Management  Legal  C Accounting  Other (I filme 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch (C)  Advantaging and promotion  J Travel  I Information technology  Royalities  Occupancy  4,169, 4,169, 4,169, 4,169, 4,399, 4		the United States See Part IV, line 22	5,775.	5,775.							
United States. See Part IV, lines 15 and 16  Benefits past for of or membras  Compensation of current officers, directors, insistes, and key employees  Compensation of current officers, directors, insistes, and key employees  Compensation of mituded above, to disqualified persons (as defined under section 4908(IVI)) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and persons described in section 4908(IVI) and 1908 (IVI)	3	Grants and other assistance to governments,	i								
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b Legal c Accounting d Lobbyring e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)  270. 270. 270. 270. 33.104.  270. 270. 270. 335.  4 Information technology 15 Royalties 6 Occupancy 4,169. 4,169. 4,169. 17 Travel 4,399. 4,169. 4,169. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 11 Payments to affiliates 22 Depreciation, depletion, and amortization 24 office repenses. Itemize expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule (L) 28 TAXES, LICENSES AND PER 29 TAXES, LICENSES AND PER 350. 350. 350. 4 John toests. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising scillation. Check here ▶ I relevant scillations. Interest Total functional expenses. Add lines 1 through 24e  3 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ I relevant 500 Per 1, 150 Per 10 Per		• •									
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f   Investment management fees   g   Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)					· · · · · · · · · · · · · · · · · · ·						
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13 Office expenses 935. 935.  14 Information technology	12	• •	270.		270.						
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18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings 2,783. 2,133. 650.  20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 4. 4.  21 Insurance 750. 750.  22 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 0.)  2a DUES AND SUBSCRIPTIONS 4,965. 4,965.  b TAXES, LICENSES AND PER 1,692. 1,692.  c MEMBERSHIP GOODWILL 600. 600.  d MISCELLANEOUS 350. 350.  e All other expenses  25 Total functional expenses. Add lines 1 through 24e 66,346. 38,458. 27,888. 0.  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here	17	<b>~</b> 1	4,399.		4,399.						
19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 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 0.) 2a DUES AND SUBSCRIPTIONS 2b TAXES, LICENSES AND PER 2c MEMBERSHIP GOODWILL 2d MISCELLANEOUS 2d All other expenses 2d Interioral expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here  interior in the line of the content of the column (B) intolowing SOP 98-2 (ASC 958-720)	18										
20   Interest		for any federal, state, or local public officials									
Payments to affiliates  Depreciation, depletion, and amortization  Insurance  Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule 0.)  DUES AND SUBSCRIPTIONS  TAXES, LICENSES AND PER  CMEMBERSHIP GOODWILL  MISCELLANEOUS  All other expenses  Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the organization reported in column (8) joint costs from a combined educational campaign and fundraising solicitation.  Check here	19	Conferences, conventions, and meetings	2,783.	2,133.	650.						
Depreciation, depletion, and amortization  1 Insurance  1 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount, list line 24e expenses on Schedule 0.)  24 DUES AND SUBSCRIPTIONS  25 TAXES, LICENSES AND PER  26 MEMBERSHIP GOODWILL  27 All other expenses  27 Total functional expenses. Add lines 1 through 24e  28 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  28 Check here	20										
Insurance  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 0.)  a DUES AND SUBSCRIPTIONS b TAXES, LICENSES AND PER c MEMBERSHIP GOODWILL d MISCELLANEOUS All other expenses  Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here	21										
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 O.)  a DUES AND SUBSCRIPTIONS  b TAXES, LICENSES AND PER  c MEMBERSHIP GOODWILL  d MISCELLANEOUS  All other expenses  25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here   if following SOP 98-2 (ASC 958-720)	22	•									
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 0.)  a DUES AND SUBSCRIPTIONS b TAXES, LICENSES AND PER c MEMBERSHIP GOODWILL d MISCELLANEOUS e All other expenses  25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here in 1 following SOP 98-2 (ASC 958-720)	23		750.		750.						
a DUES AND SUBSCRIPTIONS b TAXES, LICENSES AND PER c MEMBERSHIP GOODWILL d MISCELLANEOUS e All other expenses  Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here □ if following SOP 98-2 (ASC 958-720)	24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)			,						
b TAXES, LICENSES AND PER c MEMBERSHIP GOODWILL d MISCELLANEOUS e All other expenses  25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here  if following SOP 98-2 (ASC 958-720)	а		4,965.		4,965.	<del></del>					
c MEMBERSHIP GOODWILL 600. 600.  d MISCELLANEOUS 350. 350.  e All other expenses  25 Total functional expenses. Add lines 1 through 24e 66, 346. 38, 458. 27, 888. 0.  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here □ if following SOP 98-2 (ASC 958-720)											
d MISCELLANEOUS e All other expenses  25 Total functional expenses. Add lines 1 through 24e  66,346. 38,458. 27,888. 0.  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here in following SOP 98-2 (ASC 958-720)	_		600.								
e All other expenses  25 Total functional expenses. Add lines 1 through 24e 66,346. 38,458. 27,888. 0.  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here  if following SOP 98-2 (ASC 958-720)	_		350.		350.						
Total functional expenses. Add lines 1 through 24e 66,346. 38,458. 27,888. 0.  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here □ if following SOP 98-2 (ASC 958-720)	_										
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here Infollowing SOP 98-2 (ASC 958-720)			66,346.	38,458.	27,888.	0.					
educational campaign and fundraising solicitation.  Check here   If following SOP 98-2 (ASC 958-720)	26			•							
Check here if following SOP 98-2 (ASC 958-720)											
		educational campaign and fundraising solicitation.									
		Check here if following SOP 98-2 (ASC 958-720)									

Par	τχ_	Balance Sneet			
		Check if Schedule O contains a response to any question in this Part X		·	<u> </u>
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	81,984.	1	127,339
,	2	Savings and temporary cash investments		2	
.	3	Pledges and grants receivable, net		3	
ŀ	4	Accounts receivable, net		4	
İ	5	Loans and other receivables from current and former officers, directors,			
-	•	trustees, key employees, and highest compensated employees Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
ľ	Ü	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		1	
ļ		employers and sponsoring organizations of section 501(c)(9) voluntary		]	
		employees' beneficiary organizations (see instr). Complete Part II of Sch L	*	6	
2	7	Notes and loans receivable, net		7	
Assets		Inventories for sale or use	2,642.	8	2 946
۲ ا	8		496.		2,946 698
}	9				
	10a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 7,255.	•		
Ì			11.	10c	7.
				11	
	11	Investments - publicly traded securities		12	<del></del>
ł	12	Investments - other securities. See Part IV, line 11		13	
	13	Investments - program-related See Part IV, line 11	·- <u>-</u>	14	
ĺ	14	Intangible assets	<del></del>	15	
	15	Other assets. See Part IV, line 11	85,133.	16	130 000
	<u>16</u>	Total assets. Add lines 1 through 15 (must equal line 34)	232.	17	130,990. 169.
Ì	17	Accounts payable and accrued expenses	252.	18	105
j	18	Grants payable			
İ	19	Deferred revenue	<del></del>	19	
	20	Tax-exempt bond liabilities		20	
ies	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
<b>#</b>	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
-		Complete Part II of Schedule L		22	<del></del>
l	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	<del></del>	24	
	25	Other liabilities (including federal income tax, payables to related third			
i		parties, and other liabilities not included on lines 17-24). Complete Part X of			
ļ		Schedule D		25	1.50
	26	Total liabilities. Add lines 17 through 25	232.	26	169.
į		Organizations that follow SFAS 117 (ASC 958), check here ▶	* 1		
es		complete lines 27 through 29, and lines 33 and 34.	`• -	. 1	-
auc	27	Unrestricted net assets		27	
3ala	28	Temporarily restricted net assets	<del></del>	_28	<del></del>
β	29	Permanently restricted net assets		29	
F		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗓			
ō		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds	0.	30	0.
ASS	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	84,901.	32	130,821.
Ž	33	Total net assets or fund balances	84,901.	33	130,821.
	34	Total liabilities and net assets/fund balances	85,133.	34	130,990.

Form	990 (2012) KETCHIKAN CHARR INC.	80-001	<u>3433</u>	Pa	ige 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u>-</u>	<u> </u>	·	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u> 266.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	6	6,3	346.
3	Revenue less expenses. Subtract line 2 from line 1	3	4	5,9	20.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8	4,9	01.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	13	0,8	21.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	· · · · · · · · ·	<u></u> .		
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
<b>2</b> a	·		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:			,	
	Separate basis Consolidated basis Both consolidated and separate basis			٠,	, '
b	Were the organization's financial statements audited by an independent accountant?	-	2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,	-		
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		-	,	,
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	/		-
	review, or compilation of its financial statements and selection of an independent accountant?		2c		<u></u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O	'		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			ĺ
	Act and OMB Circular A-133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or guides, explain why in Schedule O and describe any steps taken to undergo such guides		32		ı

Form **990** (2012)

### SCHEDULE C (Form 990 or 990-EZ)

**Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations. Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A.

_	Section 501(c)(4), (5), or (6) organiza				
	ne of organization		_	Em	ployer identification number
	KETCHIK	AN CHARR INC.			80-0013433
Pa	art I-A Complete if the org	ganization is exempt unc	er section 501(c	or is a section 527	organization.
2	Provide a description of the organize Political expenditures				\$
Pa	art I-B Complete if the ord	ganization is exempt und	ler section 501(c	)(3).	
1	Enter the amount of any excise tax				\$
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495		
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
<b>4</b> a	a Was a correction made?				🔲 Yes 🔲 No
t	o If "Yes," describe in Part IV				·
Pa	art I-C Complete if the org	ganization is exempt und	ler section 501(c)	, except section 501	(c)(3).
4	Total exempt function expenditures line 17b  Did the filing organization file Form Enter the names, addresses and er made payments. For each organization tributions received that were propolitical action committee (PAC). If	1120-POL for this year?  nployer identification number (Elition listed, enter the amount pailomptly and directly delivered to			Yes No
		additional space is needed, prov			
	(a) Name	additional space is needed, prov (b) Address			(e) Amount of political contributions received and
	(a) Name	<del> </del>	vide information in Par	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization
	(a) Name	<del> </del>	vide information in Par	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization
	(a) Name	<del> </del>	vide information in Par	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization
	(a) Name	<del> </del>	vide information in Par	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization
	(a) Name	<del> </del>	vide information in Par	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization

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

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 KETC	HIKAN C	HARR INC.	- F01/a/(2) and fil	80-1	0013433 Page 2
Part II-A Complete if the organizat		npt under secut	on soricitis) and mi	eu rom 5/06	
(election under section 50		<del></del>		_ <del></del>	
A Check ► if the filing organization belo			n Part IV each affiliated	group member's nar	me, address, EIN,
expenses, and share of exc					
B Check I if the filing organization check	cked box A ar	nd "limited control" pr	ovisions apply		T
Limits on Lo	bbying Expe	nditures		(a) Filing organization's	(b) Affiliated group totals
(The term "expenditures"	means amou	ints paid or incurred	.)	totals	lotais
				•	<del> </del>
1a Total lobbying expenditures to influence pu	-	<del>-</del>			<del> </del>
b Total lobbying expenditures to influence a l	_				
c Total lobbying expenditures (add lines 1a a	ına 10)		• •	<del> </del>	
d Other exempt purpose expenditures					<del></del> -
e Total exempt purpose expenditures (add lin				-	
f Lobbying nontaxable amount Enter the am			l i		<del></del>
If the amount on line 1e, column (a) or (b) is:		bying nontaxable an			1
Not over \$500,000		the amount on line 1e			_
Over \$500,000 but not over \$1,000,000		0 plus 15% of the ex		,	
Over \$1,000,000 but not over \$1,500,000			cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000		0 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000.			-
<del></del>			<del> </del>		<del> </del>
g Grassroots nontaxable amount (enter 25%				<del></del>	<del> </del>
h Subtract line 1g from line 1a If zero or less,					<del></del>
i Subtract line 1f from line 1c if zero or less,	• •		[		
j If there is an amount other than zero on eith	ner line 1h or	ine 11, did the organiz	ation file Form 4/20	1	
reporting section 4911 tax for this year?				<u> </u>	Yes No
(Some organizations ti		raging Period Under		lete all of the five	
			es 2a through 2f on pa		
		ditures During 4-Ye			
	Doyling Exper	luitures During 4-16	ar Averaging remod		T
Calendar year	2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
(or fiscal year beginning in)	•			``	(0)
			† <del></del>		
2a Lobbying nontaxable amount					
b Lobbying ceiling amount			<del>   </del>		
(150% of line 2a, column(e))			] , ]		
(130% of life 2a, coldifictor)			<del>   </del>		<del></del>
- Total labbung expanditures			[		
c Total lobbying expenditures					<del> </del>
d Grassroots nontaxable amount		,	]		
e Grassroots celling amount					<del> </del>
(150% of line 2d, column (e))	, 		1 ,		
(10070 01 1110 22, 00101111 (0))	<del></del>				
f Grassroots lobbying expenditures			1		
			<del></del>		

Schedule C (Form 990 or 990-EZ) 2012 KETCHIKAN CHARR INC.

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

r each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	<u> </u>	ļ <sup>(</sup>	b)
the lobbying activity.	Yes	No	Am	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter	1		ļ	
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			]	
c Media advertisements?				
d Mailings to members, legislators, or the public?				
Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912			1	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(	5), or se	ection	
501(c)(6).				
			Yes	1
Were substantially all (90% or more) dues received nondeductible by members?		🔼 🚹		
		1	X	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	n 501(c)(	2 3 5), or se	ection	ne 3,
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	n 501(c)(	2 3 (5), or se R (b) Par	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	on 501(c)( "No," OF	2 3 5), or se	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	on 501(c)( "No," OF	2 3 (5), or se R (b) Par	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	on 501(c)( "No," OF	2 3 (5), or se R (b) Par	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Int III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	on 501(c)( "No," OF	2 3 (5), or se R (b) Par	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Int III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	on 501(c)( "No," OF	2 3 (5), or se R (b) Par	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total	on 501(c)( "No," OF	2 3 (5), or se R (b) Par 1 2a 2b 2c	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year  Carryover from last year  Carryover amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	on 501(c)( "No," OF	2 3 (5), or se R (b) Par 1 2a 2b 2c	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of the include amount on line 3, what portion of the excellent in the prior of	n 501(c)( "No," OF	2 3 (5), or se R (b) Par 1 2a 2b 2c	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	n 501(c)( "No," OF	2 3 (5), or se R (b) Par 1 2a 2b 2c 3	ection	
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### **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.

2012
Open to Public Inspection

Name of the organization

Employer identification number

[B-	t I Organizations Maintaining Donor Advised I	Funda or Other Similar Funda or	80-0013433
Pa	J ~ ~	-unus or Other Similar Funds of	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	(1) Danie ad mand 6 rada	(b) Farada and albania
	<del> </del>	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing		
	are the organization's property, subject to the organization's exc		L Yes No
6	Did the organization inform all grantees, donors, and donor advis		
	for charitable purposes and not for the benefit of the donor or do	onor advisor, or for any other purpose conf	
	impermissible private benefit?	··	Yes No
Par			V, line 7
1	Purpose(s) of conservation easements held by the organization (	check all that apply):	-
	Preservation of land for public use (e.g., recreation or educ	cation) Preservation of an historic	ally important land area
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structu	ıre ıncluded ın (a)	2c
ď	Number of conservation easements included in (c) acquired after	8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, releas	ed, extinguished, or terminated by the orga	anization during the tax
	year ▶		
4	Number of states where property subject to conservation easem	ent is located >	
5	Does the organization have a written policy regarding the periodi	c monitoring, inspection, handling of	<u></u>
	violations, and enforcement of the conservation easements it ho	lds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and	l enforcing conservation easements during	the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and enfo		
8	Does each conservation easement reported on line 2(d) above sa	atisfy the requirements of section 170(h)(4)	(B)(i)
	1		Yes No
9	In Part XIII, describe how the organization reports conservation e	easements in its revenue and expense stat	ement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization'	s financial statements that describes the o	rganization's accounting for
	conservation easements		
Par	t III Organizations Maintaining Collections of A		<sup>r</sup> Similar Assets.
	Complete if the organization answered "Yes" to Form 990	, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 9	58), not to report in its revenue statement	and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibit	ion, education, or research in furtherance o	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes	these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 9	58), to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, educa-	ation, or research in furtherance of public s	ervice, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		. • \$
2	If the organization received or held works of art, historical treasur	res, or other similar assets for financial gain	
	the following amounts required to be reported under SFAS 116 (a	ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

		AN CHARR I						<u>80-00</u>			
Par	t III Organizations Maintaining (										
3	Using the organization's acquisition, access	ion, and other recor	ds, chec	k any of the	following th	at are a si	gnificant i	use of its	collectio	n iten	ns
	(check all that apply)										
а	Public exhibition	•	╸╞╡		change progi						
b	Scholarly research	` (	e	Other					<del></del>		
С	Preservation for future generations										
4	Provide a description of the organization's c							se in Par	t XIII		
5	During the year, did the organization solicit of					ner sımılar	assets		_		_
	to be sold to raise funds rather than to be m								_ Yes_		No
Par	t IV Escrow and Custodial Arran		ete if the	e organizatio	on answered	"Yes" to I	Form 990	, Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod						included	<u></u>	٦	_	٦
								∟	」 Yes	<u> </u>	∟ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table			[				
				-			-		Amoun	<u> </u>	
С	Beginning balance						1c				——
d	Additions during the year		• •				1d				
e							1e				
f	Ending balance						1f -	<del></del>	7		T.:
	Did the organization include an amount on F			 on han hoor		Doet VIII			<b>」Yes</b>	<u> </u>	مN ا
Par	if "Yes," explain the arrangement in Part XIII <b>t V</b> Endowment Funds. Complete in						<del></del>				<u> </u>
	E T E LING WITCHE L'AIRES. Complete	(a) Current year	Г — —	Prior year	(c) Two year			pare hank	(a) Four	Veare	hack
4.	Reginning of year balance	(a) Culletti year	(0)	noi year	(C) 1WO year	no baok 1	uj moo y	cais back	(e) i oui	years	Dack
la L	Beginning of year balance		<del></del>	<del> </del>	<del> </del>		<del></del>				
D			<u> </u>			·			L		
ب 2	Net investment earnings, gains, and losses Grants or scholarships		<del> </del>						<del></del>		
a	Other expenditures for facilities		├─ <del>-</del>								
е						l					
	and programs							<del>-</del> -			
	End of year balance	<del></del>						-			
9 2	Provide the estimated percentage of the cur		e (line 1	a. column (a	a)) held as:						
a	Board designated or quasi-endowment	•	% %	, .	a,,						
a h	Permanent endowment										
c	Temporarily restricted endowment										
Ü	The percentages in lines 2a, 2b, and 2c shou										
32	Are there endowment funds not in the posses		ation tha	at are held a	ind administe	ered for th	e organiz	ation			
Ja	by:	, , , , , , , , , , , , , , , , , , ,					<b>-</b>			Yes	No
	(i) unrelated organizations								3a(i)		
									3a(ii)		
h	If "Yes" to 3a(ii), are the related organizations								3b		
4	Describe in Part XIII the intended uses of the							• •			
Par	t VI Land, Buildings, and Equipm							·-	-		
	Description of property	(a) Cost or o			or other	(c) Ac	cumulate	а	(d) Book	value	——— e
		basis (investr		basis	(other)	dep	reciation	j	` '		
1a	Land						-				
ь	Buildings										
	Leasehold improvements										
d	Equipment										
	Other				7,255.		7,24	18.			7.
	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colur	nn (B), line 1	10(c))						7.

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2012 KETCHIKAN CHARR INC.	<u>80-0013433</u> Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	Return
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains on investments	
b	Donated services and use of facilities	_
С	Recoveries of prior year grants	]
d	Other (Describe in Part XIII )	] {
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
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 XIII )	]
c	Add lines 4a and 4b	4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	
b	Prior year adjustments	Ī
c	Other losses	1 [
d	Other (Describe in Part XIII.) 2d	7 1
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
· ′	Investment expenses not included on Form 990, Part VIII, line 7b 4a	[, ]
b	Other (Describe in Part XIII.)	7 1
		4c
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
	rt XIII Supplemental Information	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1 e 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information of the complete this part to provide any additional information.	

Schedule D (Form 990) 2012

### SCHEDULE G

(Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open To Public Inspection

Name of the organization	KAN CHARR INC.				80-0013	entification number
	S. Complete if the organization answer	ered "\	es" to	o Form 990, Part IV, i		
Indicate whether the organization ra     a	e Solicita  f Solicita  g Special  or oral agreement with any individual  Part VII) or entity in connection with p  dividuals or entities (fundraisers) purs	ition of ition of I fundra I (inclu profess	non-g gover alsing ding o	novernment grants rnment grants events fficers, directors, true fundraising services?	stees or	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) funda have co or cor contrib	Did_ raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (ōr retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
			_			
					<del></del>	
	7	_				
						<u> </u>
Total			<b>&gt;</b>			
<ol> <li>List all states in which the organization licensing.</li> </ol>	on is registered or licensed to solicit o	contrib	utions	or has been notified	it is exempt from re	egistration
						<del></del>

		le G (Form 990 or 990-EZ) 2012 KETCHIK II Fundraising Events. Complete if the	CAN CHARR INC	HV-site Form 000 Do	80-	-0013433 Page 2
Pa	<u>π</u>	of fundraising events. Complete if the of fundraising event contributions and gr				
		or fundraising event contributions and gr	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			BEER FEST	WINE FEST	NONE	(add col. (a) through
			(event type)	(event type)	(total number)	col (c))
25			<del></del>	<del> </del>	<del> </del>	<del> </del>
Revenue	1	Gross receipts	4,900.	2,150.		7,050.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	4,900.	2,150.		7,050.
	4	Cash prizes			1	
es	5	Noncash prizes				
xpens	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment			ļ. —	
	9	Other direct expenses	358.	148.	<u> </u>	506.
	10	Direct expense summary. Add lines 4 through				506
	11	Net income summary. Combine line 3, columnary. Complete if the organization is	n (d), and line 10	OOO Dort IV Inc. 10 or	roported more than	6,544.
Pa	IT I		answered tes to rom	1990, Part IV, lifte 19, or	reported more than	
	_	\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant	Τ	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col. (c))
ven	İ		<del> </del>			(2)
Re	1	Gross revenue		924,890.	24,000.	948,890.
ses	2	Cash prizes		737,096.	10,500.	747,596.
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses		93,467.	10,423.	103,890.
			Yes%	Yes%		
	6	Volunteer labor	No No	X No	X No	<u> </u>
	7	Direct expense summary Add lines 2 through	h 5 ın column (d)		· · · · · · · · · · · · · · · · ·	( 851,486)
	8	Net gaming income summary Combine line 1	1, column d, and line 7			97,404.
	lst	ter the state(s) in which the organization opera the organization licensed to operate gaming ac 'No," explain:	ctivities in each of these			X Yes No
		ere any of the organization's gaming licenses re 'Yes," explain:				Yes X No

Sch	nedule G (Form 990 or 990-EZ) 2012 KETCHIKAN CHARR INC. 80	<u>-00134</u>	<u> 133</u>	Page 3
11	Does the organization operate gaming activities with nonmembers?	Y	es -	X No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?	y	es (	X No
13	Indicate the percentage of gaming activity operated in.			
a	a The organization's facility	. 13a		9
	b An outside facility	13b ]	100	.00 %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			_
	Name ► STEVEN M KANTOR			
	Address ► P. O. BOX 23320 - KETCHIKAN, AK 99901			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. 🗆 <b>Y</b>	'es	X No
Ė	b If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party ▶\$			
c	c If "Yes," enter name and address of the third party			
			-	
	Name -	<del></del>		
	Address >			
16	Gaming manager information:			
	Name ► STEVEN M KANTOR			
	Gaming manager compensation ► \$ 6,000.			
	Description of services provided ► THE MEMBER IN CHARGE IS RESPONSIBLE FOR T	HE DAY	TC	)
	DAY GAMING ACTIVITIES, PURCHASE OF GAMES AND DISTRIBUTION OF			
	TO VENDORS, AS WELL AS PREPARATION OF MONTHLY EXCISE TAX RE	PORTS		
	Director/officer Employee X Independent contractor			
	Mandatory distributions.			
é	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	TT V	1	
	retain the state gaming license?		es i	No
t	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	l .		
<u> </u>	organization's own exempt activities during the tax year > \$  art IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns	(w) (v)		
	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information.			
SC	CHEDULE G, PART III, LINE 16, DESCRIPTION OF SERVICES PROVIDED	):		
		-	_	
<u>TH</u>	HE MEMBER IN CHARGE IS RESPONSIBLE FOR THE DAY TO			<del></del>
<u>DA</u>	AY GAMING ACTIVITIES, PURCHASE OF GAMES AND DISTRIBUTION OF GAMES AND	MES		
TC	VENDORS, AS WELL AS PREPARATION OF MONTHLY EXCISE TAX REPORT	rs		
<u>AN</u>	ID QUARTERLY AND ANNUAL GAMING REPORTS.			
				_ <del>_</del>
	· · · · · · · · · · · · · · · · · · ·			

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Attach to Form 990. Department of the Treasury Internal Revenue Service SCHEDULE (Form 990)

2012

Open to Public Inspection

ž Employer identification number SDUCATION FUND DONATIONS 80-0013433 BUILDING AND CONVENTION KING SALMON DERBY AND (h) Purpose of grant or assistance X Yes TUND DONATIONS 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 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000 Part II can be duplicated if additional space is needed. (d) Amount of cash grant 11,544 5,001 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable 501(C)(3)501(C)(6) Enter total number of other organizations listed in the line 1 table KETCHIKAN CHARR INC. 20-8496493 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization KETCHIKAN CHARR EDUCATION FUND 1503 W. 31ST AVE. SULTE 202 or government ANCHORAGE, AK 99503 KETCHIKAN, AK 99901 Name of the organization P. O. BOX 23320 ALASKA CHARR Part I Part II

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

Schedule I (Form 990) (2012)

Schedule I (Form 990) (2012) (f) Description of non-cash assistance Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (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. (d) Amount of non-cash assistance 5.000. 775 (c) Amount of cash grant (b) Number of recipients KETCHIKAN CHARR INC. INDIVIDUAL ASSISTANCE FOR OBTAINING GED (a) Type of grant or assistance MEDICAL ASSISTANCE TO 4 INDIVIDUALS, Schedule I (Form 990) (2012) CERTIFICATES 232102 12-18-12 Part III

Page 2

80-0013433

### SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Form 990 or 990-EZ or to provide any additional information. ➤ Attach to Form 990 or 990-EZ.

Inspection

Name of the organization

KETCHIKAN CHARR INC.

Employer identification number 80-0013433

FORM 990, PART VI, SECTION A, LINE 3: THE BOARD OF DIRECTORS SHALL HAVE THE AUTHORITY TO ENTER INTO PROFESSIONAL SERVICE CONTRACTS WITH THE PRESIDENT OF THE ASSOCIATION. SUCH CONTRACTS MAY BE NEGOTIATED BY THE BOARD, WITH THE TERMS OF REMUNERATION DETERMINED BY A QUOROM OF THE BOARD. AS SUCH, THE BOARD HAS CONTRACTED OUT FOR AN INDIVIDUAL TO HANDLE THE ACTIVITIES OF THE ORGANIZATION AND REPORT ON THESE ACTIVITIES.

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS TWO CLASSES OF MEMBERS ACTIVE AND ASSOCIATE. ACTIVE MEMBERS HOLD VALID BEVERAGE DISPENSARY, RETAIL PACKAGE STORE, HOTEL, MOTEL OR RESTAURANT LICENSES IN THE KETCHIKAN REGION OF THE STATE OF ALASKA. ASSOCIATE MEMBERS ARE THOSE BUSINESSES THAT PROVIDE GOODS AND SERVICES TO ACTIVE MEMBERS AND DO NOT QUALIFY TO BE A VOTING MEMBER

FORM 990, PART VI, SECTION A, LINE 7A: THE BOARD OF DIRECTORS OF THIS ASSOCIATION SHALL BE ELECTED ANNUALLY BY THE MEMBERSHIP WITH THE EXECTION SCHEDULED BEFORE THE END OF THE CALENDAR YEAR. THE ASSOCIATION'S YEAR BEGINS JANUARY 1 AND ENDS ON DECEMBER 31.

FORM 990, PART VI, SECTION A, LINE 7B: ALL ACTIONS OF THE BOARD OF DIRECTORS MAY BE APPEALED TO THE GENERAL MEMBERSHIP UPON WRITTEN NOTICE FILED WITH THE SECRETARY-TREASURER AT ANY REGULARLY SCHEDULED MEETING.

FORM 990, PART VI, SECTION B, LINE 10B: KETCHIKAN CHARR INC. IS AFFILIATED WITH KETCHIKAN CHARR EDUCATION FUND A 501(C)(3)ORGANIZATION. THE EDUCATION FUND HAS A SEPARATE BOARD OF DIRECTORS AND THEIR OWN BYLAWS AND OPERATE

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization  KETCHIKAN CHARR INC.	Employer identification number 80-0013433
UNDER THEIR OWN CONTROL.	
FORM 990, PART VI, SECTION B, LINE 11: THE BOARD REVIEWS	THE FORMS 990 AND
990T FOR REASONABLENESS AND COMPLETENESS, ANY QUESTIONS T	THAT WERE RAISED
ARE ANSWERED PRIOR TO SENDING THE RETURN IN.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION N	AKES AVAILABLE
ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND	FINANCIAL
STATEMENTS UPON REQUEST.	

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

# Related Organizations and Unrelated Partnerships

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

2012 Open to Public Inspection

OMB No 1545-0047

Employer identification number 80-0013433

► Attach to Form 990. KETCHIKAN CHARR INC. Name of the organization

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Part I

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)
(q)
Primary activity

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

Schedule R (Form 990) 2012

N

KETCHIKAN CHARR EDUCATION FUND,

controlled entity? Yes

status (if section

Legal domicile (state or foreign country)

Name, address, and EIN of related organization

section

501(c)(3))

×

INC.

LINE 9

501(C)(3)

ALASKA

AREA YOUTH FOR EDUCATION SCHOLARSHIPS PROVIDED TO

AK

20-8496493, P. O. BOX 23320, KETCHIKAN, KETCHIKAN CHARR EDUCATION FUND, INC.

IN HOSPITALITY INDUSTRY

TO SERVE HOSPITALITY

1503 W, 31ST AVE, SULTE 202

ALASKA CHARR

99901

99503

ANCHORAGE, AK

INDUSTRY

×

ALASKA CHARR

501(C)(6)

LASKA

80-0013433 Page 2

Schedule R (Form 990) 2012 KETCHIKAN CHARR INC.

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.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	Predoming (related, excluded fre	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income		Share of Disend-of-year ate assets Y	(h) Disproportionate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing X managing Destrict Destrict Solution	(i) (k) General or Percentage managing ownership Pather?
			,						<b> </b>	4/10	<u>×</u>	
N/A									4	W N	4	
						<u>I</u>						
							Me.					
Part IV Identification of Related Organizations Taxable as a Corporation organizations treated as a corporation or trust during the tax year )	rganizations Taxable a prporation or trust during	as a Corp	oration or Trust (Cyear)	omplete if th	ne organizatic	on answered	1 "Yes" to For	n 990, Part	IV, line 34	or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related	d one or mo	ore related
(a) Name, address, and EIN of related organization	EIN	Prin	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership	Section 512(bX13) controlled entity?
N/A		; ;					-					
						<del></del>	-	-			i	
		3						į			a de la companya de l	
232162 12-10-12 ,		İ					-		<u> </u>  - 	Sched	ule R (For	Schedule R (Form 990) 2012

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				L	٦	Yes	٩
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more rel	ated organizations listed ii	n Parts II-IV?		$\dashv$	$\dashv$	1
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity					-+	+	×
<ul> <li>b Gift, grant, or capital contribution to related organization(s)</li> </ul>			: :	<u> </u>	th X	+	1
c Gift, grant, or capital contribution from related organization(s)	٠				10	7	×
d Loans or loan guarantees to or for related organization(s)		•			19		×
e Loans or loan guarantees by related organization(s)		•		<u> </u>	<u>e</u>	^	×
f Dividends from related organization(s) .			_		=	7	×
g Sale of assets to related organization(s)		:			19	7	×
h Purchase of assets from related organization(s)					¥	7	ы
i Exchange of assets with related organization(s)					=	7	×
j Lease of facilities, equipment, or other assets to related organization(s)	٠			<u>.                                    </u>	<u>;</u>	7	×
k Lease of facilities, equipment, or other assets from related organization(s)					*	_	×
I Performance of services or membership or fundraising solicitations for related organization(s)	ınizatıon(s)	: .			=	7	×
m Performance of services or membership or fundraising solicitations by related organization(s)	ınizatıon(s)			<u> </u>	투	7	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			l	두	7	×
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>				<u>'</u>	9	7	×
p Reimbursement paid to related organization(s) for expenses	•	: .			리	7	×
q Reimbursement paid by related organization(s) for expenses		٠.			무	×	
							;
					<u> </u>		4 >
	4 - 4-1				SI		ا
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete tr	ils line, including covered i	relationships and transaction thresholds.				1
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	ınt involv	p <sub>a</sub>		
(1) N/A		0			]		
(2)							
(3)							
(4)							1
(5)					į		
(9)							
232163 12-10-12			Sched	Schedule R (Form 990) 2012	orm 9	90) 20	12

80-0013433 Page 4

Schedule R (Form 990) 2012 KETCHIKAN CHARR INC.

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

(a) (b) (c) (d)	(q)	(5)	(p)	(e)	<b>(£)</b>	(6)	3	6	5	3
Name, address, and EIN of entity	Primary activity	nicile breign	t incomerelated,	Are all partners sec 501(c)(3)	윤 구	Share of end-of-year	Dispropor- tionate	Obsproper Code V-UBI General or Percentage unate amount in box 20 managing ownership	General c	Percentage ownership
		country)	under section 512-514)	(es No		assets	Yes No	Form 1065)	Yes No	
				_			_			
			-							
N/A				×			7	X N/A		X
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								Schedule	R (For	Schedule B (Form 990) 2012
									j :-	!: ^2 /^^ !!

Schedule R (Form 990) 2012 KETCHIKAN CHARR INC.  Part VII   Supplemental Information	80-0013433	Page
Complete this part to provide additional information for responses to questions on Schedu	le R (see instructions)	
Complete this part to provide additional information to teaponees to quastion of teaponees to qu		
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Schedule R (Form 990) 2012